



Blue Shield TotalDual 计划 (HMO D-SNP)

2024 年医疗服务提供者名录

县名 : San Diego

H2819_23_380B_C 07172023

Blue Shield of California 是 Blue Shield Association 的独立被许可人

Blue Shield TotalDual 计划 | 2024 年医疗服务提供者名录

简介

此提供者名录包含有关 Blue Shield TotalDual 计划中的提供者类型的信息，以及截至此名录发布之日该计划的所有提供者名单。名单包含地址和联系信息以及其他详细信息，例如运营日期和小时数、专业和技能。在《承保证明》最后一章中按字母顺序列出了关键术语及其定义。

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†DSNP Provider that is also Medi-Cal enrolled/ Proveedor de DSNP que también está inscrito en Medi-Cal



如果您有任何疑问，请致电 Blue Shield TotalDual 计划，电话：1-800-452-4413 (TTY: 711)，服务时间为每周 7 天上午 8:00 至晚上 8:00。此为免费电话。如需了解更多信息，请访问 www.blueshieldca.com/medicare

A. 免责声明

- ❖ 此名录列出了医疗保健专业人员（如医生、执业护士和心理学家）和机构（如医院或诊所）。此名录还列出了您作为 Blue Shield TotalDual 计划会员可以使用的长期服务和支持 (LTSS) 提供者（例如成人日间健康和家庭健康提供者）。我们还列出了您可以购买处方药的药房。
- ❖ 此名录中将其统称为“网络提供者”。上述提供者与我们签订了合同，共同为您提供服务。此为 Blue Shield TotalDual 计划在 San Diego 县的网络提供者名单。
- ❖ 您可以免费取得此文件的其他格式版本，例如大字版、盲文或音讯版。请致电 1-800-452-4413 (TTY: 711)，服务时间为每周 7 天的上午 8:00 至晚上 8:00。此为免费电话。
- ❖ 我们提供免费翻译服务，回答您有关我们医疗或药物计划的任何问题。如需口译员，请致电 1-800-452-4413。将有会说英语、西班牙语、阿拉伯语、波斯语、亚美尼亚语、高棉语、韩语、俄语、菲律宾语或越南语的人士为您提供帮助。此为免费服务。您可以提出长期请求，要求现在和将来以英语以外的语言或其他格式获取此文档。如需提出请求，请联系 Blue Shield TotalDual Plan，客户服务团队将保留您的首选语言和格式，以备将来沟通之用。如需根据您的偏好进行任何更改，请联系 Blue Shield TotalDual 计划。
- ❖ 此名录的更新日期为 10/07/2024 日，但您需要知道：
 - 某些 Blue Shield TotalDual 计划网络提供者可能在此名录发布后，从我们的网络中添加或删除。
 - 我们网络中的某些 Blue Shield TotalDual 计划提供者可能不再接受新会员。如果您在寻找接受新会员的提供者时遇到困难，请致电客户服务部 1-800-452-4413 (TTY: 711)，我们将为您提供帮助。
 - 如需获取有关您所在地区的 Blue Shield TotalDual 计划网络提供者的最新信息，请访问 www.blueshieldca.com/medicare 或致电客户服务部 1-800-452-4413 (TTY: 711)，服务时间为每周 7 天的上午 8:00 至晚上 8:00。此为免费电话。

Blue Shield TotalDual 计划网络中的医生和其他医疗保健专业人员列在第 13-2686 页。

您可以使用目录后面的索引来查找提供者的页面位置。

B. 关于 Blue Shield TotalDual 计划网络提供者的背景信息

B1. 关键术语

本节将介绍我们名录中的关键术语。

- **提供者**指专业人士，例如医生、护士、药剂师、治疗师和其他提供护理和服务的人士。**服务**指包括医疗保健、长期服务和支持 (LTSS)、用品、处方药、设备和其他服务。
 - 提供者指包括医院、诊所等提供医疗服务和医疗设备的场所。还包括您作为 Blue Shield TotalDual 计划会员可以使用的 LTSS 提供者。
 - 属于我们计划网络一部分的提供者统称为网络提供者。
- **网络提供者**已与我们签订合同，为我们计划的会员提供服务。网络内提供者参与我们的计划。这意味着他们接受我们计划的会员，并提供我们计划承保的服务。当您使用网络提供者时，您通常无需为承保服务支付任何费用。
- **主治医生 (PCP)**是为您提供常规医疗保健的内科医生、家庭医生、全科医生或专科医生。您的 PCP 将保存您的医疗记录，并随着时间的推移了解您的健康需求。如果您需要专科医生或其他提供者，您的 PCP 也会为您提供转诊。
- **专科医生**是为特定疾病或身体部位提供医疗保健服务的医生。专科医生有很多种。下面是一些示例：
 - 肿瘤专科医生为癌症患者提供医疗护理。
 - 心脏专科医生为心脏病患者提供医疗护理。
 - 骨专科医生为患有某些骨骼、关节或肌肉疾病的患者提供医疗护理。
- **医疗团体或独立医师协会 (IPA)**是遵照 California 州法律成立的组织，其与健康计划签订合同，共同为健康计划参保人提供或安排提供医疗保健服务。请参阅 B3 部分了解更多信息。
- 您可能需要**转诊**或**事先授权**才能向专科医生或并非您 PCP 的人士看诊。**转诊**代表您的网络 PCP 必须先给予您批准，然后才能使用其他提供者。**事先授权**不同于转诊。这代表 Blue Shield TotalDual 计划（并非您的网络 PCP）必须**事先**给予您批准，然后我们才能承保特定服务、项目或药物或网络外提供者。如果您未获得转诊或事先授权，Blue Shield TotalDual 计划可能不承保服务、项目或药物。
 - 以下情况**不需要**转诊或事先授权：
 - 急诊护理。
 - 紧急护理；
 - 当您身处计划服务区域之外时，在 Medicare 认证的透析机构获得的肾透析服务；
 - 女性健康专科医生的服务；或
 - Medicare 承保的所有预防服务，包括筛查和疫苗。

†DSNP Provider that is also Medi-Cal enrolled/ Proveedor de DSNP que también está inscrito en Medi-Cal
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- 此外，如果您有资格从印第安医疗服务提供者那里获得服务，则您可在没有转诊的情况下使用这些提供者。我们必须向印第安医疗服务提供者支付相关服务费用，即使其不在我们计划网络内。
- 有关转诊和事先授权的更多信息，请参阅承保证明第 3 章。
- 还将为您分配一个**护理团队**。您的**护理团队**从您和 PCP 之间建立联系开始。护理团队可能包括护理人员、Care Navigator、专科医生和其他人士，具体取决于您护理计划中呈现的需求级别。护理团队的每个人都通力合作，以确保您获得所需护理。这表示他们会确保您获得所有需要的检测、化验和其他护理，并将结果与相应的提供者共享。这也表示您的 PCP 应该知道您服用的所有药物，以便减少任何负面影响。在与其他提供者共享您的医疗信息之前，您的 PCP 将始终首先取得您的许可。护理团队成员可能包括：
 - **Care Navigator**，可帮助您管理您的医疗提供者和服务。
 - 您的**主治医生**

如果您需要专科医生或其他医疗保健提供者，您的医疗团体还将帮助您寻找其他医疗、行为健康或长期服务和支持 (LTSS) 提供者。这样，您将找到合适的提供者来帮助您解决问题。

B2. 初级保健和行为健康的等待时间

我们必须在以下时间范围内为您提供初级保健和行为健康服务：

- 对于紧急或急诊情况，立即提供服务；
- 对于非紧急或急诊但您需要医疗护理的情况，在 7 天内提供服务；
- 对于常规或预防性护理，在 30 天内提供服务。

B3. 如何选择主治医生 (PCP)

首先，您需要选择一名主治医生 (PCP)。您可以让专科医生担任您的 PCP。如果专科医生同意提供 PCP 传统上提供的所有服务，您可以选择专科医生作为您的 PCP。如需请求您的专科医生成为您的 PCP，请联系 Blue Shield TotalDual 计划客户服务部。您可以选择我们网络中任何接受新会员的 PCP。

我们计划的 PCP 隶属于医疗团体。当您选择 PCP 时，您也在选择附属医疗团体。这代表您的 PCP 会将您转诊至同样隶属于其医疗团体的专科医生和服务。

- 如果您想使用特定的专科医生或医院，请务必了解他们是否隶属于您的 PCP 的医疗团体。您可以查看此名录或询问 Blue Shield TotalDual 计划客户服务部，以检查您希望选择的 PCP 是否向该专科医生转诊或使用该医院。
- 如果您不在 PCP 的医疗团体内，Blue Shield TotalDual 计划可能不承保该服务。

如需选择 PCP，请参阅第 13-2686 页的医生名单并选择医生：

- 您目前看访的医生，或
- 由您信任的人推荐的医生，或

- 其办公地点距您很近的医生。
- 如果您未在我们的网络中选择 PCP，Blue Shield TotalDual 计划将为您选择一位。
- 如果您在选择 PCP 时需要帮助，请致电客户服务部：1-800-452-4413 (TTY: 711)，服务时间为每周 7 天的上午 8:00 至晚上 8:00。此为免费电话。或访问 www.blueshieldca.com/medicare
- 如果您对是否承保您想要或需要的任何服务或护理有疑问，请与您的护理团队联系或致电客户服务部 1-800-452-4413 (TTY: 711)，并在您获得服务或护理之前进行询问。

B4. 长期服务和支持 (LTSS) 提供者

您作为 Blue Shield TotalDual 计划会员在有需要时将能够获得长期服务和支持 (LTSS)，例如基于社区的成人日间服务 (CBAS)、提供护理服务、物理、职业和言语治疗、治疗活动，以及社区中心的膳食。此外，居家支持服务 (IHSS) 是面向没有护理帮助就无法安全留在家中的人提供的家庭护理。LTSS 帮助有需要的人士完成日常生活任务，例如洗澡、穿衣、做饭和服药。这些服务大多在您的家中或社区提供，但也可以在疗养院或医院提供。

如果您需要 LTSS，您的 Care Navigator 或 MSSP 可以帮助您和您的护理团队确定哪些选项能够以您想要的方式为您提供支持。

B5. 如何访问 Blue Shield TotalDual 计划的网络提供者

您必须从我们网络内隶属于您 PCP 医疗团体的提供者处获得所有承保服务。如果您使用的提供者不在 Blue Shield TotalDual 计划的网络中，并且不隶属于您的 PCP 医疗团体（未经事先授权），则您必须支付账单。

事先授权是指在您获得服务之前，Blue Shield TotalDual 计划批准您寻求我们网络之外的服务或获得我们网络未常规承保的服务。

此规则的唯一例外是，当您需要紧急或急诊护理或透析并且无法联系计划提供者时，例如当您不在家时。如果 Blue Shield TotalDual 计划事先给予许可，您也可以前往计划外或 PCP 的医疗团体以外寻求其他非紧急服务。

- 您可以在一年中的任何时间更换网络内的提供者。如果您已使用网络提供者，不要求必须持续使用同一提供者。对于某些提供者，您可能需要 PCP 的转诊。只要我们在当月 20 日之前收到您更改 PCP 的请求，则将在下个月的第一天生效。如需更改您的 PCP，请致电客户服务。请在致电时务必告知客户服务部，您是正在使用专科医生，还是接受其他需要 PCP 批准的承保服务（例如家庭健康服务和耐用医疗设备）。客户服务部将帮助确保您在更换 PCP 时可以继续接受您的专业护理和其他服务。客户服务部还将核查您要更换到的 PCP 是否正在接受新患者。客户服务部将更改您的会员记录，以显示您新 PCP 的姓名，并告诉您对新 PCP 的更改何时生效。客户服务部还将向您发送一张新的会员卡，其中显示您的新 PCP 的姓名和电话号码。
- 请记住，我们计划的 PCP 隶属于医疗团体。如果您更改了 PCP，您可能还会更改了医疗团体。当您要求更改时，请务必告诉客户服务部您是否正在使用专科医生或获得其他需要 PCP 批准的承保服务。客户服务部将帮助确保您在更换 PCP 时可以继续接受您的专业护理和其他服务。

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如果您有任何疑问，请致电 Blue Shield TotalDual 计划，电话：1-800-452-4413 (TTY: 711)，服务时间为每周 7 天上午 8:00 至晚上 8:00。此为免费电话。如需了解更多信息，请访问 www.blueshieldca.com/medicare



- Blue Shield TotalDual 计划与我们网络中的所有提供者合作，以满足残障人士的需求。在适用情况下，此名录中的网络提供者名单包括有关他们提供的住宿信息。
- 如果您需要医疗服务提供者，但不确定他们是否提供您需要的住宿服务，Blue Shield TotalDual 计划可以为您提供帮助。请与您的 Care Navigator 联系以获取帮助。

C. Blue Shield TotalDual 计划的网络提供者名单

名录的这一部分包括参与并接受 Blue Shield TotalDual 计划的 Blue Shield TotalDual 计划网络提供者名单。其中包含：

- **医疗保健专业人员**，包括主治医生、专科医生、行为健康提供者、牙科服务提供者和视力服务提供者；
- **机构**，包括医院、护理机构和行为健康机构；以及
- **支持服务提供者**，包括长期服务和支持 (LTSS) (例如，成人日间健康) 和社区支持服务 (例如，同伴支持)。

Medi-Cal 牙科管理式医疗提供者列在牙科管理式医疗计划的网站上。牙科管理式护理计划目前的名称为 Liberty Dental 计划、Access Dental 计划和 Health Net of California。可以根据提供者名称、地址、城市、邮政编码、专业或所使用的语言进行搜索。有关当前计划的信息，您还可以通过以下方式联系 Health Care Options 寻求帮助：800-430-4263 (TTY 用户致电 1-800-430-7077)，服务时间为周一至周五上午 8:00 至下午 6:00。

Medi-Cal 牙科按服务收费的提供者列在 Smile, California 网站的提供者名录中：

www.dental.dhcs.ca.gov/find-a-dentist/home。可以根据地址、城市、邮政编码、专业或所使用的语言进行搜索。除了搜索注册牙科提供者的提供者名录外，还有一份由 Smile, California 列出的注册牙科保健医生名单。

San Mateo 的牙科服务由 San Mateo 健康计划 (HPSM) 承保。提供者名录列在该计划的网站上。可以根据提供者名称或邮政编码进行搜索。

文化能力培训是针对我们的医疗保健提供者的额外指导，帮助他们更好地了解您的背景、价值观和信仰，以调整服务并满足您的社会、文化和语言需求。

按姓氏的字母顺序列出提供者。您还可以在目录末尾的索引中，找到提供者的名称和包含提供者其他联系信息的页面。按姓氏的字母顺序在索引中列出提供者。除了联系信息外，提供者名录还包括专业和技能，例如使用的语言或已完成的文化能力培训。

Blue Shield TotalDual 计划网络由以下部分组成：

PCP 总数：2827

专科医生总数：2696

医院总数：21

针灸和脊椎按摩治疗提供者总数：No Data

牙科提供者总数：No Data

家庭保健服务总数：1

心理健康提供者总数：356

视力健康提供者总数：467

长期服务和支持提供者总数：No Data

心理健康机构总数：No Data

专业护理机构总数：87

其他服务提供者：1

C1. 网络提供者名单 附属医院

ENCOMPASS HEALTH REHABILITATION HOSPITAL OF MURRIETA

Effective as of 01-AUG-20

📍 35470 WHITEWOOD RD
MURRIETA, CA 92563

HEMET GLOBAL MEDICAL CENTER

Effective as of 01-JAN-20

📍 1117 E DEVONSHIRE AVE
HEMET, CA 92543

Birthing Friendly: Y

HOAG HOSPITAL IRVINE

Effective as of 01-FEB-14

📍 16200 SAND CANYON AVE
IRVINE, CA 92618

HOAG ORTHOPEDIC INSTITUTE

Effective as of 01-JAN-12

📍 16250 SAND CANYON AVE
IRVINE, CA 92618

KINDRED HOSPITAL SAN DIEGO

Effective as of 01-JAN-12

📍 1940 EL CAJON BLVD
SAN DIEGO, CA 92104

MENIFEE GLOBAL MEDICAL CENTER

Effective as of 01-JAN-20

📍 28400 MCCALL BLVD
SUN CITY, CA 92585

MISSION HOSPITAL LAGUNA BEACH

Effective as of 01-JAN-10

📍 31872 COAST HWY

LAGUNA BEACH, CA 92651

PALOMAR HEALTH

Effective as of 01-JAN-12

📍 15615 POMERADO RD
POWAY, CA 92064

Birthing Friendly: Y

PALOMAR MEDICAL CENTER

Effective as of 01-JAN-12

📍 2185 CITRACADO PKWY
ESCONDIDO, CA 92029

PARADISE VALLEY HOSPITAL

Effective as of 01-AUG-12

📍 2400 E 4TH ST
NATIONAL CITY, CA 91950

PROVIDENCE MISSION HOSPITAL

Effective as of 01-JAN-10

📍 27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691

Birthing Friendly: Y

SADDLEBACK MEMORIAL MED CTR

Effective as of 01-JAN-12

📍 24451 HEALTH CENTER DR
LAGUNA HILLS, CA 92653

Birthing Friendly: Y

SCRIPPS GREEN HOSPITAL

Effective as of 01-JAN-12

📍 10666 N TORREY PINES RD
MS 220
LA JOLLA, CA 92037

SCRIPPS MEMORIAL HOSPITAL

Effective as of 01-JAN-12

📍 9888 GENESEE AVE
LA JOLLA, CA 92037

Birthing Friendly: Y

SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Effective as of 01-JAN-12

📍 354 SANTA FE DR
ENCINITAS, CA 92024

Birthing Friendly: Y

SCRIPPS MERCY HOSPITAL

Effective as of 01-JAN-12

📍 4077 5TH AVE
SAN DIEGO, CA 92103

Birthing Friendly: Y

SCRIPPS MERCY HOSPITAL CHULA VISTA

Effective as of 01-JAN-12

📍 435 H ST
CHULA VISTA, CA 91910

SELECT SPECIALTY HOSPITAL SAN DIEGO

Effective as of 01-JAN-12

📍 555 WASHINGTON ST
SAN DIEGO, CA 92103

TRI CITY MEDICAL CTR

Effective as of 01-JAN-12

📍 4002 VISTA WAY
OCEANSIDE, CA 92056

Birthing Friendly: Y

UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER

Effective as of 11-DEC-23

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

C1. 网络提供者名单 附属医院

UCSD LA JOLLA JOHN SALLY THORNTON

Effective as of 01-OCT-14

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

UCSD MEDICAL CTR

Effective as of 01-OCT-14

 200 W ARBOR DR
SAN DIEGO, CA 92103




Birthing Friendly: Y

C1. 网络提供者名单




紧急护理中心

此计划为网络内和网络外急需的服务提供保障。有关网络紧急护理中心的最新名单，请联系您的医疗团体。




BAHIA FAMILY MEDICAL GROUP INC

 584 E ST
CHULA VISTA, CA 91910
 (619) 420-1378
 M-F 8:00AM-5:30PM




CONCENTRA URGENT CARE

 5810 EL CAMINO REAL STE A
CARLSBAD, CA 92008
 (866) 944-6046
 M-F 7:00AM-6:00PM




CONCENTRA URGENT CARE

 542 BROADWAY STE G
CHULA VISTA, CA 91910
 (866) 944-6046
 M-F 8:00AM-6:00PM




CONCENTRA URGENT CARE

 860 W VALLEY PKWY STE 150
ESCONDIDO, CA 92025
 (760) 740-0707
 M-F 8:00AM-5:00PM




CONCENTRA URGENT CARE

 15751 ROCKFIELD BLVD
IRVINE, CA 92618
 (866) 944-6046
 M-F 8:00AM-5:00PM




CONCENTRA URGENT CARE

 7862 EL CAJON BLVD
LA MESA, CA 91942
 (866) 944-6046
 M-F 8:00AM-5:00PM




CONCENTRA URGENT CARE

 22741 LAMBERT ST STE 1608
LAKE FOREST, CA 92630
 (866) 944-6046
 M-F 8:00AM-5:00PM




CONCENTRA URGENT CARE

 25115 MADISON AVE
MURRIETA, CA 92562
 (866) 944-6046
 M-F 8:00AM-7:00PM




CONCENTRA URGENT CARE

 102 MILE OF CARS WAY
NATIONAL CITY, CA 91950
 (866) 944-6046
 M-F 7:00AM-7:00PM




CONCENTRA URGENT CARE

 3910 VISTA WAY STE 106
OCEANSIDE, CA 92056
 (866) 944-6046
 M-F 8:00AM-5:00PM

CONCENTRA URGENT CARE

 10350 BARNES CANYON RD STE 200
SAN DIEGO, CA 92121
 (858) 455-0044
 M-F 8:00AM-5:00PM

CONCENTRA URGENT CARE

 7590 MIRAMAR RD STE C
SAN DIEGO, CA 92126
 (866) 944-6046
 M-F 8:00AM-5:00PM

CONCENTRA URGENT CARE




 5575 RUFFIN RD STE 100
SAN DIEGO, CA 92123
 (866) 944-6046

CONCENTRA URGENT CARE




 5333 MISSION CENTER RD

STE 100
SAN DIEGO, CA 92108
 (866) 944-6046




CONCENTRA URGENT CARE

 3930 4TH AVE STE 200
SAN DIEGO, CA 92103
 (866) 944-6046
 M-F 8:00AM-5:00PM




CONCENTRA URGENT CARE

 740 NORDAHL RD STE 131
SAN MARCOS, CA 92069
 (866) 944-6046
 SU 8:00AM-5:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-5:00PM




CONCENTRA URGENT CARE

 9745 PROSPECT AVE STE 100
SANTEE, CA 92071
 (866) 944-6046
 M-F 7:00AM-5:00PM

DOCTORS EXPRESS OF OCEANSIDE INC

 4171 OCEANSIDE BLVD STE 109
OCEANSIDE, CA 92056
 (760) 216-6253
 SU-SA 8:00AM-8:00PM

EAST COUNTY URGENT CARE




 1625 E MAIN ST STE 100
EL CAJON, CA 92021
 (619) 442-9896
 SU 9:00AM-4:00PM
M-F 8:00AM-7:00PM
SA 9:00AM-4:00PM

HOAG CLINIC




 26671 ALISO CREEK RD STE 101

C1. 网络提供者名单




紧急护理中心

 ALISO VIEJO, CA 92656
 (949) 791-3107
 SU 8:00AM-5:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-5:00PM




HOAG CLINIC

 26672 PORTOLA PKWY STE 100
FOOTHILL RANCH, CA 92610
 (949) 557-0710
 SU 8:00AM-5:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-5:00PM




HOAG CLINIC

 8607 IRVINE CENTER DR
IRVINE, CA 92618
 (949) 557-0600
 SU 8:00AM-5:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-5:00PM

HOAG CLINIC




 16205 SAND CANYON AVE STE 100D
IRVINE, CA 92618
 (949) 557-0000
 SU 8:00AM-5:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-5:00PM

HOAG CLINIC




 21115 NEWPORT COAST DR
NEWPORT BEACH, CA 92657
 (949) 557-0730
 SU 8:00AM-5:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-5:00PM

MARQUE URGENT CARE




 25482 MARGUERITE PKWY STE 101

 MISSION VIEJO, CA 92692
 (949) 760-9222
 SU 8:00AM-8:00PM
M-F 8:00AM-9:00PM
SA 8:00AM-8:00PM



MARQUE URGENT CARE

 22461 ANTONIO PKWY RANCHO SANTA MARGARITA, CA 92688
 (949) 760-9222
 SU 8:00AM-6:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-8:00PM




MARQUE URGENT CARE

 4490 FANUEL ST
SAN DIEGO, CA 92109
 (949) 760-9222
 SU 9:00AM-5:00PM
M-F 9:00AM-8:00PM
SA 9:00AM-8:00PM



MISSION HERITAGE MED GRP

 27231 LA PAZ RD STE A
LAGUNA NIGUEL, CA 92677
 (949) 643-9111




MISSION HERITAGE MED GRP

 26800 CROWN VALLEY PKWY STE 150
MISSION VIEJO, CA 92691
 (949) 276-2111
 SU 9:00AM-5:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-8:00PM




OPTUM

 145 THUNDER DR
VISTA, CA 92083
 (760) 941-9002

SAND CANYON URGENT CARE MED CTR

 15775 LAGUNA CANYON RD STE 100
IRVINE, CA 92618
 (949) 417-0272
 SU 11:00AM-5:00PM
M-F 8:00AM-8:00PM
SA 9:00AM-5:00PM

SOUTHBAY URGENT CARE INC

 1628 PALM AVE
SAN DIEGO, CA 92154
 (619) 591-9999
 SU 10:00AM-6:00PM
M-F 9:00AM-8:00PM
SA 10:00AM-6:00PM

C1. 网络提供者名单 主治医生

GENERAL PRACTICE

THOMAS, SEAN, MD^{M†}

Provider ID: 100112751013

📍 15 MAREBLU STE 310
ALISO VIEJO, CA 92656

☎ (949) 831-1001

📄 French, Spanish

Effective as of 01-APR-19

INTERNAL MEDICINE

HERMAN, SAM, MD^M

Provider ID: 100414181004

📍 26671 ALISO CREEK RD STE
206
ALISO VIEJO, CA 92656

☎ (949) 791-3104

Effective as of 01-SEP-23

KAYE, SHAWN, MD^M

Provider ID: 100347353012

📍 26671 ALISO CREEK RD STE
206
ALISO VIEJO, CA 92656

☎ (949) 791-3104

Effective as of 01-JAN-21

FQHC

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,

Provider ID: PG0094125003

📍 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

☎ (619) 662-4100

Teleservice

Effective as of 01-JAN-21

FAMILY PRACTICE

AJIR, MAHYAR, DO^{M†}

Provider ID: 100067406005

📍 2801 JEFFERSON ST
CARLSBAD, CA 92008

☎ (760) 729-4952

📄 Farsi, Persian, Spanish

Effective as of 01-APR-16

CHAVEZSANTOS, MARIA, MD^F

Provider ID: 100433794004

📍 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008

☎ (760) 736-6767

📄 Spanish

Effective as of 01-AUG-24

KORFF, GARY, MD^{M†}

Provider ID: 100021811011

📍 2910 JEFFERSON ST STE
100

CARLSBAD, CA 92008

☎ (760) 729-7186

📄 Spanish

Effective as of 01-JAN-23

PEREZ, RONALD, MD^{M†}

Provider ID: 100323488011

📍 1207 CARLSBAD VILLAGE
DR STE A
CARLSBAD, CA 92008

☎ (760) 896-3030

📄 Spanish, Tagalog

Effective as of 01-JAN-20

VOURLITIS, MELISSA, DO^{F*}

Provider ID: 100090572021

📍 2855 CARLSBAD BLVD
CARLSBAD, CA 92008

☎ (858) 832-2500

Teleservice

Effective as of 01-NOV-23

FQHC

TRUECARE,

Provider ID: PG0092587007

📍 1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

☎ (760) 736-6767

Teleservice

Effective as of 01-JUL-22

GENERAL PRACTICE

KREMER, ARNOLD, DO^M

Provider ID: 100023664010

📍 5814 VAN ALLEN WAY STE
215

CARLSBAD, CA 92008

☎ (760) 444-5544

📄 French, Spanish

Teleservice

Effective as of 01-APR-23

INTERNAL MEDICINE

CHONG, YOO JIN, MD^{M†}

Provider ID: 100055662004

📍 5930 PRIESTLY DR
CARLSBAD, CA 92008

☎ (760) 434-6060

📄 Korean

Effective as of 01-NOV-21

CHONG, MARIBETH, MD^F

Provider ID: 100092861004

📍 5930 PRIESTLY DR
CARLSBAD, CA 92008

☎ (760) 434-6060

📄 Spanish, Tagalog

Effective as of 01-NOV-21

CHONG, YOO JIN, MD^{M†}

Provider ID: 100055662003

📍 5930 PRIESTLY DR
CARLSBAD, CA 92008

☎ (760) 434-6060




📄 Korean

Effective as of 01-NOV-21



CHONG, MARIBETH, MD^F

Provider ID: 100092861003

C1. 网络提供者名单 主治医生




 5930 PRIESTLY DR
CARLSBAD, CA 92008
 (760) 434-6060
 Spanish, Tagalog
Effective as of 01-NOV-21

HALL, ANDREW, MD^{M†}




Provider ID: 100089811012
 2910 JEFFERSON ST STE
100
CARLSBAD, CA 92008
 (760) 729-7186
Effective as of 01-DEC-22

FAMILY PRACTICE




ALANIZ, MATEO, MD^{M†}

Provider ID: 100220769002
 678 3RD AVE
CHULA VISTA, CA 91910
 (619) 662-4100
 Spanish
Effective as of 01-NOV-14



ALANIZ, MATEO, MD^{M†}

Provider ID: 100220769006
 678 3RD AVE
CHULA VISTA, CA 91910
 (619) 662-4100
 Spanish
Effective as of 01-JAN-21

ALB, SIMONA, MD^{F†}




Provider ID: 100033656019
 480 4TH AVE STE 202
CHULA VISTA, CA 91910
 (619) 427-3361
 Romanian
Effective as of 01-SEP-22

ALB, SIMONA, MD^{F†}




Provider ID: 100033656005
 480 4TH AVE STE 202
CHULA VISTA, CA 91910
 (619) 427-3361

 Romanian
Effective as of 01-OCT-12




ALB, SIMONA, MD^{F†}

Provider ID: 100033656006
 480 4TH AVE STE 202
CHULA VISTA, CA 91910
 (619) 427-3361
 Romanian
Effective as of 01-JAN-14




ALB, SIMONA, MD^{F†}

Provider ID: 100033656016
 480 4TH AVE STE 202
CHULA VISTA, CA 91910
 (619) 427-3361
 Romanian
Effective as of 01-SEP-22




ALJAWADI, GEORGIA, DO^{F†}

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

ALJAWADI, GEORGIA, DO^{F†}




Provider ID: 100133625021
 480 4TH AVE STE 202
CHULA VISTA, CA 91910
 (619) 427-3361
 Filipino, Spanish, Tagalog
Effective as of 01-JUN-24

ALJAWADI, GEORGIA, DO^{F†}




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

ALJAWADI, GEORGIA, DO^{F†}




Provider ID: 100133625022

 480 4TH AVE STE 202
CHULA VISTA, CA 91910
 (619) 427-3361
 Filipino, Spanish, Tagalog
Effective as of 01-SEP-22




ALVAREZ-ESTRADA, MIGUEL, MD^{M†}

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




ARCEGOMEZ, LAURA, MD^{F†}

Provider ID: 100300002012
 678 3RD AVE
CHULA VISTA, CA 91910
 (619) 662-4100
 Spanish, Tagalog
Effective as of 01-JUN-24




ARCEGOMEZ, LAURA, MD^F

Provider ID: 100300002011
 678 3RD AVE
CHULA VISTA, CA 91910
 (619) 662-4100
 Spanish, Tagalog
Effective as of 01-APR-23

CHOU, SUSANNA, MD^F

Provider ID: 100054762008
 678 3RD AVE
CHULA VISTA, CA 91910
 (619) 662-4100
 Chinese, Mandarin, Spanish
Effective as of 01-AUG-24

ELSAIED, MOHAMMED, MD^{M†}

Provider ID: 100020910015
 330 OXFORD ST STE 106
CHULA VISTA, CA 91911
 (619) 409-1802
 Arabic, German, Spanish

C1. 网络提供者名单 主治医生

Effective as of 01-MAY-18

ELSAYED, MOHAMMED, MD^{M†}

Provider ID: 100020910032

330 OXFORD ST STE 106
CHULA VISTA, CA 91911

(619) 409-1802

Arabic, German, Spanish

Effective as of 01-NOV-20

ELSAYED, MOHAMMED, MD^{M†}

Provider ID: 100020910031

330 OXFORD ST STE 106
CHULA VISTA, CA 91911

(619) 409-1802

Arabic, German, Spanish

Effective as of 01-JAN-21

ELSAYED, MOHAMMED, MD^{M†}

Provider ID: 100020910029

330 OXFORD ST STE 106
CHULA VISTA, CA 91911

(619) 409-1802

Arabic, German, Spanish

Effective as of 01-JAN-21

ELSAYED, MOHAMMED, MD^{M†}

Provider ID: 100020910030

330 OXFORD ST STE 106
CHULA VISTA, CA 91911

(619) 409-1802

Arabic, German, Spanish

Effective as of 01-JAN-21

ELSAYED, MOHAMMED, MD^{M†}

Provider ID: 100020910028

330 OXFORD ST STE 106
CHULA VISTA, CA 91911

(619) 409-1802

Arabic, German, Spanish

Effective as of 01-AUG-20

FARRIS, REUBEN, MD^{M†}

Provider ID: 100105788004

340 4TH AVE STE 2

CHULA VISTA, CA 91910

(619) 422-8338

Spanish

Effective as of 01-OCT-12

GARCIA, KARLA, MD^{F†}

Provider ID: 100269760005

678 3RD AVE
CHULA VISTA, CA 91910

(619) 662-4100

Spanish

Teleservice

Effective as of 01-APR-23

GARCIA, KARLA, MD^{F†}

Provider ID: 100269760002

678 3RD AVE
CHULA VISTA, CA 91910

(619) 662-4100

Spanish

Teleservice

Effective as of 01-MAR-16

JIMENEZ, KRYSTAL, MD^{F†}

Provider ID: 100359300004

678 3RD AVE
CHULA VISTA, CA 91910

(619) 662-4100

Effective as of 01-JAN-21

MARTINEZ, ELADIO, MD^{M†}

Provider ID: 100415320012

299 J ST
CHULA VISTA, CA 91910

(858) 554-1212

Spanish

Teleservice

Effective as of 01-MAY-24

MARTINEZ, ELADIO, MD^{M†}

Provider ID: 100415320002

299 J ST
CHULA VISTA, CA 91910

(858) 554-1212

Spanish

Teleservice

Effective as of 01-OCT-23

MARTINEZ, ELADIO, MD^{M†}

Provider ID: 100415320005

299 J ST
CHULA VISTA, CA 91910

(858) 554-1212

Spanish

Teleservice

Effective as of 01-DEC-23

MARTINEZ, ELADIO, MD^{M†}

Provider ID: 100415320011

299 J ST
CHULA VISTA, CA 91910

(858) 554-1212

Spanish

Teleservice

Effective as of 01-APR-24

MATTHEWS, MERRITT, MD^{M†}

Provider ID: 100021162015

752 MEDICAL CENTER CT
STE 210

CHULA VISTA, CA 91911

(619) 656-0206

Spanish, Tagalog

Effective as of 01-NOV-20

MATTHEWS, MERRITT, MD^{M†}

Provider ID: 100021162019

752 MEDICAL CENTER CT
CHULA VISTA, CA 91911

(619) 656-0206

Spanish, Tagalog

Effective as of 01-FEB-21

MERRILL, SARAH, MD^{F†}

Provider ID: 100214679020

678 3RD AVE
CHULA VISTA, CA 91910

(619) 662-4100

Spanish

Effective as of 01-JAN-21

C1. 网络提供者名单 主治医生

MONDRAGON, GUSTAVO, MD

M

Provider ID: 100177550031

855 THIRD AVE
STE 2230
CHULA VISTA, CA 91911
(619) 656-5252

Spanish

Effective as of 01-OCT-23

MONDRAGON, GUSTAVO, MD

M

Provider ID: 100177550016

855 THIRD AVE
STE 2230
CHULA VISTA, CA 91911
(619) 656-5252

Spanish

Effective as of 01-FEB-24

MONDRAGON, GUSTAVO, MD

M†

Provider ID: 100177550027

480 4TH AVE STE 500
CHULA VISTA, CA 91910
(619) 656-5252

Spanish

Effective as of 01-FEB-23

MONDRAGON, GUSTAVO, MD

M†

Provider ID: 100177550028

480 4TH AVE STE 500
CHULA VISTA, CA 91910
(619) 656-5252

Spanish

Effective as of 01-FEB-23

MOYA, MARY, MD

Provider ID: 100099596009

678 3RD AVE
CHULA VISTA, CA 91910
(619) 662-4100

Spanish

Effective as of 01-APR-23

MOYA, MARY, MD

Provider ID: 100099596012

678 3RD AVE
CHULA VISTA, CA 91910
(619) 662-4100

Spanish

Effective as of 01-JUN-24

NGUYEN, CARIE, MD

Provider ID: 100099766005

678 3RD AVE
CHULA VISTA, CA 91910
(619) 662-4100

Effective as of 01-NOV-20

NGUYEN, CARIE, MD

Provider ID: 100099766010

678 3RD AVE
CHULA VISTA, CA 91910
(619) 662-4100

Effective as of 01-APR-23

NOVENCIDO, JOSEPH, DO

Provider ID: 100244053017

752 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
(619) 527-7700

Spanish

Effective as of 01-SEP-20

NOVENCIDO, JOSEPH, DO

Provider ID: 100244053020

752 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
(619) 527-7700

Spanish

Effective as of 01-AUG-24

PALOMINO, MARY, MD

Provider ID: 100249271002

678 3RD AVE

CHULA VISTA, CA 91910
(619) 662-4100

Spanish

Effective as of 01-JUL-15

PATEL, PAAVAN, DO

Provider ID: 100413256011

752 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
(619) 656-0206

Effective as of 01-DEC-23

PATEL, PAAVAN, DO

Provider ID: 100413256007

752 MEDICAL CENTER CT
CHULA VISTA, CA 91911
(619) 527-7700

Effective as of 01-NOV-23

PIEROS, JANELLE, DO

Provider ID: 100220799004

678 3RD AVE
CHULA VISTA, CA 91910
(619) 662-4100

Spanish, Faroese

Effective as of 01-OCT-15

RIZKALLAH, JEAN, MD

Provider ID: 100106136009

450 4TH AVE STE 408
CHULA VISTA, CA 91910
(619) 691-1990

French, Spanish

Effective as of 01-MAR-15

RIZKALLAH, JEAN, MD

Provider ID: 100106136010

450 4TH AVE STE 408
CHULA VISTA, CA 91910
(619) 691-1990

French, Spanish

Effective as of 01-MAR-16

ROSADO, IVAN, MD

C1. 网络提供者名单 主治医生

Provider ID: 100365788004

📍 1637 3RD AVE STE H
CHULA VISTA, CA 91911

☎️ (619) 662-4100

Effective as of 01-FEB-21

ROSADO, IVAN, MD^{M†}

Provider ID: 100365788003

📍 1635 3RD AVE
CHULA VISTA, CA 91911

☎️ (619) 662-4100

Effective as of 01-JAN-21

STILLWELL, CARLA, MD^{F†}

Provider ID: 100147691017

📍 480 4TH AVE STE 202
CHULA VISTA, CA 91910

☎️ (619) 427-3361

📱 Polish, Portuguese, Spanish

Effective as of 01-JAN-21

STILLWELL, CARLA, MD^{F†}

Provider ID: 100147691020

📍 480 4TH AVE STE 202
CHULA VISTA, CA 91910

☎️ (619) 427-3361

📱 Polish, Portuguese, Spanish

Effective as of 01-SEP-22

STILLWELL, CARLA, MD^{F†}

Provider ID: 100147691005

📍 480 4TH AVE STE 202
CHULA VISTA, CA 91910

☎️ (619) 427-3361

📱 Polish, Portuguese, Spanish

Effective as of 01-OCT-12

SWARTZ, JOHN, MD^{M†}

Provider ID: 100097829004

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎️ (619) 662-4100

📱 Spanish

Effective as of 01-JAN-14

TALAVERA, GREGORY, MD^M

Provider ID: 100334847006

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎️ (619) 662-4100

📱 Spanish

Teleservice

Effective as of 01-APR-23

TREJO, RAUL, MD^M

Provider ID: 100088864004

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎️ (619) 662-4100

📱 Spanish

Effective as of 01-JAN-14

VAZQUEZ-BOJORQUEZ,

ALEJANDRA, MD^F

Provider ID: 100391945011

📍 752 MEDICAL CENTER CT
STE 200
CHULA VISTA, CA 91911

☎️ (858) 554-1212

📱 Spanish

Effective as of 01-DEC-22

VOURLITIS, MELISSA, DO^{F*}

Provider ID: 100090572020

📍 3302 BONITA RD
CHULA VISTA, CA 91910

☎️ (858) 832-2500

Teleservice

Effective as of 01-NOV-23

WHITLEY, NICHOLAS, MD^{M†}

Provider ID: 100197848006

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎️ (619) 662-4100

📱 Spanish

Effective as of 01-JAN-21

FQHC

CHULA VISTA FAMILY HLTH CTR,

Provider ID: PG0025044035

📍 251 LANDIS AVE
CHULA VISTA, CA 91910

☎️ (619) 515-2500

Effective as of 01-JAN-21

FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC,

Provider ID: PG0082946004

📍 352 L ST
CHULA VISTA, CA 91911

☎️ (619) 515-2325

Effective as of 01-JAN-21

SAN YSIDRO HEALTH CHULA VISTA, *†

Provider ID: PG0047560016

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎️ (619) 662-4100

Teleservice

Effective as of 01-JAN-21

SAN YSIDRO HEALTH SOUTH BAY LATINO RESEARCH CENTER,

Provider ID: PG0120846002

📍 780 BAY BLVD STE 200
CHULA VISTA, CA 91910

☎️ (619) 662-4100

Effective as of 01-APR-23

SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS,

Provider ID: PG0127835002

📍 280 E ST
CHULA VISTA, CA 91910

☎️ (619) 662-4100

Teleservice

Effective as of 01-JUN-24

GENERAL PRACTICE

C1. 网络提供者名单 主治医生

CEPIN, MONICA, MD^{F†}

Provider ID: 100090156007
📍 333 H ST STE 2000
CHULA VISTA, CA 91910
☎ (619) 427-0665
📱 French, Italian, Romanian
Teleservice
Effective as of 01-JUL-15

CEPIN, MONICA, MD^{F†}

Provider ID: 100090156004
📍 333 H ST STE 2000
CHULA VISTA, CA 91910
☎ (619) 427-0665
📱 French, Italian, Romanian
Teleservice
Effective as of 01-JUL-15

FARRIS, REUBEN, MD^{M†}

Provider ID: 100105788005
📍 340 4TH AVE STE 2
CHULA VISTA, CA 91910
☎ (619) 422-8338
📱 Spanish
Effective as of 01-JAN-14

GUEFEN, URI, MD^{M†}

Provider ID: 100072802029
📍 299 J ST
CHULA VISTA, CA 91910
☎ (858) 779-2366
📱 Spanish
Teleservice
Effective as of 01-DEC-23

GUEFEN, URI, MD^{M†}

Provider ID: 100072802018
📍 299 J ST
CHULA VISTA, CA 91910
☎ (858) 779-2366
📱 Spanish
Teleservice
Effective as of 01-MAR-22

GUEFEN, URI, MD^{M†}

Provider ID: 100072802015
📍 299 J ST
CHULA VISTA, CA 91910
☎ (858) 779-2366
📱 Spanish
Teleservice
Effective as of 01-NOV-23

TOLEDO-NADER, CAROLL, MD^{M†}

Provider ID: 100106153012
📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100
📱 Spanish
Effective as of 01-SEP-19

INTERNAL MEDICINE

BALDERAS-MAGALLANES, RODOLFO, MD^M

Provider ID: 100419155007
📍 678 THIRD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100
📱 Spanish
Teleservice
Effective as of 01-JUN-24

BALDERAS-MAGALLANES, RODOLFO, MD^M

Provider ID: 100419155006
📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100
📱 Spanish
Teleservice
Effective as of 01-JUN-24

BALDERAS-MAGALLANES, RODOLFO, MD^M

Provider ID: 100419155002
📍 678 THIRD AVE

CHULA VISTA, CA 91910
☎ (619) 662-4100
📱 Spanish
Teleservice
Effective as of 01-DEC-23

BRACE, ELION, MD^{M†}

Provider ID: 100159959035
📍 450 4TH AVE STE 408
CHULA VISTA, CA 91910
☎ (619) 691-1990
📱 Italian, Spanish, Albanian
Effective as of 01-OCT-23

BRACE, ELION, MD^{M†}

Provider ID: 100159959020
📍 450 4TH AVE STE 408
CHULA VISTA, CA 91910
☎ (619) 691-1990
📱 Italian, Spanish, Albanian
Effective as of 01-AUG-20

CHEN, TSUH-YIN, MD^F

Provider ID: 100187934013
📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100
📱 Portuguese, Spanish
Effective as of 01-AUG-24

CHEN, TSUH-YIN, MD^F

Provider ID: 100187934012
📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100
📱 Portuguese, Spanish
Effective as of 01-APR-23

DELAROSA, RENATO, MD^M

Provider ID: 100110262022
📍 754 MEDICAL CENTER CT
STE 103
CHULA VISTA, CA 91911
☎ (619) 397-5001
📱 Spanish, Tagalog

C1. 网络提供者名单 主治医生


Effective as of 01-SEP-22

DELAROSA, RENATO, MD^M

Provider ID: 100110262018

 754 MEDICAL CENTER CT
STE 103

CHULA VISTA, CA 91911

 (619) 397-5001

 Spanish, Tagalog


Effective as of 01-JAN-21

DELAROSA, RENATO, MD^M

Provider ID: 100110262019

 754 MEDICAL CENTER CT
STE 103

CHULA VISTA, CA 91911

 (619) 397-5001

 Spanish, Tagalog


Effective as of 01-JAN-21

DELAROSA, RENATO, MD^M

Provider ID: 100110262005

 754 MEDICAL CENTER CT
STE 103

CHULA VISTA, CA 91911

 (619) 397-5001


 Spanish, Tagalog

Effective as of 01-FEB-18

HINOJOSA-VALENCIA, ALEJANDRO, MD^M

Provider ID: 100108386019

 629 THIRD AVE
CHULA VISTA, CA 91910

 (619) 422-6158


 Spanish


Effective as of 01-MAY-24

KAISEY, MUSHRIK, MD^{M†}

Provider ID: 100024815019

 340 4TH AVE STE 9
CHULA VISTA, CA 91910

 (619) 426-9731


 Arabic, Spanish

Effective as of 01-JAN-21

KAISEY, MUSHRIK, MD^{M†}

Provider ID: 100024815007

 340 4TH AVE STE 9
CHULA VISTA, CA 91910

 (619) 426-9731


 Arabic, Spanish


Effective as of 01-OCT-12

KAISEY, MUSHRIK, MD^{M†}

Provider ID: 100024815021

 340 4TH AVE STE 9
CHULA VISTA, CA 91910

 (619) 426-9731


 Arabic, Spanish


Effective as of 01-SEP-22

KAISEY, MUSHRIK, MD^{M†}

Provider ID: 100024815009

 340 4TH AVE STE 9
CHULA VISTA, CA 91910

 (619) 426-9731

 Arabic, Spanish


Effective as of 01-JAN-14

MAY, LOUIS, MD^{M†}

Provider ID: 100325305003

 1061 TIERRA DEL REY STE
303 304 305

CHULA VISTA, CA 91910

 (619) 662-4100

 Spanish


Teleservice

Effective as of 01-JUN-21

OLIVER, DEANNA, MD^{F†}

Provider ID: 100328564043

 1323 3RD AVE
CHULA VISTA, CA 91911

 (619) 409-6900


 Spanish

Effective as of 01-MAR-24

OLIVER, DEANNA, MD^{F†}

Provider ID: 100328564034

 1323 3RD AVE
CHULA VISTA, CA 91911

 (619) 409-6900


 Spanish

Effective as of 01-SEP-22

OLIVER, DEANNA, MD^{F†}

Provider ID: 100328564027

 1323 3RD AVE
CHULA VISTA, CA 91911

 (619) 409-6900


 Spanish

Effective as of 01-SEP-21

OLIVER, DEANNA, MD^{F†}

Provider ID: 100328564041

 1323 3RD AVE
CHULA VISTA, CA 91911

 (619) 409-6900

 Spanish


Effective as of 01-NOV-23

OLIVER, DEANNA, MD^F

Provider ID: 100328564040

 2436 FENTON ST STE
100-B

CHULA VISTA, CA 91914

 (619) 264-1934

 Spanish


Effective as of 01-NOV-23

OLIVER, DEANNA, MD^F

Provider ID: 100328564045

 2436 FENTON ST STE
100-B

CHULA VISTA, CA 91914

 (619) 264-1934


 Spanish

Effective as of 01-MAR-24

PENA, JOSE, MD^{M†}

Provider ID: 100104432025




 333 H ST STE 1065
CHULA VISTA, CA 91910

 (619) 691-1766




C1. 网络提供者名单 主治医生

 Spanish
Effective as of 01-FEB-23




PENA, JOSE, MD^{M†}

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




PENA, JOSE, MD^{M†}

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




PENA, JOSE, MD^{M†}

Provider ID: 100104432024
 333 H ST STE 1065
CHULA VISTA, CA 91910
 (619) 691-1766
 Spanish
Effective as of 01-JUL-21




UWEDJOJEVWE, LETICIA, MD^{F†}

Provider ID: 100110303015
 340 4TH AVE STE 10
CHULA VISTA, CA 91910
 (619) 934-2215
 Spanish
Effective as of 01-JAN-18




UWEDJOJEVWE, LETICIA, MD^{F†}

Provider ID: 100110303030
 340 4TH AVE STE 10
CHULA VISTA, CA 91910
 (619) 934-2215
 Spanish
Effective as of 01-JAN-21

UWEDJOJEVWE, LETICIA, MD^{F†}




Provider ID: 100110303013
 340 4TH AVE STE 10
CHULA VISTA, CA 91910
 (619) 934-2215
 Spanish
Effective as of 01-DEC-17

UWEDJOJEVWE, LETICIA, MD^{F†}



Provider ID: 100110303031
 340 4TH AVE STE 10
CHULA VISTA, CA 91910
 (619) 934-2215
 Spanish
Effective as of 01-NOV-23

OBSTETRICS / GYNECOLOGY

ATIGA, SCHUBERT, MD^M



Provider ID: 100075572018
 678 3RD AVE
CHULA VISTA, CA 91910
 (619) 662-4100
 Spanish, Tagalog
Effective as of 01-AUG-24

KOBAYASHI, KAREN, DO^F

Provider ID: 100039829018
 678 3RD AVE
CHULA VISTA, CA 91910
 (619) 662-4100
Effective as of 01-AUG-24

PEDIATRICS



GARCIA, CARLOS, MD^{M†}

Provider ID: 100067783008
 1392 E PALOMAR ST STE
501
CHULA VISTA, CA 91913
 (619) 271-4059

 Spanish
Effective as of 01-JAN-14



INTERNAL MEDICINE

ZAKI, MICHELLE, DO^F



Provider ID: 100360975007
 3955 BEDFORD CANYON
RD
STE 103
CORONA, CA 92883
 (951) 293-4722
Teleservice
Effective as of 01-AUG-23

FAMILY PRACTICE

RIDGE, NEAL, DO^{M†}




Provider ID: 100356750005
 230 PROSPECT PL STE
340B
CORONADO, CA 92118
 (619) 522-4000
Effective as of 01-JAN-21

GAIKWAD, SHILPA, MD^{F††}

Provider ID: 100113091011
 32585 GOLDEN LANTERN
ST STE E
DANA POINT, CA 92629
 (877) 696-3622
 Hindi, Spanish
Effective as of 01-AUG-22

INTERNAL MEDICINE

PATHAK, RAJIV, MD^M

Provider ID: 100423996002
 32585 GOLDEN LANTERN
ST STE E
DANA POINT, CA 92629
 (949) 240-2555
 Gujarati, Hindi, Sindhi
Effective as of 01-MAR-24

C1. 网络提供者名单 主治医生

GENERAL PRACTICE

KREMER, ARNOLD, DO^{M†}

Provider ID: 100023664009
1349 CAMINO DEL MAR
STE B
DEL MAR, CA 92014
(858) 925-8233
French, Spanish
Teleservice
Effective as of 01-JAN-21

INTERNAL MEDICINE

ALAMAR, ALI, MD^M

Provider ID: 100106664017
2658 DEL MAR HEIGHTS
RD STE 504
DEL MAR, CA 92014
(619) 724-6644
Arabic, Spanish
Effective as of 01-JUL-24

FAMILY PRACTICE

ALMANSOUR, MUMTAZ, MD^{M†}

Provider ID: 100107873026
165 S 1ST ST
EL CAJON, CA 92019
(619) 312-0347
Arabic, Spanish, Kurdish
Effective as of 01-JAN-21

ALMANSOUR, MUMTAZ, MD^{M†}

Provider ID: 100107873025
330 S MAGNOLIA AVE STE
101
EL CAJON, CA 92020
(619) 593-3007
Arabic, Spanish, Kurdish
Effective as of 01-JAN-21

ALMANSOUR, MUMTAZ, MD^{M†}

Provider ID: 100107873024
330 S MAGNOLIA AVE STE

101
EL CAJON, CA 92020
(619) 593-3007
Arabic, Spanish, Kurdish
Effective as of 01-JUL-22

BEYENE, YEMISRACH, MD^{F†}

Provider ID: 100376573004
5442 SYCUAN RD
EL CAJON, CA 92019
(619) 445-0707
Amharic
Effective as of 01-SEP-22

GREEN, HANNAH, MD^F

Provider ID: 100403549002
855 E MADISON AVE
EL CAJON, CA 92020
(619) 440-2751
Spanish
Effective as of 01-APR-23

JALISI, NEJAT, MD^{F†}

Provider ID: 100114413020
1320 E MADISON AVE
EL CAJON, CA 92021
(619) 456-9800
Arabic, Farsi, Persian
Effective as of 01-SEP-22

JALISI, NEJAT, MD^{F†}

Provider ID: 100114413018
1320 E MADISON AVE
EL CAJON, CA 92021
(619) 456-9800
Arabic, Farsi, Persian
Effective as of 01-JAN-21

KASAWA, JOHN, MD^{M†}

Provider ID: 100039117021
875 EL CAJON BLVD
EL CAJON, CA 92020
(619) 662-4100
Arabic, Spanish, Chaldean
Neo-Aramaic

Teleservice
Effective as of 01-JAN-21

KASAWA, JOHN, MD^{M†}

Provider ID: 100039117023
875 EL CAJON BLVD
EL CAJON, CA 92020
(619) 662-4100
Arabic, Spanish, Chaldean
Neo-Aramaic
Teleservice
Effective as of 01-APR-23

MCHENRY, KATHRYN, DO^F

Provider ID: 100320650010
855 E MADISON AVE
EL CAJON, CA 92020
(619) 440-2751
Spanish
Effective as of 01-JAN-24

MOULD, KEVIN, MD^{M†}

Provider ID: 100112431013
855 E MADISON AVE
EL CAJON, CA 92020
(619) 440-2751
Effective as of 01-JAN-24

MOULD, KEVIN, MD^{M†}

Provider ID: 100112431012
855 E MADISON AVE
EL CAJON, CA 92020
(619) 440-2751
Effective as of 01-AUG-20

PUTRUS, RAMIZ, MD^M




Provider ID: 100348831004
183 S 1ST ST
EL CAJON, CA 92019
(619) 328-1335
Arabic
Effective as of 01-AUG-22

ROUEL, LINDA, MD^{F†}

Provider ID: 100259719024




C1. 网络提供者名单

主治医生

 860 JAMACHA RD STE 107
EL CAJON, CA 92019
 (619) 456-9920
 Arabic, Assyrian, Mandarin
Effective as of 01-AUG-21




ROUEL, LINDA, MD^{F†}

Provider ID: 100259719007

 860 JAMACHA RD STE 107
EL CAJON, CA 92019
 (619) 456-9920
 Arabic, Assyrian, Mandarin
Effective as of 01-FEB-18




ROUEL, LINDA, MD^{F†}

Provider ID: 100259719021

 860 JAMACHA RD STE 107
EL CAJON, CA 92019
 (619) 456-9920
 Arabic, Assyrian, Mandarin
Effective as of 01-JAN-21




ROUEL, LINDA, MD^{F†}

Provider ID: 100259719020

 860 JAMACHA RD STE 107
EL CAJON, CA 92019
 (619) 456-9920
 Arabic, Assyrian, Mandarin
Effective as of 01-JAN-21



ROUEL, LINDA, MD^{F†}

Provider ID: 100259719025

 860 JAMACHA RD STE 107
EL CAJON, CA 92019
 (619) 456-9920
 Arabic, Assyrian, Mandarin
Effective as of 01-SEP-22



SALEM, RAMSEY, MD^{M†}

Provider ID: 100360207006

 875 EL CAJON BLVD
EL CAJON, CA 92020
 (858) 939-5864
Effective as of 01-AUG-21

SAZEGAR, PAYAM, MD^{M†}

Provider ID: 100187888014



 1032 BROADWAY
EL CAJON, CA 92021
 (619) 795-5991

Teleservice

Effective as of 01-JUL-21

SAZEGAR, PAYAM, MD^{M†}

Provider ID: 100187888012



 165 S 1ST ST
EL CAJON, CA 92019
 (619) 312-0347

Teleservice

Effective as of 01-JUL-21

STONES, RACHEL, MD^F

Provider ID: 100387928010

 165 S 1ST ST
EL CAJON, CA 92019
 (619) 312-0347



 Spanish

Teleservice

Effective as of 01-MAY-22

STONES, RACHEL, MD^F

Provider ID: 100387928009

 1032 BROADWAY
EL CAJON, CA 92021
 (619) 795-5991



 Spanish

Teleservice

Effective as of 01-MAY-22

VOURLITIS, MELISSA, DO^{F*}

Provider ID: 100090572018

 11588 VIA RANCHO SAN
DIEGO
EL CAJON, CA 92019
 (858) 832-2500



Teleservice

Effective as of 01-NOV-23

FQHC

CHASE AVENUE FAMILY HEALTH CTRS INC,



Provider ID: PG0025044040

 1111 W CHASE AVE
EL CAJON, CA 92020
 (619) 515-2499

Effective as of 01-JAN-21

FAMILY HLTH CTR SAN DIEGO-EL CAJON,



Provider ID: PG0084245003

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

Effective as of 01-JAN-21

LA MAESTRA CHC EL CAJON BROADWAY, †

Provider ID: PG0085229003

 1032 BROADWAY
EL CAJON, CA 92021
 (619) 795-5991

Teleservice

Effective as of 01-JAN-21

LA MAESTRA CHC-REA AVE,



Provider ID: PG0129902002

 181 REA AVE
EL CAJON, CA 92020
 (619) 312-0347

Effective as of 01-JUN-24

LA MAESTRA FAMILY CLINIC INC, †

Provider ID: PG0053396002

 165 S 1ST ST
EL CAJON, CA 92019
 (619) 312-0347



Teleservice

Effective as of 01-JAN-21




SAN YSIDRO HEALTH EL CAJON,

Provider ID: PG0111464002



C1. 网络提供者名单 主治医生




 875 EL CAJON BLVD
EL CAJON, CA 92020
 (619) 662-4100
Teleservice
Effective as of 01-JAN-21




GENERAL PRACTICE


MOOSAVI, MOHAMMAD, MD^{M†}
Provider ID: 100339082002
 343 E MAIN ST STE 102
EL CAJON, CA 92020
 (619) 447-6001
 Farsi
Effective as of 01-JUL-19



INTERNAL MEDICINE




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




AWDISHO, ALAN, DO^{M†}
Provider ID: 100381973002
 875 EL CAJON BLVD
EL CAJON, CA 92020
 (619) 662-4100
 Assyrian, Syriac
Teleservice
Effective as of 01-JAN-22




BENSON, JIMI, MD^{M†}
Provider ID: 100149523029
 1351 BROADWAY
EL CAJON, CA 92021
 (619) 383-6703
 Spanish, Vietnamese
Effective as of 01-APR-21




BENSON, JIMI, MD^{M†}
Provider ID: 100149523023
 1351 BROADWAY




EL CAJON, CA 92021
 (619) 383-6703
 Spanish, Vietnamese
Effective as of 01-JAN-21

BENSON, JIMI, MD^{M†}
Provider ID: 100149523028
 1351 BROADWAY
EL CAJON, CA 92021
 (619) 383-6703
 Spanish, Vietnamese
Effective as of 01-MAR-21




BENSON, JIMI, MD^{M†}
Provider ID: 100149523026
 1351 BROADWAY
EL CAJON, CA 92021
 (619) 383-6703
 Spanish, Vietnamese
Effective as of 01-JUN-21

BENSON, JIMI, MD^{M†}
Provider ID: 100149523031
 1351 BROADWAY
EL CAJON, CA 92021
 (619) 383-6703
 Spanish, Vietnamese
Effective as of 01-OCT-23




EL-GHONEIMY, AHMED, MD^{M†}
Provider ID: 100103500015
 165 S 1ST ST
EL CAJON, CA 92019
 (619) 312-0347
 Arabic, French, Italian
Teleservice
Effective as of 01-AUG-22

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




JAHANPANAHA, FERESHTEH, MD^{F†}

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



JAHANPANAHA, FERESHTEH, MD^{F†}

Provider ID: 100076454021
 343 E MAIN ST STE 101
EL CAJON, CA 92020
 (619) 447-6001
 Arabic, Farsi, Spanish
Effective as of 01-SEP-22



JAHANPANAHA, FERESHTEH, MD^{F†}

Provider ID: 100076454017
 343 E MAIN ST STE 101
EL CAJON, CA 92020
 (619) 447-6001
 Arabic, Farsi, Spanish
Effective as of 01-AUG-20


KHANNA, POORNIMA, MD^F

Provider ID: 100334522011
 1032 BROADWAY
EL CAJON, CA 92021
 (619) 795-5991
Effective as of 01-JAN-21

MANSY, TAMARA, MD^F

Provider ID: 100363067008
 875 EL CAJON BLVD
EL CAJON, CA 92020
 (619) 662-4100
Effective as of 01-JUN-24

MICHAEL, RAMI, MD^{M†}

Provider ID: 100341876009
 875 EL CAJON BLVD

C1. 网络提供者名单

主治医生

EL CAJON, CA 92020
☎ (619) 662-4100
📄 Arabic, Chaldean
Neo-Aramaic
Teleservice
Effective as of 01-DEC-22

NASSIR, BASSAM, MD^{M†}

Provider ID: 100159191015
📄 875 EL CAJON BLVD
EL CAJON, CA 92020
☎ (619) 662-4100
📄 Arabic
Effective as of 01-MAY-21

NASSIR, BASSAM, MD^{M†}

Provider ID: 100159191011
📄 436 S MAGNOLIA AVE STE
101
EL CAJON, CA 92020
☎ (619) 662-4100
📄 Arabic
Effective as of 01-MAR-16

REDDY, ARJUN, MD^{M†}

Provider ID: 100050929006
📄 5442 SYCUAN RD
EL CAJON, CA 92019
☎ (619) 445-0707
📄 Spanish
Effective as of 01-JAN-21

ROUEL, WADI, MD^{M†}

Provider ID: 100246050009
📄 860 JAMACHA RD STE 107
EL CAJON, CA 92019
☎ (619) 456-9920
📄 Arabic, Assyrian, Spanish
Effective as of 01-JAN-21

ROUEL, WADI, MD^{M†}

Provider ID: 100246050015
📄 860 JAMACHA RD STE 107
EL CAJON, CA 92019
☎ (619) 456-9920

📄 Arabic, Assyrian, Spanish
Effective as of 01-SEP-22

ROUEL, WADI, MD^{M†}

Provider ID: 100246050016
📄 860 JAMACHA RD STE 107
EL CAJON, CA 92019
☎ (619) 456-9920
📄 Arabic, Assyrian, Spanish
Effective as of 01-SEP-22

ROUEL, WADI, MD^{M†}

Provider ID: 100246050008
📄 860 JAMACHA RD STE 107
EL CAJON, CA 92019
☎ (619) 456-9920
📄 Arabic, Assyrian, Spanish
Effective as of 01-JAN-21

ZAYED, AHMAD, MD^M

Provider ID: 100373969005
📄 133 W MAIN ST STE 100
EL CAJON, CA 92020
☎ (619) 401-0404
📄 Arabic, Chinese, Mandarin
Effective as of 01-NOV-23

FAMILY PRACTICE

CLOTFELTER, CHRISTINE, DO

^{F†}
Provider ID: 100065251012
📄 477 N EL CAMINO REAL
STE A306
ENCINITAS, CA 92024
☎ (760) 942-0118
📄 Spanish
Effective as of 01-SEP-21

DUCK, CRAIG, MD^{M*}

Provider ID: 100086514008
📄 477 N EL CAMINO REAL
STE A306
ENCINITAS, CA 92024
☎ (760) 942-0118

Effective as of 01-SEP-21

FARSAD, RAMIN, MD^M

Provider ID: 100028293005
📄 477 N EL CAMINO REAL
STE A100
ENCINITAS, CA 92024
☎ (760) 943-9111
📄 Farsi, Persian, Turkish
Effective as of 01-APR-02

KAKIMOTO, AMY, MD^{F†}

Provider ID: 100113530009
📄 477 N EL CAMINO REAL
STE A306
ENCINITAS, CA 92024
☎ (760) 942-0118
📄 French
Effective as of 01-SEP-21

MERCER, SCOTT, MD^{M*}

Provider ID: 100030142008
📄 320 SANTA FE DR STE 205
ENCINITAS, CA 92024
☎ (760) 944-8484
📄 Spanish
Teleservice
Effective as of 01-SEP-21

PAYNE, RICHARD, MD^{M†}

Provider ID: 100069305009
📄 477 N EL CAMINO REAL
STE A306
ENCINITAS, CA 92024
☎ (760) 942-0118
📄 Spanish
Effective as of 01-SEP-21

SEXTON, PERRY, MD^{M†}

Provider ID: 100099693003
📄 351 SANTA FE DR STE 101
ENCINITAS, CA 92024
☎ (760) 274-1385
📄 Spanish
Effective as of 01-FEB-11

C1. 网络提供者名单 主治医生

WILLIE, KADEN, DO^M

Provider ID: 100350661007

📍 1130 2ND ST
ENCINITAS, CA 92024

☎ (760) 736-6767

🗂 Portuguese

Effective as of 01-SEP-23

GENERAL PRACTICE

FARSAD, RAMIN, MD^M

Provider ID: 100028293009

📍 477 N EL CAMINO REAL
STE A100

ENCINITAS, CA 92024

☎ (760) 943-9111

🗂 Farsi, Persian, Turkish

Effective as of 01-JAN-21

INTERNAL MEDICINE

STEPHENSON, ROBERT, MD^{M†}

Provider ID: 100031646009

📍 320 SANTA FE DR STE 303
ENCINITAS, CA 92024

☎ (760) 943-6730

🗂 Spanish

Effective as of 01-SEP-21

TAGDIRI, KEVEN, MD^{M*}

Provider ID: 100064987002

📍 4401 MANCHESTER AVE
STE 103

ENCINITAS, CA 92024

☎ (858) 756-3021

🗂 Farsi, Spanish

Effective as of 01-MAR-03

FAMILY PRACTICE

AVILA, MICHAEL, MD^{M††}

Provider ID: 100369494002

📍 460 N ELM ST
ESCONDIDO, CA 92025

☎ (833) 867-4642

Effective as of 01-JUN-21

COX, VICTORIA, MD^{F†}

Provider ID: 100374049005

📍 704 E GRAND AVE
ESCONDIDO, CA 92025

☎ (619) 662-4100

🗂 Teleservice

Effective as of 01-AUG-22

DE ROTH, GEORGINE, MD^F

Provider ID: 100409222002

📍 362 W MISSION AVE STE
105

ESCONDIDO, CA 92025

☎ (760) 741-1224

🗂 French, Hungarian, Spanish

Effective as of 01-JUL-23

DE ROTH, GEORGINE, MD^F

Provider ID: 100409222006

📍 362 W MISSION AVE STE
105

ESCONDIDO, CA 92025

☎ (760) 741-1224

🗂 French, Hungarian, Spanish

Effective as of 01-DEC-23

DE ROTH, GEORGINE, MD^F

Provider ID: 100409222004

📍 362 W MISSION AVE STE
105

ESCONDIDO, CA 92025

☎ (760) 741-1224

🗂 French, Hungarian, Spanish

Effective as of 01-AUG-23

ESPARZA, SOPHIA, MD^F

Provider ID: 100402893002

📍 488 E VALLEY PKWY STE
411

ESCONDIDO, CA 92025

☎ (760) 466-9800

🗂 Spanish

Effective as of 01-MAR-23

HERNANDEZ RIVERA, JOSE DANIEL, MD^M

Provider ID: 100145294006

📍 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

☎ (760) 871-0606

Effective as of 01-MAY-24

KAUR, JATINDER, MD^F

Provider ID: 100315025010

📍 460 N ELM ST
ESCONDIDO, CA 92025

☎ (760) 520-8100

🗂 Hindi, Punjabi, Urdu

Effective as of 01-AUG-21

MCHENRY, KATHRYN, DO^{F†}

Provider ID: 100320650005

📍 460 N ELM ST
ESCONDIDO, CA 92025

☎ (760) 520-8100

🗂 Spanish

Effective as of 01-APR-21

MCHENRY, KATHRYN, DO^F

Provider ID: 100320650016

📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025

☎ (760) 737-6900

🗂 Spanish

Effective as of 01-FEB-24

MCHENRY, KATHRYN, DO^{F†}

Provider ID: 100320650009

📍 460 N ELM ST
ESCONDIDO, CA 92025

☎ (760) 520-8100

🗂 Spanish

Effective as of 01-JAN-24

PATEL, JITENBHAI, MD^M

Provider ID: 100339325007

📍 728 E VALLEY PKWY

C1. 网络提供者名单

主治医生

ESCONDIDO, CA 92025
☎ (760) 737-6900
Effective as of 01-JAN-24

PATEL, JITENBHAI, MD^M
Provider ID: 100339325006
📍 460 N ELM ST
ESCONDIDO, CA 92025
☎ (760) 520-8100
Effective as of 01-JAN-24

**RASHCOVSKY SCHIFF, KARIN,
MD^F**
Provider ID: 100331220007
📍 460 N ELM ST
ESCONDIDO, CA 92025
☎ (760) 520-8100
📱 French
Effective as of 01-JAN-24

**RASHCOVSKY SCHIFF, KARIN,
MD^F**
Provider ID: 100331220005
📍 460 N ELM ST
ESCONDIDO, CA 92025
☎ (760) 520-8100
📱 French
Effective as of 01-AUG-20

SCHULTZ, JAMES, MD^{M†}
Provider ID: 100030577016
📍 460 N ELM ST
ESCONDIDO, CA 92025
☎ (760) 520-8100
📱 Farsi, Greek, Spanish
Effective as of 01-AUG-20

SCHULTZ, JAMES, MD^{M†}
Provider ID: 100030577028
📍 460 N ELM ST
ESCONDIDO, CA 92025
☎ (760) 520-8100
📱 Farsi, Greek, Spanish
Effective as of 01-JAN-24

SCHULTZ, JAMES, MD^M
Provider ID: 100030577030
📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025
☎ (760) 737-6900
📱 Farsi, Greek, Spanish
Effective as of 01-JAN-24

SCHULTZ, JAMES, MD^M
Provider ID: 100030577026
📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025
☎ (760) 737-6900
📱 Farsi, Greek, Spanish
Effective as of 01-MAR-23

SIVA, TENAYA, MD^M
Provider ID: 100418703004
📍 704 E GRAND AVE
ESCONDIDO, CA 92025
☎ (619) 662-4100
📱 Spanish
Teleservice
Effective as of 01-NOV-23

SNYDER, CHRISTOPHER, DO^{M†}
Provider ID: 100024789048
📍 704 E GRAND AVE
ESCONDIDO, CA 92025
☎ (619) 662-4100
📱 Spanish
Teleservice
Effective as of 01-FEB-22

VOURLITIS, MELISSA, DO^{F*}
Provider ID: 100090572019
📍 710 W 13TH AVE
ESCONDIDO, CA 92025
☎ (858) 832-2500
Teleservice
Effective as of 01-NOV-23

FQHC

ESCONDIDO FAMILY HEALTH

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

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

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

**NEIGHBORHOOD
HEALTHCARE PIDS AND
PRENATAL,**
Provider ID: PG0024990050
📍 425 N DATE ST
ESCONDIDO, CA 92025
☎ (760) 520-8340
Teleservice
Effective as of 01-JUL-22

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY,**
Provider ID: PG0024990046
📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025
☎ (760) 737-6900
Teleservice

C1. 网络提供者名单 主治医生

Effective as of 01-JUL-22

PALOMAR FAMILY

COUNSELING SERVICES,

Provider ID: PG0125237002

1002 E GRAND AVE
ESCONDIDO, CA 92025

(760) 741-2660

Effective as of 01-DEC-23

SAN YSIDRO HEALTH

ESCONDIDO FAMILY

MEDICINE,

Provider ID: PG0094132003

704 E GRAND AVE
ESCONDIDO, CA 92025

(619) 662-4100

Teleservice

Effective as of 01-JUN-22

GENERAL PRACTICE

LOPEZ, IRMA, MD^{F†}

Provider ID: 100082249016

1035 E GRAND AVE STE 101
ESCONDIDO, CA 92025

(760) 480-4747

Spanish

Effective as of 01-JAN-21

INTERNAL MEDICINE

CARRERA, JORGE, MD^{M†}

Provider ID: 100075629010

704 E GRAND AVE
ESCONDIDO, CA 92025

(619) 662-4100

Spanish

Teleservice

Effective as of 01-FEB-22

CHEN, MARGARET, MD^{F†}

Provider ID: 100184661008

460 N ELM ST

ESCONDIDO, CA 92025

(760) 520-8100

Greek, Spanish

Effective as of 01-AUG-20

PEDIATRICS

STRAZICICH, KARLA, MD^F

Provider ID: 100080501007

426 N DATE ST
ESCONDIDO, CA 92025

(760) 690-5900

Spanish

Effective as of 01-JAN-24

FAMILY PRACTICE

CHRISTIE, PATRICIA, MD^F

Provider ID: 100407567004

1328 S MISSION RD
FALLBROOK, CA 92028

(760) 451-4720

Effective as of 01-AUG-23

DEEL, MARGARET, MD^{F†}

Provider ID: 100027747012

593 E ELDER ST STE B
FALLBROOK, CA 92028

(760) 723-5900

Spanish

Effective as of 01-AUG-20

DEEL, MARGARET, MD^{F†}

Provider ID: 100027747016

593 E ELDER ST STE B
FALLBROOK, CA 92028

(760) 723-5900

Spanish

Effective as of 01-MAR-24

DEEL, MARGARET, MD^{F†}

Provider ID: 100027747004

593 E ELDER ST STE B
FALLBROOK, CA 92028

(760) 723-5900

Spanish

Effective as of 01-OCT-14

DEEL, MARGARET, MD^{F†}

Provider ID: 100027747014

593 E ELDER ST STE B
FALLBROOK, CA 92028

(760) 723-5900

Spanish

Effective as of 01-NOV-20

DEEL, MARGARET, MD^{F†}

Provider ID: 100027747015

593 E ELDER ST STE B
FALLBROOK, CA 92028

(760) 723-5900

Spanish

Effective as of 01-SEP-22

MILLER, BRANDON, DO^{M†}

Provider ID: 100148562018

521 E ELDER ST STE 103
FALLBROOK, CA 92028

(760) 728-8344

Effective as of 01-NOV-20

MILLER, BRANDON, DO^{M†}

Provider ID: 100148562015

521 E ELDER ST STE 105
FALLBROOK, CA 92028

(760) 728-8344

Effective as of 01-DEC-18

FQHC

VISTA COMMUNITY CLINIC,

Provider ID: PG0072409011

321 E ALVARADO ST
FALLBROOK, CA 92028

(760) 723-6200

Teleservice

Effective as of 01-MAR-23

INTERNAL MEDICINE

C1. 网络提供者名单 主治医生

CVIJANOVIC, GORAN, MD^{M†}

Provider ID: 100370457002

📍 1328 S MISSION RD
FALLBROOK, CA 92028
☎ (760) 451-4720

Effective as of 01-JUN-21

STRUTZ, PETER, MD^M

Provider ID: 100092315007

📍 605 E ALVARADO ST STE
100
FALLBROOK, CA 92028
☎ (760) 728-8489

📱 Spanish

Effective as of 01-SEP-21

FAMILY PRACTICE

ARMANIOUS, NANCY, MD^{F†}

Provider ID: 100379442002

📍 26795 PORTOLA PKWY
FOOTHILL RANCH, CA
92610

☎ (949) 829-9403

Effective as of 01-NOV-21

DECOCK, JAMES, MD^{M††}

Provider ID: 100051324014

📍 26795 PORTOLA PKWY
FOOTHILL RANCH, CA
92610

☎ (949) 829-9403

Effective as of 01-APR-15

INTERNAL MEDICINE

PATEL, BAKULKUMAR, MD^{M†}

Provider ID: 100034722006

📍 26740 TOWNE CENTRE DR
BLDG C
FOOTHILL RANCH, CA
92610

☎ (949) 588-9293

📱 Gujarati, Hindi, Spanish

Effective as of 01-JAN-18

VALADEZ, JESUS, MD^{M†}

Provider ID: 100098540068

📍 26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

☎ (949) 557-0750

📱 Spanish

Effective as of 01-JAN-21

FAMILY PRACTICE

ANDERSON, ALBERT, MD^{M†}

Provider ID: 100079441012

📍 1000 E LATHAM AVE STE G
HEMET, CA 92543

☎ (951) 391-0580

📱 Spanish

Teleservice

Effective as of 01-AUG-22

ASHRAF, HADIA, MD^{F†}

Provider ID: 100094934008

📍 903 E DEVONSHIRE AVE
STE F
HEMET, CA 92543

☎ (951) 929-1611

📱 Farsi, Hindi, Persian

Effective as of 01-OCT-20

ASHRAF, HADIA, MD^{F†}

Provider ID: 100094934002

📍 903 E DEVONSHIRE AVE
STE F
HEMET, CA 92543

☎ (951) 929-1611

📱 Farsi, Hindi, Persian

Effective as of 01-OCT-98

CARSON, MIA, MD^F

Provider ID: 100384377002

📍 949 CALHOUN PL STE G
HEMET, CA 92543

☎ (951) 765-5594

Effective as of 01-MAR-22

COMBS, MATTHEW, MD^{M†}

Provider ID: 100337168008

📍 3853 W STETSON AVE STE
200
HEMET, CA 92545

☎ (951) 225-6802

Effective as of 01-NOV-20

GANTA, SANYASI, MD^{M†}

Provider ID: 100113069011

📍 225 LAURSEN ST
HEMET, CA 92543

☎ (951) 925-6657

📱 Hindi, Spanish, Telugu

Effective as of 01-APR-21

GANTA, SANYASI, MD^{M†}

Provider ID: 100113069005

📍 225 LAURSEN ST
HEMET, CA 92543

☎ (951) 925-6657

📱 Hindi, Spanish, Telugu

Effective as of 01-JAN-17

GOHIL, RAJIT, MD^{M†}

Provider ID: 100391418004

📍 2390 E FLORIDA AVE STE
104
HEMET, CA 92544

☎ (951) 414-4011

Effective as of 01-OCT-22

GOHIL, RAJIT, MD^{M†}

Provider ID: 100391418005

📍 2390 E FLORIDA AVE STE
104
HEMET, CA 92544

☎ (951) 414-4011

Effective as of 01-OCT-22

HARRISON, AMY, MD^F

Provider ID: 100410706006

📍 2390 E FLORIDA AVE STE

C1. 网络提供者名单 主治医生

104
HEMET, CA 92544
☎ (951) 414-4011
📄 Spanish
Effective as of 01-AUG-23

HARRISON, AMY, MD^F
Provider ID: 100410706005

📄 2390 E FLORIDA AVE STE
104
HEMET, CA 92544
☎ (951) 414-4011
📄 Spanish
Effective as of 01-AUG-23

HUGHES, LARRY, MD^{M†}
Provider ID: 100049939002

📄 4020 W FLORIDA AVE STE
H
HEMET, CA 92545
☎ (951) 925-9565
Effective as of 01-SEP-09

HUGHES, HEATHER, MD^{F*}
Provider ID: 100050011003

📄 4020 W FLORIDA AVE
HEMET, CA 92545
☎ (951) 925-9565
Effective as of 01-NOV-13

HUNT, TYRELLE, MD^F
Provider ID: 100417653002

📄 1701 E FLORIDA AVE
HEMET, CA 92544
☎ (951) 658-4486
📄 Spanish
Effective as of 01-NOV-23

MEHARDA, SANJIWANI, MD^F
Provider ID: 100327486019

📄 255 N GILBERT ST STE C2
HEMET, CA 92543
☎ (951) 694-8549
📄 Hindi, Punjabi, Urdu
Effective as of 01-DEC-23

OBRIEN, KATHARINE, DO^{F†}

Provider ID: 100319273003
📄 1600 E FLORIDA AVE STE
103
HEMET, CA 92544
☎ (951) 929-8121
Effective as of 01-DEC-17

SANDHU, BASANT, MD^M
Provider ID: 100315195009

📄 903 E DEVONSHIRE AVE
STE D
HEMET, CA 92543
☎ (951) 216-6100
📄 German, Hindi, Punjabi
Effective as of 01-AUG-20

YUN, JONATHAN, DO^{M†}

Provider ID: 100025475025
📄 255 N GILBERT ST STE C2
HEMET, CA 92543
☎ (951) 599-8532
📄 Korean, Spanish
Effective as of 01-NOV-20

YUN, JONATHAN, DO^{M†}

Provider ID: 100025475023
📄 255 N GILBERT ST STE C2
HEMET, CA 92543
☎ (951) 599-8532
📄 Korean, Spanish
Effective as of 01-AUG-20

GENERAL PRACTICE

EL-HENAWI, IGLAL, MD^F

Provider ID: 100107885005
📄 4020 W FLORIDA AVE
HEMET, CA 92545
☎ (951) 765-5000
Effective as of 01-SEP-15

EL-HENAWI, IGLAL, MD^F

Provider ID: 100107885003
📄 4020 W FLORIDA AVE

HEMET, CA 92545
☎ (951) 765-5000
Effective as of 01-JAN-14

EL-HENAWI, IGLAL, MD^F

Provider ID: 100107885007
📄 4020 W FLORIDA AVE
HEMET, CA 92545
☎ (951) 765-5000
Effective as of 01-AUG-20

INTERNAL MEDICINE

BARVE, PRANAV, MD^{M†}

Provider ID: 100318437028
📄 2390 E FLORIDA AVE STE
104
HEMET, CA 92544
☎ (951) 414-4011
📄 Hindi, Marathi
Effective as of 01-AUG-21

BARVE, PRANAV, MD^{M†}

Provider ID: 100318437029
📄 2390 E FLORIDA AVE STE
104
HEMET, CA 92544
☎ (951) 414-4011
📄 Hindi, Marathi
Effective as of 01-AUG-21

BATIN, FRANCES, MD^F

Provider ID: 100075999009
📄 1001 S STATE ST
HEMET, CA 92543
☎ (951) 925-2525
📄 Spanish
Effective as of 01-NOV-23

CHING, TSUNG, MD^{M†}

Provider ID: 100380049002
📄 1278 E LATHAM AVE
HEMET, CA 92543
☎ (951) 925-6625
📄 Mandarin

C1. 网络提供者名单 主治医生

Effective as of 01-DEC-21

CHODAY, PRITHI, MD^F

Provider ID: 100419896004

1030 E FLORIDA AVE
HEMET, CA 92543

(833) 867-4642

Telugu

Effective as of 01-DEC-23

CHODAY, PRITHI, MD^F

Provider ID: 100419896003

422 N SAN JACINTO ST STE
A
HEMET, CA 92543

(833) 867-4642

Telugu

Effective as of 01-DEC-23

HUSSAIN, ABID, MD^{M†}

Provider ID: 100108449003

255 N GILBERT ST BLDG B4
HEMET, CA 92543

(951) 652-0060

Punjabi, Spanish, Urdu

Teleservice

Effective as of 01-SEP-15

MATHIAS, HERMAN, MD^{M†}

Provider ID: 100037216007

391 N SAN JACINTO ST
HEMET, CA 92543

(951) 929-6003

Hindi

Effective as of 01-AUG-95

PATEL, REENABEN, MD^F

Provider ID: 100380064003

2390 E FLORIDA AVE STE
101
HEMET, CA 92544

(951) 925-1449

Effective as of 01-JAN-22

POSSAGNOLI, ISABELLA, MD^F

Provider ID: 100435063002

603 E LATHAM AVE
HEMET, CA 92543

(951) 502-3500

Portuguese, Spanish

Effective as of 01-AUG-24

RAJA, MANIKANDA, MD^{M†}

Provider ID: 100113362004

1701 E FLORIDA AVE
HEMET, CA 92544

(951) 658-4486

Tamil, Telugu

Effective as of 01-AUG-02

SALEH, HANA, MD^{F†}

Provider ID: 100246071008

391 N SAN JACINTO ST
HEMET, CA 92543

(951) 533-5123

Arabic, Spanish

Effective as of 01-APR-24

SALEH, HANA, MD^{F†}

Provider ID: 100246071002

391 N SAN JACINTO ST
HEMET, CA 92543

(951) 533-5123

Arabic, Spanish

Effective as of 01-SEP-15

SALEH, HANA, MD^{F†}

Provider ID: 100246071007

391 N SAN JACINTO ST
HEMET, CA 92543

(951) 533-5123

Arabic, Spanish

Effective as of 01-OCT-23

SHALABY, MOHSEN, MD^{M†}

Provider ID: 100306246002

1023 E FLORIDA AVE
HEMET, CA 92543

(951) 599-8403

Arabic

Effective as of 01-MAR-17

PEDIATRICS

SEYED, KAZEM, MD^{M†}

Provider ID: 100028573003

750 E LATHAM AVE STE 1
HEMET, CA 92543

(951) 766-6696

Persian

Effective as of 01-OCT-10

SEYED, KAZEM, MD^{M†}

Provider ID: 100028573009

750 E LATHAM AVE STE 1
HEMET, CA 92543

(951) 766-6696

Persian

Effective as of 01-AUG-20

FQHC

IMPERIAL BEACH HEALTH CENTER,

Provider ID: PG0005455007

949 PALM AVE
IMPERIAL BEACH, CA 91932

(619) 429-3733

Teleservice

Effective as of 01-JUL-22

FAMILY PRACTICE

CHANG, ALBERT, MD^M

Provider ID: 100086039033

15825 LAGUNA CANYON
RD STE 104
IRVINE, CA 92618

(949) 585-9870

Korean, Spanish

Effective as of 01-OCT-23

CHANG, ALBERT, MD^{M†}

Provider ID: 100086039014

15825 LAGUNA CANYON

C1. 网络提供者名单 主治医生

RD STE 202
IRVINE, CA 92618
☎ (949) 585-9870
📄 Korean, Spanish
Effective as of 01-JAN-17

CHANG, ALBERT, MD^{M†}
Provider ID: 100086039013
📄 15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618
☎ (949) 585-9870
📄 Korean, Spanish
Effective as of 01-JAN-17

CHANG, ALBERT, MD^{M†}
Provider ID: 100086039015
📄 15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618
☎ (949) 585-9870
📄 Korean, Spanish
Effective as of 01-JAN-17

HUANG, JANET, DO^{F†}
Provider ID: 100007711005
📄 18 ENDEAVOR STE 203
IRVINE, CA 92618
☎ (949) 733-0168
📄 Chinese, Mandarin,
Taiwanese
Effective as of 01-JUL-20

MACAULEY, TODD, DO^{M†}
Provider ID: 100337131058
📄 8607 IRVINE CENTER DR
IRVINE, CA 92618
☎ (949) 557-0600
Effective as of 01-JAN-21

SAAM, SHIDA, DO^{F††}
Provider ID: 100093095035
📄 16300 SAND CANYON AVE
STE 602
IRVINE, CA 92618

☎ (800) 684-0717
📄 Farsi, Persian, Spanish
Effective as of 01-OCT-24

SAAM, SHIDA, DO^{F†}
Provider ID: 100093095027
📄 16300 SAND CANYON AVE
STE 602
IRVINE, CA 92618
☎ (800) 684-0717
📄 Farsi, Persian, Spanish
Effective as of 01-JUN-19

SAAM, SHIDA, DO^{F†}
Provider ID: 100093095029
📄 16300 SAND CANYON AVE
STE 602
IRVINE, CA 92618
☎ (800) 684-0717
📄 Farsi, Persian, Spanish
Effective as of 01-JUN-19

SAAM, SHIDA, DO^{F†}
Provider ID: 100093095032
📄 16300 SAND CANYON AVE
STE 602
IRVINE, CA 92618
☎ (800) 684-0717
📄 Farsi, Persian, Spanish
Effective as of 01-JUN-19

SAAM, SHIDA, DO^{F†}
Provider ID: 100093095026
📄 16300 SAND CANYON AVE
STE 602
IRVINE, CA 92618
☎ (800) 684-0717
📄 Farsi, Persian, Spanish
Effective as of 01-JUN-19

SAAM, SHIDA, DO^{F†}
Provider ID: 100093095030
📄 16300 SAND CANYON AVE
STE 602
IRVINE, CA 92618

☎ (800) 684-0717
📄 Farsi, Persian, Spanish
Effective as of 01-JUN-19

YACOOB, MARLENE, MD^F
Provider ID: 100010305018
📄 22 ODYSSEY STE 115
IRVINE, CA 92618
☎ (949) 988-7550
📄 French, Spanish
Teleservice
Effective as of 01-JUN-19

YACOOB, MARLENE, MD^F
Provider ID: 100010305009
📄 22 ODYSSEY STE 115
IRVINE, CA 92618
☎ (949) 988-7550
📄 French, Spanish
Teleservice
Effective as of 01-OCT-16

GENERAL PRACTICE



ZAHEDI, MARCO, MD^M
Provider ID: 100308797010
📄 16520 BAKE PKWY STE 115
IRVINE, CA 92618
☎ (949) 857-4444
📄 Farsi, Persian, Spanish
Effective as of 01-MAR-23

ZAHEDI, MARCO, MD^M
Provider ID: 100308797011
📄 16520 BAKE PKWY STE 115
IRVINE, CA 92618
☎ (949) 857-4444
📄 Farsi, Persian, Spanish
Effective as of 01-MAR-23

INTERNAL MEDICINE




COUNCELBAUM, NANCY, MD^{F††}
Provider ID: 100061502007

C1. 网络提供者名单 主治医生

 16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618
 (949) 791-3101
Effective as of 01-JAN-21




HUANG, CHARLIE, DO^{M*}

Provider ID: 100325520007

 16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618
 (949) 791-3101
 Mandarin, Taiwanese
Effective as of 01-JAN-21




POURBABAK, SAM, MD^M

Provider ID: 100114265020

 22 ODYSSEY STE 115
IRVINE, CA 92618
 (949) 988-7550
 Farsi, French, Persian
Teleservice
Effective as of 01-APR-24




POURBABAK, SAM, MD^M

Provider ID: 100114265021

 22 ODYSSEY STE 115
IRVINE, CA 92618
 (949) 988-7550
 Farsi, French, Persian
Teleservice
Effective as of 01-APR-24

RASHID, AHSAN, MD^{M†}

Provider ID: 100036910003


 113 WATERWORKS WAY
STE 250
IRVINE, CA 92618
 (949) 753-1522
 Spanish, Urdu
Effective as of 01-JAN-18

SERAG, RANDA, MD^{F††}

Provider ID: 100136797017




 16300 SAND CANYON AVE

STE 311
IRVINE, CA 92618

 (949) 791-3101
Effective as of 01-JAN-21




SHUNE, HONG, MD^{F†}

Provider ID: 100196968014

 16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618
 (949) 791-3101
 Chinese, Mandarin
Effective as of 01-JAN-21

SUN, YEMING, MD^{F*}

Provider ID: 100022013010

 113 WATERWORKS WAY
STE 125
IRVINE, CA 92618
 (949) 552-6788
 Mandarin
Effective as of 01-AUG-20

FAMILY PRACTICE

DEMBO-SMEATON, ELENA, MD^F

Provider ID: 100112789010

 8950 VILLA LA JOLLA DR
STE C129
LA JOLLA, CA 92037
 (858) 450-5900
 Russian
Teleservice
Effective as of 01-MAY-21

DEMBO-SMEATON, ELENA, MD^F




Provider ID: 100112789011

 8950 VILLA LA JOLLA DR
STE C129
LA JOLLA, CA 92037
 (858) 450-5900
 Russian
Teleservice

Effective as of 01-JUL-21



DEMBO-SMEATON, ELENA, MD^F

Provider ID: 100112789012

 8950 VILLA LA JOLLA DR
STE C129
LA JOLLA, CA 92037
 (858) 450-5900
 Russian
Teleservice
Effective as of 01-JUL-21



GOLD, MARGARET, MD^M

Provider ID: 100231182007

 8950 VILLA LA JOLLA DR
LA JOLLA, CA 92037
 (858) 450-5900
Effective as of 01-APR-24



GOLD, MARGARET, MD^M

Provider ID: 100231182005

 8950 VILLA LA JOLLA DR
STE C129
LA JOLLA, CA 92037
 (858) 450-5900
Teleservice
Effective as of 01-APR-24


GOLD, MARGARET, MD^M

Provider ID: 100231182008



 8950 VILLA LA JOLLA DR
STE C129
LA JOLLA, CA 92037
 (858) 450-5900
Teleservice
Effective as of 01-MAY-24

VAZQUEZ-BOJORQUEZ, ALEJANDRA, MD^F

Provider ID: 100391945014




 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

C1. 网络提供者名单 主治医生



 (858) 779-2366
 Spanish
Effective as of 01-APR-23

INTERNAL MEDICINE

AL-SALEH, YADANI, MD^{F†}



Provider ID: 100358544010
 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
 (858) 799-0855
 Spanish
Effective as of 01-NOV-22

CAMACHO, MARIAM, MD^{F*}

Provider ID: 100439091002
 8950 VILLA LA JOLLA DR
STE C129
LA JOLLA, CA 92037
 (858) 450-5900
Effective as of 01-OCT-24




FAMILY PRACTICE

PATEL, HEMANSHU, MD^M




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

INTERNAL MEDICINE



ALAMAR, ALI, MD^{M†}

Provider ID: 100106664014
 5565 GROSSMONT
CENTER DR BLDG 1 STE 105
LA MESA, CA 91942
 (619) 724-6644
 Arabic, Spanish
Teleservice
Effective as of 01-SEP-20




NGUYEN, DAT, MD^M

Provider ID: 100047564021
 5565 GROSSMONT
CENTER DR STE 229
LA MESA, CA 91942
 (858) 349-3760
 Spanish, Vietnamese
Effective as of 01-MAR-24




PATEL, HEMANSHU, MD^M

Provider ID: 100282252015
 7339 EL CAJON BLVD STE I
LA MESA, CA 91942
 (619) 698-0606
Effective as of 01-APR-24




SHAHBAZ, MAJID, MD^M

Provider ID: 100090790019
 8851 CENTER DR STE 408
LA MESA, CA 91942
 (619) 583-1174
 Farsi, Persian, Tagalog
Teleservice
Effective as of 01-JAN-21

SHAHBAZ, MAJID, MD^M




Provider ID: 100090790018
 8851 CENTER DR STE 408
LA MESA, CA 91942
 (619) 583-1174
 Farsi, Persian, Tagalog
Teleservice
Effective as of 01-JAN-21

SHAHBAZ, MAJID, MD^M

Provider ID: 100090790008
 8851 CENTER DR STE 408
LA MESA, CA 91942
 (619) 583-1174
 Farsi, Persian, Tagalog
Teleservice
Effective as of 01-MAR-18




SHAHBAZ, MAJID, MD^M

Provider ID: 100090790020

 8851 CENTER DR STE 408
LA MESA, CA 91942
 (619) 583-1174
 Farsi, Persian, Tagalog
Teleservice
Effective as of 01-MAR-23




FAMILY PRACTICE

WAINWRIGHT, MITCHELL, MD^M

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



INTERNAL MEDICINE

ELSANADI, RAEF, MD^{M††}



Provider ID: 100040631004
 333 CORPORATE DR STE
210
LADERA RANCH, CA 92694
 (949) 364-3582
 Arabic
Effective as of 01-SEP-19

FAMILY PRACTICE

PANITCH, JILL, MD^{F*}

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

SZYMANSKI, JARED, DO^M

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

C1. 网络提供者名单 主治医生

INTERNAL MEDICINE

DEWING, JANNE, MD^F

Provider ID: 100105400007

31862 COAST HWY STE 200
LAGUNA BEACH, CA 92651

(949) 340-5454

Effective as of 01-AUG-18

FAMILY PRACTICE

CHANG, MICHAEL, DO^{M†}

Provider ID: 100294076006

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653

(949) 448-0656

Effective as of 01-AUG-18

CHANG, MICHAEL, DO^{M††}

Provider ID: 100294076007

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653

(949) 448-0656

Effective as of 01-AUG-18

FOSTER, MARK, MD^M

Provider ID: 100108418005

24411 HEALTH CENTER DR
STE 460
LAGUNA HILLS, CA 92653

(949) 373-7799

Effective as of 01-JAN-18

GEE, KELLY, DO^{F†}

Provider ID: 100358387006

23521 PASEO DE VALENCIA
STE 311
LAGUNA HILLS, CA 92653

(949) 305-2660

Effective as of 01-FEB-22

HICKS, TOMMY, MD^{M††}

Provider ID: 100093348004

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653

(949) 588-7262

Effective as of 01-JAN-18

HUYNH, JUDY, DO^{F†}

Provider ID: 100065290003

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653

(949) 768-4850

Effective as of 01-APR-12

HUYNH, JUDY, DO^{F†}

Provider ID: 100065290005

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653

(949) 768-4850

Effective as of 01-JAN-18

IERARDI, STEPHEN, MD^M

Provider ID: 100017573010

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

(949) 916-9100

Effective as of 01-APR-22

IERARDI, STEPHEN, MD^M

Provider ID: 100017573009

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

(949) 916-9100

Effective as of 01-APR-22

KHOSHREZA, HALEH, MD^{F†}

Provider ID: 100383918002

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653

(949) 448-0656

Farsi, German

Effective as of 01-MAR-22

LEISH, BRIAN, MD^M

Provider ID: 100103119055

24411 HEALTH CENTER DR
STE 460
LAGUNA HILLS, CA 92653

(949) 373-7799

Effective as of 01-JAN-18

MANDEL, RONALD, DO^{M†}

Provider ID: 100034539004

25411 CABOT RD STE 115
LAGUNA HILLS, CA 92653

(949) 362-2121

Spanish

Effective as of 01-JAN-18

MOHINDRA, SUCHITRA, MD^{F†}

Provider ID: 100025171005

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653

(949) 448-0656

Hindi, Hindustani, Punjabi

Effective as of 01-AUG-18

MUNIB, SABEEN, MD^{F†}

Provider ID: 100168805025

23181 LA CADENA DR STE
101
LAGUNA HILLS, CA 92653

(949) 647-5234

Hindi, Punjabi, Urdu

Effective as of 01-FEB-20

MUNIB, SABEEN, MD^{F†}

Provider ID: 100168805030

23181 LA CADENA DR STE
101
LAGUNA HILLS, CA 92653

(949) 647-5234

Hindi, Punjabi, Urdu

Effective as of 01-MAR-21

MUNIB, SABEEN, MD^{F†}

Provider ID: 100168805028

C1. 网络提供者名单

主治医生

23181 LA CADENA DR STE 101
LAGUNA HILLS, CA 92653
(949) 647-5234
Hindi, Punjabi, Urdu
Effective as of 01-OCT-20

RIVERO, JORGE, MD^M

Provider ID: 100059240008
23521 PASEO VALENCIA 108
LAGUNA HILLS, CA 92653
(949) 588-7262
Spanish
Effective as of 01-JAN-18

SY, JOAN, DO^F

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

SY, JOAN, DO^F

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

YACOOB, MARLENE, MD^F

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

YACOOB, MARLENE, MD^F

Provider ID: 100010305019
23141 MOULTON PKWY STE

102
LAGUNA HILLS, CA 92653
(949) 916-9100
French, Spanish
Teleservice
Effective as of 01-JUL-19

GENERAL PRACTICE

COOKE, LAWRENCE, MD^{M*}

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

HARMS, MONICA, MD^F

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

HARMS, MONICA, MD^F

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

NAPOLI, LYNN, MD^F

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

NAPOLI, LYNN, MD^F

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

INTERNAL MEDICINE

AFSHAR, YAMA, DO^M

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

ARTHUR, KRISTINE, MD^{F†}

Provider ID: 100108743006
24268 EL TORO RD
LAGUNA HILLS, CA 92637
(657) 241-8455
French
Effective as of 01-APR-24

ARTHUR, KRISTINE, MD^{F†}

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

ASHTARI, MOZHGAN, MD^{F†}

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

BASEN, ANGELA, MD^F

C1. 网络提供者名单 主治医生

Provider ID: 100295897011
24321 AVENIDA DE LA CARLOTA
LAGUNA HILLS, CA 92653
(949) 204-3006
Vietnamese
Effective as of 01-JUN-24

BROWN, HOSEA, MD^{M†}
Provider ID: 100017878015
25431 CABOT RD STE 118
LAGUNA HILLS, CA 92653
(949) 362-8877
Spanish
Effective as of 01-JUN-17

BROWN, HOSEA, MD^{M†}
Provider ID: 100017878018
25431 CABOT RD STE 118
LAGUNA HILLS, CA 92653
(949) 362-8877
Spanish
Effective as of 01-JUN-18

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

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

BROWN, HOSEA, MD^{M†}
Provider ID: 100017878007
25431 CABOT RD STE 118
LAGUNA HILLS, CA 92653
(949) 362-8877

Spanish
Effective as of 01-JAN-14

CHANG, KU JUEY, MD^M
Provider ID: 100079645006
23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653
(949) 916-9100
Chinese
Effective as of 01-NOV-16

CHANG, KU JUEY, MD^M
Provider ID: 100079645013
23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653
(949) 916-9100
Chinese
Effective as of 01-JUN-19

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

COVARRUBIAS, GRACIA, MD^{F†}
Provider ID: 100109548016
24268 EL TORO RD
LAGUNA HILLS, CA 92637
(657) 241-8455
Spanish
Effective as of 01-MAR-20

COVARRUBIAS, GRACIA, MD^{F†}
Provider ID: 100109548017
24268 EL TORO RD
LAGUNA HILLS, CA 92637
(657) 241-8455
Spanish
Effective as of 01-SEP-21

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

EDRIS, MARWAN, MD^M
Provider ID: 100083033005
25283 CABOT RD STE 106
LAGUNA HILLS, CA 92653
(949) 364-9080
Arabic, Hebrew
Effective as of 01-JAN-18

FELDMAN, ROBERT, MD^{M*}
Provider ID: 100016238005
23961 CALLE DE LA MAGDALENA STE 429
LAGUNA HILLS, CA 92653
(949) 452-1930
Effective as of 01-MAR-19

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

HENRY, BRIAN, MD^M
Provider ID: 100063427004
24221 CALLE DE LA LOUISA STE 200
LAGUNA HILLS, CA 92653
(949) 588-8700
Effective as of 01-JAN-18

HUSEBY, DAVID, MD^M
Provider ID: 100091780005
24411 HEALTH CENTER DR STE 460

C1. 网络提供者名单 主治医生

LAGUNA HILLS, CA 92653
☎ (949) 373-7799
📄 Spanish
Effective as of 01-JAN-18

JAVAHERI, MANIJEH, MD^{F†}

Provider ID: 100111565009
📄 23961 CALLE DE LA
MAGDALENA STE 430
LAGUNA HILLS, CA 92653
☎ (949) 770-8100
📄 Farsi, Turkish
Effective as of 01-JAN-18

KAURA, MAYA, MD^F

Provider ID: 100011471005
📄 24953 PASEO DE
VALENCIA STE 22A
LAGUNA HILLS, CA 92653
☎ (949) 770-7333
📄 Hindi
Effective as of 01-MAR-21

LEW, HOMER, DO^{M†}

Provider ID: 100088621006
📄 23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
☎ (949) 588-7262
📄 Cantonese, Chinese,
Spanish
Effective as of 01-JAN-18

LIN, CHI WHEI, MD^{M*}

Provider ID: 100090449006
📄 23521 PASEO DE VALENCIA
STE 310
LAGUNA HILLS, CA 92653
☎ (949) 716-4555
📄 Chinese, Mandarin, Spanish
Effective as of 01-JAN-18

LO, ALAN, MD^M

Provider ID: 100022892004
📄 25401 CABOT RD STE 101

LAGUNA HILLS, CA 92653
☎ (949) 768-4850
Effective as of 01-JAN-18

MORCOS-CLARK, NERMINE, MD^{F†}

Provider ID: 100073329007
📄 23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
☎ (949) 588-7262
📄 Arabic, Spanish
Effective as of 01-JAN-18

PACE, SARAH, MD^{F†}

Provider ID: 100322536002
📄 24321 AVENIDA DE LA
CARLOTA
LAGUNA HILLS, CA 92653
☎ (949) 204-3006
📄 Spanish
Effective as of 01-AUG-22

POURBABAK, SAM, MD^M

Provider ID: 100114265015
📄 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
☎ (949) 916-9100
📄 Farsi, French, Persian
Teleservice
Effective as of 01-JUN-19

POURBABAK, SAM, MD^M

Provider ID: 100114265008
📄 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
☎ (949) 916-9100
📄 Farsi, French, Persian
Teleservice
Effective as of 01-APR-18

SADEGHI TARI, MAHYAR, MD^{F†}

Provider ID: 100107614005

📄 24411 HEALTH CENTER DR
STE 460
LAGUNA HILLS, CA 92653
☎ (949) 334-8200
📄 Farsi, Spanish, Swedish
Effective as of 01-JAN-18

SIU, CURTIS, MD^{M*}

Provider ID: 100082780005
📄 24221 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
☎ (949) 420-5988
📄 Chinese
Effective as of 01-JAN-18

STERNS, DANIEL, MD^M

Provider ID: 100081005004
📄 24411 HEALTH CENTER DR
STE 460
LAGUNA HILLS, CA 92653
☎ (949) 373-7799
📄 Spanish
Effective as of 01-JAN-18

TRAN, CECILIA, MD^{F*}

Provider ID: 100105245004
📄 24221 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
☎ (949) 420-5980
📄 Vietnamese
Effective as of 01-JAN-18

ZAMANI, MAZIAR, MD^{M*}

Provider ID: 100086365005
📄 24221 CALLE DE LA LOUISA
STE 400
LAGUNA HILLS, CA 92653
☎ (949) 770-2085
Effective as of 01-JAN-18

ZAREMBA, MARK, MD^{M†}

Provider ID: 100021573005
📄 25401 CABOT RD STE 107

C1. 网络提供者名单 主治医生

LAGUNA HILLS, CA 92653
☎ (949) 273-8085
Effective as of 01-APR-18

ZAREMBA, MARK, MD^{M†}

Provider ID: 100021573002
📄 25401 CABOT RD STE 107
LAGUNA HILLS, CA 92653
☎ (949) 273-8085
Effective as of 01-JAN-13

FAMILY PRACTICE

BEDRAN, ASAD, DO^{M†}

Provider ID: 100347139005
📄 27231 LA PAZ RD STE A
LAGUNA NIGUEL, CA 92677
☎ (949) 643-9111
Effective as of 01-SEP-20

BELLO, JUSTINE, MD^{F†}

Provider ID: 100281688002
📄 27231 LA PAZ RD STE A
LAGUNA NIGUEL, CA 92677
☎ (949) 643-9111
Effective as of 01-SEP-16

BREWER, SARAH, MD^{F††}

Provider ID: 100281677007
📄 32341 GOLDEN LANTERN
STE D
LAGUNA NIGUEL, CA 92677
☎ (949) 363-9595
Effective as of 01-FEB-21

FU, KAREN, MD^{F††}

Provider ID: 100095684012
📄 32341 GOLDEN LANTERN
STE D
LAGUNA NIGUEL, CA 92677
☎ (949) 363-9595
📄 Mandarin, Spanish
Effective as of 01-JUN-22

LEE, SUSAN, MD^{F†}

Provider ID: 100068409006
📄 27231 LA PAZ RD STE A
LAGUNA NIGUEL, CA 92677
☎ (949) 643-9111
Effective as of 01-JUL-14

INTERNAL MEDICINE

BILAL, BASSAM, MD^{M†}

Provider ID: 100327805022
📄 30281 GOLDEN LANTERN
LAGUNA NIGUEL, CA 92677
☎ (949) 495-7144
📄 Arabic, Spanish
Effective as of 01-FEB-19

KELLOGG, CHERYL, MD^F

Provider ID: 100082360006
📄 30131 TOWN CENTER DR
STE 204
LAGUNA NIGUEL, CA 92677
☎ (949) 342-1780
Effective as of 01-JAN-18

MORTAJI, PARISA, MD^F

Provider ID: 100434326003
📄 30281 GOLDEN LANTERN
LAGUNA NIGUEL, CA 92677
☎ (949) 495-7144
Effective as of 01-JUL-24

PEDIATRICS

PATEL, JYOTINKUMAR, MD^{M†}

Provider ID: 100035402010
📄 30281 GOLDEN LANTERN
LAGUNA NIGUEL, CA 92677
☎ (949) 495-7144
📄 Gujarati, Hindi
Effective as of 01-SEP-22

CERTIFIED NURSE PRACTITIONER

MOY, TALAR, NPF^F

Provider ID: 100431592003
📄 24268 EL TORO RD
LAGUNA WOODS, CA
92637
☎ (657) 241-8455
📄 Arabic, Kurdish
Effective as of 01-JUN-24

FAMILY PRACTICE

HAUSER, BRIAN, MD^M

Provider ID: 100262507007
📄 24268 EL TORO RD
LAGUNA WOODS, CA
92637
☎ (657) 241-8455
Effective as of 01-JUN-24

VANVRANKEN, BRUCE, MD^M

Provider ID: 100074767005
📄 24331 EL TORO RD STE 330
LAGUNA WOODS, CA
92637
☎ (949) 837-7521
Effective as of 01-JAN-18

INTERNAL MEDICINE

ROKSHADFAR, SAGHI, MD^{F†}

Provider ID: 100113408009
📄 24268 EL TORO RD
LAGUNA WOODS, CA
92637
☎ (657) 241-8455
📄 Farsi
Effective as of 01-JAN-21

ROKSHADFAR, SAGHI, MD^{F†}

Provider ID: 100113408008
📄 24268 EL TORO RD
LAGUNA WOODS, CA
92637
☎ (657) 241-8455
📄 Farsi
Effective as of 01-JAN-21

C1. 网络提供者名单

主治医生

SIEGFRIED, TRACY, MD^F

Provider ID: 100047456004

📍 24331 EL TORO RD STE 330
LAGUNA WOODS, CA
92637

☎ (949) 716-0833

Effective as of 01-JAN-18

FAMILY PRACTICE

JACKSON, ANITA, MD^{F†}

Provider ID: 100060861006

📍 31736 MISSION TRL STE G
LAKE ELSINORE, CA 92530

☎ (951) 674-1505

📱 Tagalog

Effective as of 01-NOV-11

MONARREZ, DAVID, MD^{M†}

Provider ID: 100102954018

📍 31739 RIVERSIDE DR STE A1
LAKE ELSINORE, CA 92530

☎ (951) 245-0505

📱 Spanish

Effective as of 01-AUG-24

TORRES, REBECCA, MD^{F†}

Provider ID: 100187138016

📍 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530

☎ (951) 471-1800

📱 Korean, Mandarin, Spanish

Effective as of 01-DEC-14

TORRES, REBECCA, MD^{F†}

Provider ID: 100187138015

📍 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530

☎ (951) 471-1800

📱 Korean, Mandarin, Spanish

Effective as of 01-DEC-14

GENERAL PRACTICE

ASPREC, JOSEPH, MD^M

Provider ID: 100070994004

📍 31571 CANYON ESTATES DR
STE 132

LAKE ELSINORE, CA 92532

☎ (951) 674-7811

📱 Spanish, Tagalog

Effective as of 01-JUL-22

MONARREZ, DAVID, MD^{M†}

Provider ID: 100102954016

📍 31739 RIVERSIDE DR STE A1
LAKE ELSINORE, CA 92530

☎ (951) 245-0505

📱 Spanish

Effective as of 01-NOV-20

MONARREZ, DAVID, MD^{M†}

Provider ID: 100102954012

📍 31739 RIVERSIDE DR STE A1
LAKE ELSINORE, CA 92530

☎ (951) 245-0505

📱 Spanish

Effective as of 01-OCT-18

OLIVEIRA, THOMAS, DO^{M†}

Provider ID: 100088827007

📍 506 W GRAHAM AVE STE
107

LAKE ELSINORE, CA 92530

☎ (951) 471-5116

📱 Italian, Spanish

Effective as of 01-APR-21

OLIVEIRA, THOMAS, DO^{M†}

Provider ID: 100088827008

📍 506 W GRAHAM AVE STE
107

LAKE ELSINORE, CA 92530

☎ (951) 471-5116

📱 Italian, Spanish

Effective as of 01-MAY-24

OLIVEIRA, THOMAS, DO^{M†}

Provider ID: 100088827009

📍 506 W GRAHAM AVE STE

107

LAKE ELSINORE, CA 92530

☎ (951) 471-5116

📱 Italian, Spanish

Effective as of 01-JUN-24

INTERNAL MEDICINE

BAJWA, SAIF, MD^{M†}

Provider ID: 100113080002

📍 16800 LAKESHORE DR STE
2

LAKE ELSINORE, CA 92530

☎ (951) 674-2155

📱 Spanish, Urdu

Effective as of 01-APR-17

SAADAT, FARID, MD^{M†}

Provider ID: 100013848002

📍 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530

☎ (951) 471-5711

📱 Farsi, Persian, Faroese

Effective as of 01-JUN-14

FAMILY PRACTICE

AHSAN, NUSRAT, MD^{F†}

Provider ID: 100113788007

📍 22621 LAKE FOREST DR STE
D1

LAKE FOREST, CA 92630

☎ (949) 242-6902

📱 Hindi

Effective as of 01-MAY-17

KOUMAS, MARY, DO^{F†}

Provider ID: 100089870008

📍 24401 MUIRLANDS BLVD
STE A

LAKE FOREST, CA 92630

☎ (949) 770-1950

Effective as of 01-MAR-22

INTERNAL MEDICINE

C1. 网络提供者名单 主治医生

GOVASHIRI, REZA, MD^{M†}

Provider ID: 100047181008

22621 LAKE FOREST DR STE
D1
LAKE FOREST, CA 92630
(949) 242-6902
Farsi, Spanish
Effective as of 01-JUL-19

MUY, MADINETH, MD^{F†}

Provider ID: 100082949013

22621 LAKE FOREST DR STE
D1
LAKE FOREST, CA 92630
(949) 242-6902
Cambodian, Khmer
Effective as of 01-OCT-18

FAMILY PRACTICE

MCHENRY, KATHRYN, DO^F

Provider ID: 100320650014

10039 VINE ST
LAKESIDE, CA 92040
(619) 390-9975
Spanish
Effective as of 01-FEB-24

PHAM, CHRISTINE, DO^F

Provider ID: 100397531003

10039 VINE ST
LAKESIDE, CA 92040
(858) 218-3000
Effective as of 01-JAN-23

FQHC

NEIGHBORHOOD

HEALTHCARE LAKESIDE, *

Provider ID: PG0024990051

10039 VINE ST
LAKESIDE, CA 92040
(858) 218-3000
Teleservice
Effective as of 01-JUL-22

INTERNAL MEDICINE

MCFARLAND, NATHAN, MD^M

Provider ID: 100216268004

10039 VINE ST
LAKESIDE, CA 92040
(858) 218-3000
Italian, Spanish
Effective as of 01-AUG-20

MCFARLAND, NATHAN, MD^M

Provider ID: 100216268007

10039 VINE ST
LAKESIDE, CA 92040
(858) 218-3000
Italian, Spanish
Effective as of 01-JAN-24

FQHC

LEMON GROVE FAMILY HEALTH CENTER,

Provider ID: PG0085568003

7592 BROADWAY
LEMON GROVE, CA 91945
(619) 515-2550
Teleservice
Effective as of 01-JAN-21

FAMILY PRACTICE

CAMARILLO, DANIEL, MD^{M†}

Provider ID: 100110735017

30420 HAUN RD
MENIFEE, CA 92584
(951) 676-4193
Spanish
Effective as of 01-NOV-20

CAMARILLO, DANIEL, MD^{M†}

Provider ID: 100110735009

30420 HAUN RD
MENIFEE, CA 92584
(951) 676-4193

Spanish

Effective as of 01-OCT-15

GOHIL, RAJIT, MD^M

Provider ID: 100391418013

29826 HAUN RD STE 200
MENIFEE, CA 92586
(951) 414-4020
Effective as of 01-JUL-23

GOHIL, RAJIT, MD^M

Provider ID: 100391418014

29826 HAUN RD STE 200
MENIFEE, CA 92586
(951) 414-4020
Effective as of 01-JUL-23

HARRISON, AMY, MD^F

Provider ID: 100410706004

29826 HAUN RD STE 200
MENIFEE, CA 92586
(951) 414-4020
Spanish
Effective as of 01-AUG-23

HARRISON, AMY, MD^F

Provider ID: 100410706003

29826 HAUN RD STE 200
MENIFEE, CA 92586
(951) 414-4020
Spanish
Effective as of 01-AUG-23

MADRID, RICHARD, MD^{M†}

Provider ID: 100077741007

30420 HAUN RD
MENIFEE, CA 92584
(951) 676-4193
Teleservice

Effective as of 01-JAN-16

SANDHU, BASANT, MD^M

Provider ID: 100315195011

26926 CHERRY HILLS
BLVD STE B

C1. 网络提供者名单

主治医生

MENIFEE, CA 92586
☎ (951) 216-2200
📄 German, Hindi, Punjabi
Effective as of 01-AUG-20

SANDHU, BASANT, MD^M

Provider ID: 100315195010
📄 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
☎ (951) 216-2200
📄 German, Hindi, Punjabi
Effective as of 01-AUG-20

ZURITA, DANIELA, MD^{F†}

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

ZURITA, DANIELA, MD^{F†}

Provider ID: 100396617009
📄 26926 CHERRY HILLS
BLVD STE C
MENIFEE, CA 92586
☎ (951) 216-2200
📄 Spanish
Effective as of 01-DEC-22

INTERNAL MEDICINE

ARANETA, TOMAS, MD^{M†}

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

BARVE, PRANAV, MD^M

Provider ID: 100318437034
📄 29826 HAUN RD STE 200

MENIFEE, CA 92586
☎ (951) 414-4020
📄 Hindi, Marathi
Effective as of 01-JUL-23

BARVE, PRANAV, MD^M

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

GONZALES, PATRICK, MD^{M†}

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

GONZALES, EDIVINA, MD^F

Provider ID: 100039220005
📄 29798 HAUN RD STE 106
MENIFEE, CA 92586
☎ (951) 301-3588
📄 Spanish, Tagalog
Effective as of 01-OCT-10

GONZALES, PATRICK, MD^{M†}

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

GONZALES, EDIVINA, MD^F

Provider ID: 100039220006
📄 29798 HAUN RD STE 106
MENIFEE, CA 92586
☎ (951) 301-3588
📄 Spanish, Tagalog
Effective as of 01-JAN-11

KIM, IRENE, DO^F

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

MARTINEZ, JORGE, MD^{M†}

Provider ID: 100096235012
📄 29826 HAUN RD STE 201
MENIFEE, CA 92586
☎ (951) 301-1100
📄 Spanish
Effective as of 01-JUN-22

FAMILY PRACTICE

BALL-ZONDERVAN, MONICA, MD^{F†}

Provider ID: 100294482047
📄 26732 CROWN VALLEY
PKWY STE 170
MISSION VIEJO, CA 92691
☎ (949) 364-7246
Effective as of 01-SEP-19

BARE, IAN, MD^{M†}

Provider ID: 100110113009
📄 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
☎ (949) 542-7700
📄 Spanish
Effective as of 01-JUN-21

BARE, IAN, MD^{M†}


Provider ID: 100110113017
📄 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
☎ (949) 542-7700
📄 Spanish
Effective as of 01-JUN-21

BASICH, CANDACE, MD^{F†}

C1. 网络提供者名单 主治医生

Provider ID: 100073084008

 30707 GATEWAY PL STE A2
MISSION VIEJO, CA 92694

 (657) 241-8435


 Spanish

Effective as of 01-SEP-18

BASICH, CANDACE, MD^{F†}

Provider ID: 100073084010

 30707 GATEWAY PL STE A2
MISSION VIEJO, CA 92694

 (657) 241-8435


 Spanish

Effective as of 01-DEC-21

BISUNA, BLANCA, MD^{F†}

Provider ID: 100199166013

 26732 CROWN VALLEY
PKWY STE 170
MISSION VIEJO, CA 92691


 (949) 364-7246

Effective as of 01-MAR-16

CHO, ANTHONY, MD^{M†}

Provider ID: 100326978002

 30707 GATEWAY PL STE A2
MISSION VIEJO, CA 92694


 (657) 241-8601


Effective as of 01-APR-18

DELNITZ, DANUTA, MD^F

Provider ID: 100109319011

 26691 PLAZA STE 140
MISSION VIEJO, CA 92691

 (949) 240-8555


 Polish, Spanish


Effective as of 01-APR-19

DELNITZ, DANUTA, MD^F

Provider ID: 100109319012

 26691 PLAZA STE 140
MISSION VIEJO, CA 92691

 (949) 240-8555

 Polish, Spanish


Effective as of 01-APR-19

ENDSLEY, DELVIN, MD^M

Provider ID: 100413682015

 27725 SANTA MARGARITA
PKWY STE 101

MISSION VIEJO, CA 92691


 (949) 270-2100

Effective as of 01-MAR-24

FIGHTLIN, STEFANIE, DO^{F†}

Provider ID: 100086847010

 26991 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

 (949) 582-5430


 Spanish

Effective as of 01-JAN-18

FLORES, TERESA, MD^{F†}

Provider ID: 100207722054

 27725 SANTA MARGARITA
PKWY STE 101
MISSION VIEJO, CA 92691

 (949) 270-2100


 Spanish

Effective as of 01-DEC-19

FLORES, TERESA, MD^{F†}

Provider ID: 100207722053

 27725 SANTA MARGARITA
PKWY STE 101
MISSION VIEJO, CA 92691

 (949) 270-2100


 Spanish

Effective as of 01-DEC-19

GEBHARD, KARL, MD^M

Provider ID: 100071312016

 26922 OSO PKWY STE 380
MISSION VIEJO, CA 92691


 (949) 305-0110

Effective as of 01-AUG-24

GEBHARD, KARL, MD^M

Provider ID: 100071312012

 26922 OSO PKWY STE 380
MISSION VIEJO, CA 92691


 (949) 305-0110

Effective as of 01-JUN-19

GEBHARD, KARL, MD^M

Provider ID: 100071312013

 26922 OSO PKWY STE 380
MISSION VIEJO, CA 92691


 (949) 305-0110

Effective as of 01-JUN-19

GEBHARD, KARL, MD^M

Provider ID: 100071312010

 26922 OSO PKWY STE 380
MISSION VIEJO, CA 92691


 (949) 305-0110

Effective as of 01-JAN-18

GEBHARD, KARL, MD^M

Provider ID: 100071312004


 26922 OSO PKWY STE 380
MISSION VIEJO, CA 92691


 (949) 305-0110

Effective as of 01-MAR-16

GONZALEZ, DAVID, MD^{M†}

Provider ID: 100096155006

 26732 CROWN VALLEY
PKWY STE 170
MISSION VIEJO, CA 92691


 (949) 364-7246


Effective as of 01-OCT-18

KUMAR, NISHCHAL, MD^{M†}

Provider ID: 100224908011

 23512 MADERO
MISSION VIEJO, CA 92691


 (949) 583-1600

 Hindi, Punjabi, Spanish

Effective as of 01-NOV-19

KUMAR, NISHCHAL, MD^{M†}

Provider ID: 100224908013

 23512 MADERO

C1. 网络提供者名单

主治医生

MISSION VIEJO, CA 92691
☎ (949) 583-1600
📄 Hindi, Punjabi, Spanish
Effective as of 01-SEP-21

LY, PHUONG, MD^{M†}

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

PEDARSANI, MARJAN, DO^{F†}

Provider ID: 100113548012
📄 23512 MADERO
MISSION VIEJO, CA 92691
☎ (949) 583-1600
📄 Farsi
Effective as of 01-SEP-21

PEDARSANI, MARJAN, DO^{F†}

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

RUTTEN, SONIA, MD^F

Provider ID: 100414034002
📄 30492 GATEWAY PL
STE 110
MISSION VIEJO, CA 92694
☎ (949) 542-7700
Effective as of 01-OCT-23

SAMOORI, RAMA, DO^{F†}

Provider ID: 100112028003
📄 26732 CROWN VALLEY
PKWY STE 170
MISSION VIEJO, CA 92691
☎ (949) 364-7246
📄 Farsi, Spanish

Effective as of 01-SEP-15

SHOAPOUR, CAMELLIA, MD^F

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

THOMAS, CHERYL, MD^F

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

THOMAS, CHERYL, MD^F

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

THOMAS, CHERYL, MD^F

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

THOMAS, CHERYL, MD^F

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

THOMAS, CHERYL, MD^F

Provider ID: 100043536023

📄 27725 SANTA MARGARITA
PKWY STE 101
MISSION VIEJO, CA 92691
☎ (949) 270-2100
Effective as of 01-AUG-21

THOMAS, CHERYL, MD^F

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

YAZDANSHENAS, MARYAM, MD^{F†}

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

GENERAL PRACTICE

JANISZEWSKI, EVA, MD^F

Provider ID: 100079209004
📄 24896 CHRISANTA DR STE
130
MISSION VIEJO, CA 92691
☎ (949) 458-2992
📄 Polish, Spanish
Effective as of 01-JAN-18

INTERNAL MEDICINE

BADIE, MEHRNAZ, MD^{F†}

Provider ID: 100113854005
📄 26800 CROWN VALLEY
PKWY STE 325
MISSION VIEJO, CA 92691
☎ (949) 364-6000
📄 Farsi
Effective as of 01-NOV-12

C1. 网络提供者名单 主治医生

BENNER, ERIC, MD^{M††}

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

CHANG, HELEN, MD^{F††}

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

COVARRUBIAS, GRACIA, MD^{F††}

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

COVARRUBIAS, GRACIA, MD^{F††}

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

LU, LESLIE, MD^{M††}

Provider ID: 100332363002
26800 CROWN VALLEY
PKWY STE 305
MISSION VIEJO, CA 92691
(949) 364-6000
Chinese
Effective as of 01-SEP-18

MAYET, KHADIJA, MD^{F†}

Provider ID: 100062204006
26800 CROWN VALLEY

PKWY STE 315
MISSION VIEJO, CA 92691
(949) 364-6000
Gujarati, Urdu
Effective as of 01-FEB-16

MCMILLAN, CATHERINE, DO^F

Provider ID: 100420167004
30230 RANCHO VIEJO RD
STE 200
MISSION VIEJO, CA 92675
(949) 443-4303
Effective as of 01-MAY-24

NABILI, SIAMAK, MD^M

Provider ID: 100070640062
27800 MEDICAL CENTER
RD STE 110
MISSION VIEJO, CA 92691
(949) 866-3600
Farsi, Persian
Effective as of 01-AUG-24

NABILI, SIAMAK, MD^M

Provider ID: 100070640063
27800 MEDICAL CENTER
RD STE 110
MISSION VIEJO, CA 92691
(949) 866-3600
Farsi, Persian
Effective as of 01-AUG-24

NGUYEN, VY, MD^{F††}

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

NOORIAN, NADER, MD^{M††}

Provider ID: 100052175006
26800 CROWN VALLEY
PKWY STE 305

MISSION VIEJO, CA 92691
(949) 364-6000
Persian
Effective as of 01-NOV-12

ROKSHADFAR, SAGHI, MD^{F†}

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

ROKSHADFAR, SAGHI, MD^{F†}

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

SELIGSOHN, BRUCE, MD^{M*}

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



SERGEYEVA, YELENA, MD^F

Provider ID: 100403248004
27800 MEDICAL CENTER
RD STE 110
MISSION VIEJO, CA 92691
(949) 364-3532
Russian, Ukrainian,
Belarusian
Teleservice
Effective as of 01-DEC-23




SERGEYEVA, YELENA, MD^F

Provider ID: 100403248005
27800 MEDICAL CENTER
RD STE 110
MISSION VIEJO, CA 92691




C1. 网络提供者名单 主治医生

 (949) 364-3532
 Russian, Ukrainian,
Belarusian
Teleservice
Effective as of 01-DEC-23



SERGEYEVA, YELENA, MD^F

Provider ID: 100403248007
 27800 MEDICAL CENTER
RD STE 110
MISSION VIEJO, CA 92691
 (949) 364-3532
 Russian, Ukrainian,
Belarusian
Teleservice
Effective as of 01-DEC-23



SERGEYEVA, YELENA, MD^F

Provider ID: 100403248003
 27800 MEDICAL CENTER
RD STE 110
MISSION VIEJO, CA 92691
 (949) 364-3532
 Russian, Ukrainian,
Belarusian
Teleservice
Effective as of 01-MAR-23




STAUNTON, MICHELE, MD^{F†}

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




STAUNTON, MICHELE, MD^{F††}

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




SWADENER, NINA, MD^{F†}

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



TRUONG, ANDREW, MD^{M††}

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



TSAI, MON TA, MD^{M††}

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

WADELL, CHAD, MD^{M†}




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

YAZDI, JANET, MD^{F††}




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

FAMILY PRACTICE




BREWER, ANH, DO^{F†}

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




BREWER, ANH, DO^{F†}

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



BRIGGS, BRIDGET, MD^F

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

ESTRELLA ITCHON, RHODA, MD^{F†}

Provider ID: 100010820002
 25495 MEDICAL CENTER
DR STE 301
MURRIETA, CA 92562
 (951) 461-1070
 Tagalog
Effective as of 01-SEP-04

MCKERAHAN, KELLY, DO^M

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

MEHARDA, SANJIWANI, MD^F

C1. 网络提供者名单 主治医生

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

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

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

SOTIS, JAMES, MD^{M†}
Provider ID: 100343557003
38860 SKY CANYON DR
BLDG A
MURRIETA, CA 92563
(951) 676-4193
Effective as of 01-AUG-19

VOURLITIS, MELISSA, DO^{F†}
Provider ID: 100090572030
24271 JACKSON AVE
MURRIETA, CA 92562
(510) 929-1400
Effective as of 01-JUL-24

WALTER, ROME, DO^M
Provider ID: 100198386003
41011 CALIFORNIA OAKS
RD STE 103
MURRIETA, CA 92562
(951) 225-6287

French
Effective as of 01-JUN-19

YUN, JONATHAN, DO^{M†}
Provider ID: 100025475024
24910 LAS BRISAS RD STE 111
MURRIETA, CA 92562
(951) 694-8549
Korean, Spanish
Effective as of 01-NOV-20

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

GENERAL PRACTICE

LULIC, DZENAN, MD^{M†}
Provider ID: 100283060006
40700 CALIFORNIA OAKS
RD STE 206
MURRIETA, CA 92562
(951) 412-0011
Spanish
Effective as of 01-MAR-19

INTERNAL MEDICINE

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

GONZALES, EDIVINA, MD^F
Provider ID: 100039220007

39755 DATE ST STE 103
MURRIETA, CA 92563
(951) 304-3221
Spanish, Tagalog
Effective as of 01-JAN-11

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

GONZALES, PATRICK, MD^{M†}
Provider ID: 100109580008
39755 DATE ST STE 103
MURRIETA, CA 92563
(951) 304-3221
Tagalog
Effective as of 01-APR-19

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



MARTINEZ, JORGE, MD^{M†}
Provider ID: 100096235003
39755 MURRIETA HOT
SPRINGS RD STE E120
MURRIETA, CA 92563
(951) 461-1331
Spanish
Effective as of 01-DEC-12

MARTINEZ, JORGE, MD^{M†}
Provider ID: 100096235010
39755 MURRIETA HOT
SPRINGS RD STE E120
MURRIETA, CA 92563
(951) 461-1331




C1. 网络提供者名单 主治医生

 Spanish
Effective as of 01-FEB-21

REYNOLDS, RICHARD, MD^{M†}



Provider ID: 100043439030
 25109 JEFFERSON AVE STE
100
MURRIETA, CA 92562
 (951) 698-0440
Effective as of 01-OCT-22

SALAS, ERNESTO, MD^M

Provider ID: 100093444006
 40690 CALIFORNIA OAKS
RD STE A
MURRIETA, CA 92562
 (951) 677-0098
 Spanish, Tagalog
Effective as of 01-JUL-24




PEDIATRICS

NGUYEN, TUAN, MD^{M†}



Provider ID: 100105070004
 28078 BAXTER RD STE 320
MURRIETA, CA 92563
 (951) 246-4546
Teleservice
Effective as of 01-APR-21

FAMILY PRACTICE

ALB, SIMONA, MD^F




Provider ID: 100033656022
 22 W 35TH ST STE 101
NATIONAL CITY, CA 91950
 (619) 427-3361
 Romanian
Effective as of 01-MAY-24

ALB, SIMONA, MD^F




Provider ID: 100033656024
 22 W 35TH ST STE 101
NATIONAL CITY, CA 91950
 (619) 427-3361

 Romanian
Effective as of 01-JUN-24




ALJAWADI, GEORGIA, DO^F

Provider ID: 100133625031
 22 W 35TH ST STE 101
NATIONAL CITY, CA 91950
 (619) 427-3361
 Filipino, Spanish, Tagalog
Effective as of 01-JUN-24




ALJAWADI, GEORGIA, DO^F

Provider ID: 100133625029
 22 W 35TH ST STE 101
NATIONAL CITY, CA 91950
 (619) 427-3361
 Filipino, Spanish, Tagalog
Effective as of 01-MAY-24




ALVAREZ-ESTRADA, MIGUEL, MD^M

Provider ID: 100360099026
 2835 HIGHLAND AVE
NATIONAL CITY, CA 91950
 (844) 200-2426
 Spanish
Effective as of 01-FEB-24




CAMPBELL, BRIANNA, MD^{F†}

Provider ID: 100360159004
 2400 E 8TH ST
NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
Effective as of 01-JAN-21




CARLSON, ROBERT, MD^{M†}

Provider ID: 100002398003
 36 N EUCLID AVE STE 105
NATIONAL CITY, CA 91950
 (619) 255-2950
 Spanish, Tagalog
Effective as of 01-SEP-22




CEVALLOS, JAMES, MD^{M††}

Provider ID: 100079582009
 1136 D AVE
NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
Effective as of 01-APR-23




CEVALLOS, JAMES, MD^{M††}

Provider ID: 100079582010
 1136 D AVE
NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
Effective as of 01-JUN-24




CEVALLOS, JAMES, MD^{M††}

Provider ID: 100079582004
 1136 D AVE
NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
Effective as of 01-MAR-16




KAKAIYA, ROSHNI, DO^F

Provider ID: 100395889005
 2835 HIGHLAND AVE
NATIONAL CITY, CA 91950
 (844) 200-2426
 Spanish
Effective as of 01-FEB-24

LAW, KAREN, MD^F

Provider ID: 100334676007
 2400 E 8TH ST
NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
Effective as of 01-JUN-24

MATTHEWS, MERRITT, MD^{M†}

Provider ID: 100021162012
 610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 (619) 527-7700
 Spanish, Tagalog

C1. 网络提供者名单 主治医生

Effective as of 01-NOV-20

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216026

340 E 8TH ST STE 330
NATIONAL CITY, CA 91950

(619) 662-4100

Spanish

Effective as of 01-MAY-23

MEDINA, ALEXANDER, MD^{M†}

Provider ID: 100325216002

330 E 8TH ST
NATIONAL CITY, CA 91950

(619) 662-4100

Spanish

Effective as of 01-FEB-18

MEDINA, ALEXANDER, MD^{M†}

Provider ID: 100325216016

330 E 8TH ST
NATIONAL CITY, CA 91950

(619) 662-4100

Spanish

Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216019

333 E 8TH ST
NATIONAL CITY, CA 91950

(619) 662-4100

Spanish

Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216022

336 E 8TH ST
NATIONAL CITY, CA 91950

(619) 662-4100

Spanish

Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216023

337 E 8TH ST

NATIONAL CITY, CA 91950

(619) 662-4100

Spanish

Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216024

338 E 8TH ST
NATIONAL CITY, CA 91950

(619) 662-4100

Spanish

Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216025

339 E 8TH ST
NATIONAL CITY, CA 91950

(619) 662-4100

Spanish

Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216017

331 E 8TH ST
NATIONAL CITY, CA 91950

(619) 662-4100

Spanish

Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216018

332 E 8TH ST
NATIONAL CITY, CA 91950

(619) 662-4100

Spanish

Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216020

334 E 8TH ST
NATIONAL CITY, CA 91950

(619) 662-4100

Spanish

Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216021

335 E 8TH ST
NATIONAL CITY, CA 91950

(619) 662-4100

Spanish

Effective as of 01-APR-23

NAVARRO, VANESSAMARIA, MD^{F†}

Provider ID: 100173914003

2400 E 8TH ST
NATIONAL CITY, CA 91950

(619) 662-4100

Filipino, Spanish, Tagalog

Effective as of 01-JAN-14

NOLASCO, JOANNA, MD^F

Provider ID: 100334048006

1136 D AVE
NATIONAL CITY, CA 91950

(619) 662-4100

Spanish

Effective as of 01-JUL-24

NOVENCIDO, JOSEPH, DO^{M†}

Provider ID: 100244053019

610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

(619) 527-7700

Spanish

Effective as of 01-APR-23

NOVENCIDO, JOSEPH, DO^{M†}

Provider ID: 100244053014

610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

(619) 527-7700

Spanish


Effective as of 01-SEP-20



OCEGUEDA, JOSHUA, MD^{M†}



Provider ID: 100377020002



1136 D AVE
NATIONAL CITY, CA 91950




C1. 网络提供者名单 主治医生



 (619) 662-4100
Effective as of 01-SEP-21



OCEGUEDA, JOSHUA, MD^{M†}
Provider ID: 100377020006
 1136 D AVE
NATIONAL CITY, CA 91950
 (619) 662-4100
Effective as of 01-JUL-24


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




PATEL, PAAVAN, DO^M
Provider ID: 100413256010
 610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 (619) 527-7700
Effective as of 01-DEC-23




ROBERTS, POMAI, MD^{F†}
Provider ID: 100323487002
 1136 D AVE
NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
Effective as of 01-SEP-17




SAZEGAR, PAYAM, MD^{M†}
Provider ID: 100187888015
 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 (619) 434-7308
Teleservice
Effective as of 01-JUL-21




STILLWELL, CARLA, MD^F
Provider ID: 100147691023
 22 W 35TH ST STE 101
NATIONAL CITY, CA 91950
 (619) 427-3361

 Polish, Portuguese, Spanish
Effective as of 01-MAY-24



STILLWELL, CARLA, MD^F
Provider ID: 100147691025
 22 W 35TH ST STE 101
NATIONAL CITY, CA 91950
 (619) 427-3361
 Polish, Portuguese, Spanish
Effective as of 01-JUN-24



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



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



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



FQHC



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

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

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

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

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

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

C1. 网络提供者名单 主治医生

SAN YSIDRO HEALTH SOUTH BAY,

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

GENERAL PRACTICE

MEDINA, NATALIE, MD^F

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

MEDINA, NATALIE, MD^F

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

MEDINA, NATALIE, MD^F

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

INTERNAL MEDICINE

BELLA, ARCHIE, MD^M

Provider ID: 100272915017
1428 HIGHLAND AVE
NATIONAL CITY, CA 91950
(844) 200-2426
Tagalog
Effective as of 01-AUG-24

BRAVERMAN, IRA, MD^{M†}

Provider ID: 100012010020
610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
(619) 267-8181
Spanish, Tagalog
Effective as of 01-NOV-20

BRAVERMAN, IRA, MD^{M†}

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

BRAVERMAN, IRA, MD^{M†}

Provider ID: 100012010021
610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
(619) 267-8181
Spanish, Tagalog
Effective as of 01-APR-21

CANTU-REYNA, GUILLERMO, MD^{M†}

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

COMUNALE, RODERICK, MD^{M†}

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

DELA PAZ, LENNIE, MD^{M†}

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

DELAROSA, RENATO, MD^M

Provider ID: 100110262021
655 EUCLID AVE STE 209
NATIONAL CITY, CA 91950
(619) 470-7000
Spanish, Tagalog
Effective as of 01-DEC-21

EL-GHONEIMY, AHMED, MD^{M†}

Provider ID: 100103500014
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
(619) 434-7308
Arabic, French, Italian
Teleservice
Effective as of 01-AUG-22

HEKMAT, RAZI, MD^{M†}

Provider ID: 100081732021
610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
(619) 267-8181
Spanish
Effective as of 01-NOV-20


HEKMAT, RAZI, MD^{M†}

Provider ID: 100081732019
610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
(619) 267-8181
Spanish
Effective as of 01-AUG-20




HEKMAT, RAZI, MD^{M†}

Provider ID: 100081732022
610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
(619) 267-8181




C1. 网络提供者名单 主治医生

 Spanish
Effective as of 01-APR-21




MEDINA, NATALIE, MD^F
Provider ID: 100254911013

 502 EUCLID AVE STE 306
NATIONAL CITY, CA 91950
 (619) 267-1168
 Spanish
Effective as of 01-JAN-21




PRATHIPATI, LAKSHMI, MD^{F†}
Provider ID: 100041945034

 502 EUCLID AVE STE 2013
NATIONAL CITY, CA 91950
 (619) 267-0553
 Spanish, Telugu, Tagalog
Effective as of 01-SEP-22




PRATHIPATI, LAKSHMI, MD^{F†}
Provider ID: 100041945033

 502 EUCLID AVE STE 2013
NATIONAL CITY, CA 91950
 (619) 267-0553
 Spanish, Telugu, Tagalog
Effective as of 01-AUG-22




TIANGCO, IRINEO, MD^{M†}
Provider ID: 100107246016

 2340 E 8TH ST STE J
NATIONAL CITY, CA 91950
 (619) 479-0320
 Spanish, Tagalog
Effective as of 01-JAN-21




TIANGCO, IRINEO, MD^{M†}
Provider ID: 100107246018

 2340 E 8TH ST STE J
NATIONAL CITY, CA 91950
 (619) 479-0320
 Spanish, Tagalog
Effective as of 01-JAN-21




TIANGCO, IRINEO, MD^{M†}
Provider ID: 100107246005

 2340 E 8TH ST STE J
NATIONAL CITY, CA 91950
 (619) 479-0320
 Spanish, Tagalog
Effective as of 01-JAN-14

TIANGCO, IRINEO, MD^{M†}
Provider ID: 100107246017




 2340 E 8TH ST STE J
NATIONAL CITY, CA 91950
 (619) 479-0320
 Spanish, Tagalog
Effective as of 01-SEP-20

TIANGCO, IRINEO, MD^{M†}
Provider ID: 100107246019




 2340 E 8TH ST STE J
NATIONAL CITY, CA 91950
 (619) 479-0320
 Spanish, Tagalog
Effective as of 01-NOV-20

FAMILY PRACTICE

MANGOBA, LUTHER, MD^{M†}
Provider ID: 100107397012




 400 NEWPORT CENTER
DR STE 303
NEWPORT BEACH, CA
92660
 (949) 644-1300
 Spanish
Effective as of 01-APR-22

MANGOBA, LUTHER, MD^{M†}
Provider ID: 100107397011



 400 NEWPORT CENTER
DR STE 303
NEWPORT BEACH, CA
92660
 (949) 644-1300
 Spanish
Effective as of 01-APR-22

INTERNAL MEDICINE

SPRINGSTUBB, ADITI, MD^{F†}
Provider ID: 100201144014




 360 SAN MIGUEL DR STE
300
NEWPORT BEACH, CA
92660
 (949) 557-0830
 Hindi, Spanish
Effective as of 01-OCT-21

SYED, SAMEENA, DO^F
Provider ID: 100380768002




 360 SAN MIGUEL DR STE
300
NEWPORT BEACH, CA
92660
 (949) 557-0830
Effective as of 01-DEC-21

FAMILY PRACTICE




BANIADAM, BEHZAD, MD^M
Provider ID: 100069979008

 3231 WARING CT STE L
OCEANSIDE, CA 92056
 (760) 630-6300
 Spanish
Effective as of 01-MAR-21

**ESPINOSA-SILVA, YAMINAH,
DO^{F*}**

Provider ID: 100358800017
 517 N HORNE ST
OCEANSIDE, CA 92054
 (760) 631-5000
 Spanish
Effective as of 01-JAN-24

**ESPINOSA-SILVA, YAMINAH,
DO^{F*}**

Provider ID: 100358800018
 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 (760) 631-5000
 Spanish

C1. 网络提供者名单 主治医生

Effective as of 01-JAN-24

ESPINOSA-SILVA, YAMINAH, DO^{F*}

Provider ID: 100358800016

4700 N RIVER RD
OCEANSIDE, CA 92057

(760) 631-5000

Spanish

Effective as of 01-JAN-24

GONZALES, MICHELLE, MD^F

Provider ID: 100063095006

3601 VISTA WAY
OCEANSIDE, CA 92056

(760) 639-1204

Spanish

Teleservice

Effective as of 01-SEP-21

KURUKULASURIYA, DAYANTHITHI, DO^F

Provider ID: 100326148005

605 CROUCH ST
OCEANSIDE, CA 92054

(760) 736-6767

Effective as of 01-FEB-23

PONSFORD, DIANA, DO^F

Provider ID: 100350934011

517 N HORNE ST
OCEANSIDE, CA 92054

(760) 631-5000

Effective as of 01-JAN-24

PONSFORD, DIANA, DO^F

Provider ID: 100350934010

517 N HORNE ST
OCEANSIDE, CA 92054

(760) 631-5000

Effective as of 01-MAY-22

SAFI, ROOZCHEHR, MD^{F†}

Provider ID: 100201387012

605 CROUCH ST

OCEANSIDE, CA 92054

(760) 736-6767

Farsi

Effective as of 01-APR-14

SALAMANCA, OMAR, MD^M

Provider ID: 100333689015

605 CROUCH ST
OCEANSIDE, CA 92054

(760) 736-6767

Spanish

Effective as of 01-SEP-24

FQHC

TRUECARE,

Provider ID: PG0092588008

2210 MESA DR STE 300
OCEANSIDE, CA 92054

(760) 736-6767

Teleservice

Effective as of 01-JUL-22

TRUECARE VISTA WAY HEALTH CENTER STE G,

Provider ID: PG0130229002

3998 VISTA WAY STE G
OCEANSIDE, CA 92056

(760) 736-6767

Effective as of 01-JUN-24

VISTA COMMUNITY CLINIC, †

Provider ID: PG0072409007

4700 N RIVER RD
OCEANSIDE, CA 92057

(760) 631-5000

Teleservice

Effective as of 01-JUL-22

VISTA COMMUNITY CLINIC HORNE STREET,

Provider ID: PG0084639007

517 N HORNE ST
OCEANSIDE, CA 92054

(760) 631-5000

Teleservice

Effective as of 01-JUL-22

VISTA COMMUNITY CLINIC PIER VIEW WAY,

Provider ID: PG0084683007

818 PIER VIEW WAY
OCEANSIDE, CA 92054

(760) 631-5000

Teleservice

Effective as of 01-JUL-22

INTERNAL MEDICINE

ASPIRAS, JULIE, MD^{F*}

Provider ID: 100065479004

3998 VISTA WAY STE F
OCEANSIDE, CA 92056

(760) 630-4678

Effective as of 01-SEP-21

CHONG, ILSONG, MD^M

Provider ID: 100334344008

3998 VISTA WAY STE 204
OCEANSIDE, CA 92056

(760) 736-6767

Korean

Effective as of 01-JUN-24

CHONG, ILSONG, MD^M

Provider ID: 100334344009

3998 VISTA WAY STE 204
OCEANSIDE, CA 92056

(760) 736-6767

Korean

Effective as of 01-JUL-24

CURRAN, PERRIN, MD^M

Provider ID: 100083095002

3601 VISTA WAY STE 201
OCEANSIDE, CA 92056

(760) 639-1714

Effective as of 01-FEB-05

HEIFETZ, SUSAN, MD^F

C1. 网络提供者名单 主治医生

Provider ID: 100024397011

📍 3601 VISTA WAY STE 201
OCEANSIDE, CA 92056

☎ (760) 529-9514

Effective as of 01-SEP-21

LIZOTTE, PAUL, DO^{M†}

Provider ID: 100212648008

📍 115 N EL CAMINO REAL STE
A
OCEANSIDE, CA 92058

☎ (760) 330-5055

📺 Spanish

Effective as of 01-MAR-21

MACMURRAY, MICHAEL, MD^M

Provider ID: 100067535007

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054

☎ (760) 631-5000

📺 Spanish

Effective as of 01-MAR-20

MACMURRAY, MICHAEL, MD^M

Provider ID: 100067535003

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054

☎ (760) 631-5000

📺 Spanish

Effective as of 01-OCT-05

MACMURRAY, MICHAEL, MD^M

Provider ID: 100067535012

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054

☎ (760) 631-5000

📺 Spanish

Effective as of 01-JAN-24

SAMANI, PARGOL, MD^F

Provider ID: 100325205012

📍 3927 WARING RD STE C
OCEANSIDE, CA 92056

☎ (619) 703-7220

📺 Farsi, Persian

Teleservice

Effective as of 01-DEC-23

ZIMMERMANN, ANDRES, MD^M

Provider ID: 100015622004

📍 3601 VISTA WAY STE 201
OCEANSIDE, CA 92056

☎ (760) 639-1714

📺 Spanish

Effective as of 01-SEP-21

FAMILY PRACTICE

MCHENRY, KATHRYN, DO^F

Provider ID: 100320650015

📍 16650 HIGHWAY 76
PAUMA VALLEY, CA 92061

☎ (760) 742-9919

📺 Spanish

Effective as of 01-FEB-24

INTERNAL MEDICINE

SANUCCI, SHAUN, DO^F

Provider ID: 100352649064

📍 524 W 4TH ST STE B
PERRIS, CA 92570

☎ (951) 355-0030

Effective as of 01-FEB-24

SANUCCI, SHAUN, DO^F

Provider ID: 100352649069

📍 524 W 4TH ST STE B
PERRIS, CA 92570

☎ (951) 355-0030

Effective as of 01-AUG-24

SANUCCI, SHAUN, DO^F

Provider ID: 100352649063

📍 524 W 4TH ST STE B
PERRIS, CA 92570

☎ (951) 355-0030

Effective as of 01-NOV-23

FAMILY PRACTICE

KAUR, JATINDER, MD^F

Provider ID: 100315025014

📍 13010 POWAY RD
POWAY, CA 92064

☎ (858) 218-3000

📺 Hindi, Punjabi, Urdu

Effective as of 01-JAN-24

KAUR, JATINDER, MD^F

Provider ID: 100315025013

📍 13010 POWAY RD
POWAY, CA 92064

☎ (858) 218-3000

📺 Hindi, Punjabi, Urdu

Effective as of 01-MAY-23

TANKSLEY, SIMON, MD^M

Provider ID: 100353447004

📍 15611 POMERADO RD FL 3
POWAY, CA 92064

☎ (858) 675-3210

📺 Spanish

Effective as of 01-JAN-24

FQHC

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY HEALTH CENTER,

Provider ID: PG0092632004

📍 13010 POWAY RD
POWAY, CA 92064

☎ (858) 218-3000

Effective as of 01-JUL-22

INTERNAL MEDICINE

RIVERA, MARCELO, MD^M

Provider ID: 100036662021

📍 15644 POMERADO RD STE
100

POWAY, CA 92064

☎ (858) 485-5111




📺 Spanish, Tagalog

Effective as of 01-SEP-23

C1. 网络提供者名单 主治医生




RIVERA, MARCELO, MD^M

Provider ID: 100036662020

 15644 POMERADO RD STE
100
POWAY, CA 92064
 (858) 485-5111
 Spanish, Tagalog
Effective as of 01-SEP-23




RIVERA, MARCELO, MD^M

Provider ID: 100036662022

 15644 POMERADO RD STE
100
POWAY, CA 92064
 (858) 485-5111
 Spanish, Tagalog
Effective as of 01-DEC-23




RIVERA, MARCELO, MD^{M†}

Provider ID: 100036662016

 15644 POMERADO RD STE
300
POWAY, CA 92064
 (858) 613-8743
 Spanish, Tagalog
Teleservice
Effective as of 01-JAN-21




RIVERA, MARCELO, MD^{M†}

Provider ID: 100036662015

 13525 MIDLAND RD STE F
POWAY, CA 92064
 (858) 486-9100
 Spanish, Tagalog
Effective as of 01-JAN-21

RIVERA, MARCELO, MD^{M†}



Provider ID: 100036662019

 13525 MIDLAND RD STE F
POWAY, CA 92064
 (858) 486-9100
 Spanish, Tagalog
Effective as of 01-SEP-23

FQHC

TRUECARE, †




Provider ID: PG0025086043

 220 ROTANZI ST
RAMONA, CA 92065
 (760) 736-6767
Teleservice
Effective as of 01-JUL-22

INTERNAL MEDICINE



HO, LYSA, DO^F

Provider ID: 100437431002

 220 ROTANZI ST
RAMONA, CA 92065
 (760) 736-6767
 Vietnamese
Effective as of 01-AUG-24

YUNG, DORIS, MD^{F†}

Provider ID: 100036513005

 220 ROTANZI ST
RAMONA, CA 92065
 (760) 736-6767
 Chinese, Mandarin, Spanish
Effective as of 01-DEC-18

FAMILY PRACTICE


BILAN, NATALIA, MD^F

Provider ID: 100112756005


 29809 SANTA MARGARITA
PKWY STE 300
RANCHO SANTA
MARGARITA, CA 92688
 (949) 709-5100
 Russian
Effective as of 01-JAN-18

CIANCIOLA, MARK, MD^{M††}

Provider ID: 100057057005

 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA

MARGARITA, CA 92688

 (949) 459-9968

Effective as of 01-MAY-12



GHAZI, FARANAK, MD^{F†}

Provider ID: 100332514003

 29873 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688
 (949) 709-0988
Effective as of 01-AUG-18




HAUSER, BRIAN, MD^M

Provider ID: 100262507010

 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688
 (949) 459-9968
Effective as of 01-JUL-24

KARIMABADI, MARJAN, MD^{F††}



Provider ID: 100196435002

 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688
 (949) 459-9968
 Farsi
Effective as of 01-OCT-13

INTERNAL MEDICINE

GORE, GWENDOLYN, MD^{F††}

Provider ID: 100020754005

 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688
 (949) 459-9968
Effective as of 01-MAY-12

KAMAREI, SHAPARAK, MD^{F†}




Provider ID: 100132319012

C1. 网络提供者名单

主治医生



 29873 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688
 (949) 709-0988
 Farsi, Faroese
Effective as of 01-JAN-18

TRAN, LILIAN, MD^{F†}




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

FAMILY PRACTICE



DESILVA, PETER, MD^M

Provider ID: 100046594003
 29809 SANTA MARGARITA
PKWY STE 300
RCHO STA MARG, CA
92688
 (949) 709-5100
Effective as of 01-JAN-18



DAVALOS, RICARDO, MD^M

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




RAMSEY, KAYLA, DO^F

Provider ID: 100365540002
 1031 AVENIDA PICO STE
203
SAN CLEMENTE, CA 92673
 (949) 557-0820
Effective as of 01-JAN-21




ROBERSON, ANDREA, DO^{F†}

Provider ID: 100091717003
 105 AVENIDA DE LA
ESTRELLA STE 1A
SAN CLEMENTE, CA 92672
 (949) 586-8000
Effective as of 01-JAN-18

SAFAVI, MAHSA, MD^{F†}




Provider ID: 100350049007
 724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
 (949) 493-6113
 Farsi, Persian
Effective as of 01-JAN-23

SHOKOUHI, SARA, MD^{F†}




Provider ID: 100111432006
 665 CAMINO DE LOS
MARES STE 207
SAN CLEMENTE, CA 92673
 (949) 661-4411
 Farsi, Persian
Effective as of 01-JAN-18

INTERNAL MEDICINE



CHANG, LAWRENCE, MD^M

Provider ID: 100045275002
 665 CAMINO LOS MARES
301
SAN CLEMENTE, CA 92673
 (949) 240-9664
 Chinese, Mandarin, Spanish
Effective as of 01-JAN-18




CLARK, LORI, MD^{F†}

Provider ID: 100054653008
 655 CAMINO DE LOS
MARES STE 122
SAN CLEMENTE, CA 92673
 (949) 588-7262
 Spanish
Effective as of 01-JUL-22



GARNER, KAREN, MD^{F†}

Provider ID: 100100519023
 831 VIA SUERTE STE 102
SAN CLEMENTE, CA 92673
 (949) 364-5600
Effective as of 01-NOV-17



NAJI, MAHTAB, MD^F

Provider ID: 100428926003
 638 CAMINO DE LOS
MARES STE D4
SAN CLEMENTE, CA 92673
 (949) 542-8865
 Farsi
Effective as of 01-SEP-24



ONYEKWULUJE, ANNE, MD^F

Provider ID: 100176684006
 638 CAMINO DE LOS
MARES STE D4
SAN CLEMENTE, CA 92673
 (949) 542-8865
Effective as of 01-APR-24



REXINGER, KENNETH, MD^{M†}

Provider ID: 100058286009
 831 VIA SUERTE STE 102
SAN CLEMENTE, CA 92673
 (949) 364-5600
Effective as of 01-JAN-15

UNDERWOOD JOLLY, AMY, MD^{F†}

Provider ID: 100086849011
 831 VIA SUERTE STE 102
SAN CLEMENTE, CA 92673
 (949) 364-5600
Effective as of 01-JAN-22

WOOD, YELENA, MD^{F†}

Provider ID: 100018427006
 724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
 (949) 493-6113
Effective as of 01-JAN-18

C1. 网络提供者名单 主治医生

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL, MD^{M†}

Provider ID: 100360099016
📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
☎ (619) 662-4100
📱 Spanish
Effective as of 01-MAY-22

ALVAREZ-ESTRADA, MIGUEL, MD^{M†}

Provider ID: 100360099012
📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
☎ (619) 662-4100
📱 Spanish
Effective as of 01-JAN-21

BAIK, JESSICA, MD^F

Provider ID: 100427411002
📍 7825 ENGINEER RD STE 101
SAN DIEGO, CA 92111
☎ (858) 277-7111
📱 Korean, Spanish
Teleservice
Effective as of 01-APR-24

BAIK, JESSICA, MD^F

Provider ID: 100427411004
📍 7825 ENGINEER RD
SAN DIEGO, CA 92111
☎ (858) 277-7111
📱 Korean, Spanish
Effective as of 01-APR-24

BOYD, JAMES, MD^M

Provider ID: 100053030010
📍 9333 GENESEE AVE STE
250
SAN DIEGO, CA 92121
☎ (619) 810-7027
📱 Spanish

Teleservice

Effective as of 01-DEC-23

CUTLER, MICHAEL, MD^M

Provider ID: 100225708017
📍 8996 MIRAMAR RD STE
308
SAN DIEGO, CA 92126
☎ (858) 335-2670
📱 Russian, Spanish
Effective as of 01-OCT-23

CUTLER, MICHAEL, MD^M

Provider ID: 100225708021
📍 3802 NATIONAL AVE
SAN DIEGO, CA 92113
☎ (619) 264-2591
📱 Russian, Spanish
Effective as of 01-JAN-24

CUTLER, MICHAEL, MD^M

Provider ID: 100225708023
📍 3802 NATIONAL AVE
SAN DIEGO, CA 92113
☎ (619) 264-2591
📱 Russian, Spanish
Effective as of 01-APR-24

CUTLER, MICHAEL, MD^M

Provider ID: 100225708019
📍 3802 NATIONAL AVE
SAN DIEGO, CA 92113
☎ (619) 264-2591
📱 Russian, Spanish
Effective as of 01-DEC-23

DABO, TARAM, MD^{M†}

Provider ID: 100075261003
📍 1919 GRAND AVE STE 1E
SAN DIEGO, CA 92109
☎ (858) 270-5454
📱 Chinese, French, Mandarin
Effective as of 01-MAR-11

DABO, TARAM, MD^{M††}

Provider ID: 100075261004
📍 1919 GRAND AVE STE 1E
SAN DIEGO, CA 92109
☎ (858) 270-5454
📱 Chinese, French, Mandarin
Effective as of 01-JAN-14

DAO, VIET, MD^{M†}

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

DAO, VIET, MD^{M†}

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

DAO, VIET, MD^{M†}

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

DAO, VIET, MD^{M†}

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

DAO, VIET, MD^{M†}

Provider ID: 100105020064

C1. 网络提供者名单 主治医生

4616 EL CAJON BLVD STE 9
SAN DIEGO, CA 92115
(619) 583-0553
Mandarin, Spanish,
Vietnamese
Effective as of 01-AUG-20

DAO, VIET, MD^{M†}

Provider ID: 100105020068

4616 EL CAJON BLVD STE 9
SAN DIEGO, CA 92115
(619) 583-0553
Mandarin, Spanish,
Vietnamese
Effective as of 01-JAN-21

DAO, VIET, MD^{M†}

Provider ID: 100105020067

4616 EL CAJON BLVD STE 9
SAN DIEGO, CA 92115
(619) 583-0553
Mandarin, Spanish,
Vietnamese
Effective as of 01-JAN-21

DAO, VIET, MD^{M†}

Provider ID: 100105020035

4616 EL CAJON BLVD STE 9
SAN DIEGO, CA 92115
(619) 583-0553
Mandarin, Spanish,
Vietnamese
Effective as of 01-OCT-17

DAO, VIET, MD^{M†}

Provider ID: 100105020069

4616 EL CAJON BLVD STE 9
SAN DIEGO, CA 92115
(619) 583-0553
Mandarin, Spanish,
Vietnamese
Effective as of 01-NOV-20

DAVIS, DEIRDRE, MD^{F†}

Provider ID: 100375869006

950 S EUCLID AVE
SAN DIEGO, CA 92114
(619) 662-4100
Spanish
Teleservice
Effective as of 01-JUN-24

DAVIS, DEIRDRE, MD^{F†}

Provider ID: 100375869002

950 S EUCLID AVE
SAN DIEGO, CA 92114
(619) 662-4100
Spanish
Teleservice
Effective as of 01-AUG-21

DE ROTH, GEORGINE, MD^F

Provider ID: 100409222005

3750 CONVOY ST STE 118
SAN DIEGO, CA 92111
(760) 741-1224
French, Hungarian, Spanish
Effective as of 01-AUG-23

DENYSIAK, JACQUELINE, MD^{F†}

Provider ID: 100363725002

3969 4TH AVE STE 203
SAN DIEGO, CA 92103
(619) 294-6500
Teleservice
Effective as of 01-DEC-20

DENYSIAK, JACQUELINE, MD^{F†}

Provider ID: 100363725005

3969 4TH AVE STE 203
SAN DIEGO, CA 92103
(619) 294-6500
Teleservice
Effective as of 01-JAN-21

DENYSIAK, JACQUELINE, MD^{F†}

Provider ID: 100363725007

3969 4TH AVE STE 203
SAN DIEGO, CA 92103

(619) 294-6500
Teleservice
Effective as of 01-NOV-21

DESHPANDE, KAVITA, MD^F

Provider ID: 100427408003

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
(619) 255-9155
French
Teleservice
Effective as of 01-APR-24

DESHPANDE, KAVITA, MD^F

Provider ID: 100427408004

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
(619) 269-1269
French
Teleservice
Effective as of 01-APR-24

DIEP, BRIAN, MD^{M†}

Provider ID: 100324529013

4551 EL CAJON BLVD
SAN DIEGO, CA 92115
(619) 280-7185
Vietnamese
Teleservice
Effective as of 01-OCT-22

DIEP, BRIAN, MD^{M†}

Provider ID: 100324529011


7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
(858) 277-5463
Vietnamese
Teleservice
Effective as of 01-JUN-22

FAMBRO, CYNTHIA, MD^{F†}

Provider ID: 100350838004

950 S EUCLID AVE
SAN DIEGO, CA 92114

C1. 网络提供者名单 主治医生

 (619) 662-4100


 Spanish

Effective as of 01-JAN-21

GERBATSCH-BORNEMISZA, ILDIKO, MD^F

Provider ID: 100325246016

 3490 PALM AVE
SAN DIEGO, CA 92154

 (619) 423-5616

 Spanish


Teleservice

Effective as of 01-JUL-23

GIL, GABRIEL, MD^{M†}

Provider ID: 100094547025

 909 CARDIFF ST
SAN DIEGO, CA 92114

 (619) 465-3121


 Spanish

Effective as of 01-JAN-21

GIL, GABRIEL, MD^{M†}

Provider ID: 100094547010

 903 CARDIFF ST
SAN DIEGO, CA 92114

 (619) 465-3121


 Spanish

Effective as of 01-JAN-18

GIL, GABRIEL, MD^{M†}

Provider ID: 100094547011

 903 CARDIFF ST
SAN DIEGO, CA 92114

 (619) 465-3121


 Spanish

Effective as of 01-JAN-18

GIL, GABRIEL, MD^{M†}

Provider ID: 100094547026

 903 CARDIFF ST
SAN DIEGO, CA 92114

 (619) 465-3121


 Spanish

Effective as of 01-NOV-20

GUTIERREZ, LORAIN, MD^{F†}

Provider ID: 100334279007

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 (619) 255-9155

 Spanish


Teleservice

Effective as of 01-AUG-21

HAMIDI, MAHSHID, MD^{F†}

Provider ID: 100110351013

 5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117

 (858) 565-6394


 Farsi, French, Persian

Effective as of 01-AUG-20

HAMIDI, MAHSHID, MD^{F†}

Provider ID: 100110351017

 5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117

 (858) 565-6394


 Farsi, French, Persian

Effective as of 01-APR-23

HAMIDI, MAHSHID, MD^{F†}

Provider ID: 100110351005

 5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117


 (858) 565-6394


 Farsi, French, Persian

Effective as of 01-APR-18

HAMIDI, MAHSHID, MD^{F†}

Provider ID: 100110351015

 5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117

 (858) 565-6394

 Farsi, French, Persian


Effective as of 01-JAN-21

HAMIDI, MAHSHID, MD^{F†}

Provider ID: 100110351016

 5222 BALBOA AVE STE 31

SAN DIEGO, CA 92117

 (858) 565-6394


 Farsi, French, Persian

Effective as of 01-FEB-22

HEIMLER, GRAHAM, MD^M

Provider ID: 100395560005

 9333 GENESEE AVE
SAN DIEGO, CA 92121


 (800) 926-8273

Effective as of 01-JUL-23

HEINRICI, ALEKA, MD^F

Provider ID: 100244401008

 286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

 (619) 662-4100

 Spanish

Teleservice


Effective as of 01-APR-23

HENRY, REBECCA, MD^F

Provider ID: 100418054002

 6386 ALVARADO CT STE
101

SAN DIEGO, CA 92120

 (858) 554-1212


Effective as of 01-NOV-23

HENRY, REBECCA, MD^F

Provider ID: 100418054007

 6386 ALVARADO CT STE
101

SAN DIEGO, CA 92120

 (858) 554-1212


Effective as of 01-MAY-24

HENRY, REBECCA, MD^F

Provider ID: 100418054008

 6386 ALVARADO CT STE
101

SAN DIEGO, CA 92120

 (858) 554-1212

Effective as of 01-MAY-24

C1. 网络提供者名单 主治医生

HENRY, REBECCA, MD^F

Provider ID: 100418054006

📍 6386 ALVARADO CT STE
101

SAN DIEGO, CA 92120

☎ (858) 554-1212

Effective as of 01-APR-24

HOUGHTON, ROBERT, MD^{M†}

Provider ID: 100034977002

📍 1855 1ST AVE STE 200B
SAN DIEGO, CA 92101

☎ (619) 233-4044

📱 German, Spanish

Effective as of 01-FEB-07

JENKIN, FREDERICK, DO^{M†}

Provider ID: 100038612009

📍 3562 GOVERNOR DR STE 1
SAN DIEGO, CA 92122

☎ (858) 774-5157

Effective as of 01-MAY-21

JOHN, TANNER, MD^M

Provider ID: 100415495003

📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

☎ (619) 662-4100

Teleservice

Effective as of 01-OCT-23

KIDDER, BRENDAN, MD^{M†}

Provider ID: 100334556005

📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

☎ (619) 662-4100

📱 Spanish

Effective as of 01-MAY-22

LEBANO, RICHARD, MD^M

Provider ID: 100340129005

📍 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

☎ (844) 200-2426

📱 Spanish

Effective as of 01-OCT-23

LIU, CHIA-LIN, DO^M

Provider ID: 100102354004

📍 2185 GARNET AVE
SAN DIEGO, CA 92109

☎ (858) 270-9270

📱 Chinese, Mandarin, Spanish

Effective as of 01-APR-23

LIU, CHIA-LIN, DO^M

Provider ID: 100102354002

📍 2185 GARNET AVE
SAN DIEGO, CA 92109

☎ (858) 270-9270

📱 Chinese, Mandarin, Spanish

Effective as of 01-DEC-03

LUAN, GORDON, MD^{M†}

Provider ID: 100012685018

📍 4320 GENESEE AVE STE
103

SAN DIEGO, CA 92117

☎ (858) 598-6789

📱 Chinese, Mandarin

Effective as of 01-NOV-23

LUAN, GORDON, MD^{M†}

Provider ID: 100012685016

📍 4320 GENESEE AVE STE
103

SAN DIEGO, CA 92117

☎ (858) 598-6789

📱 Chinese, Mandarin

Effective as of 01-JUN-22

MARQUEZ, LUIS, MD^{M†}

Provider ID: 100078829006

📍 4060 4TH AVE STE 540
SAN DIEGO, CA 92103

☎ (619) 236-8796

📱 Italian, Spanish

Effective as of 01-NOV-21

MATSON, GARY, DO^{M†}

Provider ID: 100051901002

📍 4501 MISSION BAY DR STE
3E

SAN DIEGO, CA 92109

☎ (858) 270-4343

📱 French, German, Spanish

Teleservice

Effective as of 01-FEB-07

MONTENEGRO, CLAUDIA, DO^F

Provider ID: 100427447003

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

☎ (619) 255-9155

📱 Spanish

Teleservice

Effective as of 01-APR-24

MONTENEGRO, CLAUDIA, DO^F

Provider ID: 100427447004

📍 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

☎ (619) 269-1269

📱 Spanish

Teleservice

Effective as of 01-APR-24

MORALES, ALEJANDRA, MD^{F†}

Provider ID: 100363732003

📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

☎ (619) 662-4100

Effective as of 01-JAN-21

MORALES, ALEJANDRA, MD^{F†}

Provider ID: 100363732006

📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

☎ (619) 662-4100




Effective as of 01-MAY-22

NGUYEN, LINHKIEU, MD^{F†}




Provider ID: 100073181012

C1. 网络提供者名单




主治医生

 3575 EUCLID AVE STE 100
SAN DIEGO, CA 92105
 (619) 284-1400
 Chinese, Spanish, Tagalog
Teleservice
Effective as of 01-JAN-21




NGUYEN, LINHKIEU, MD^{Ft}

Provider ID: 100073181014
 6905 LINDA VISTA RD
SAN DIEGO, CA 92111
 (619) 284-1400
 Chinese, Spanish, Tagalog
Effective as of 01-FEB-22




RECALDE, FRANCISCO, MD^{Mt}

Provider ID: 100015266018
 3811 EL CAJON BLVD
SAN DIEGO, CA 92105
 (619) 284-5622
 Spanish
Effective as of 01-JAN-21



RECALDE, FRANCISCO, MD^{Mt}

Provider ID: 100015266003
 3811 EL CAJON BLVD
SAN DIEGO, CA 92105
 (619) 284-5622
 Spanish
Effective as of 01-SEP-09




RODRIGUEZ, SEAN, MD^M

Provider ID: 100197884009
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 (619) 662-4100
 Spanish
Effective as of 01-MAR-21




ROSADO, IVAN, MD^M

Provider ID: 100365788012
 316 25TH ST
SAN DIEGO, CA 92102
 (619) 662-4100
Effective as of 01-JUL-24



RYAN, DAVID, MD^M

Provider ID: 100078982005
 2931 JARVIS ST
SAN DIEGO, CA 92106
 (619) 222-2355
 Spanish
Effective as of 01-FEB-07



SALEH, ANDREW, MD^{Mt}

Provider ID: 100293587004
 1370 ROSECRANS ST STE A
SAN DIEGO, CA 92106
 (619) 223-2668
 Arabic, Spanish
Effective as of 01-DEC-23



SAZEGAR, PAYAM, MD^{Mt}

Provider ID: 100187888011
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 (619) 255-9155
Teleservice
Effective as of 01-JUL-21


SAZEGAR, PAYAM, MD^{Mt}


Provider ID: 100187888013
 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 (619) 269-1269
Teleservice
Effective as of 01-JUL-21

SCOTT, LAGINA, MD^F




Provider ID: 100363586003
 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
 (619) 662-4100
Teleservice
Effective as of 01-MAR-21

SCOTT, LAGINA, MD^F




Provider ID: 100363586007
 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

 (619) 662-4100
Teleservice
Effective as of 01-JUN-24




SHAMANI, AZAM, MD^{Ft}

Provider ID: 100132296015
 5555 RESERVOIR DR STE
312
SAN DIEGO, CA 92120
 (619) 639-7285
 Farsi, Persian, Spanish
Effective as of 01-APR-18



SHAMANI, AZAM, MD^{Ft}

Provider ID: 100132296021
 5555 RESERVOIR DR STE
312
SAN DIEGO, CA 92120
 (619) 639-7285
 Farsi, Persian, Spanish
Effective as of 01-JAN-21



SHAMANI, AZAM, MD^{Ft}

Provider ID: 100132296023
 5555 RESERVOIR DR STE
312
SAN DIEGO, CA 92120
 (619) 639-7285
 Farsi, Persian, Spanish
Effective as of 01-SEP-22


SHAMANI, AZAM, MD^{Ft}

Provider ID: 100132296022
 5555 RESERVOIR DR STE
312
SAN DIEGO, CA 92120
 (619) 639-7285
 Farsi, Persian, Spanish
Effective as of 01-SEP-21




SIVA, TENAYA, MD^M

Provider ID: 100418703006
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 (619) 662-4100




C1. 网络提供者名单 主治医生

 Spanish
Teleservice
Effective as of 01-SEP-24




SIVA, TENAYA, MD^M

Provider ID: 100418703003
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 (619) 662-4100
 Spanish
Teleservice
Effective as of 01-NOV-23




SNYDER, CHRISTOPHER, DO^{Mt}

Provider ID: 100024789053
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
 (619) 662-4100
 Spanish
Teleservice
Effective as of 01-MAR-22


SNYDER, CHRISTOPHER, DO^{Mt}



Provider ID: 100024789058
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
 (619) 662-4100
 Spanish
Teleservice
Effective as of 01-AUG-24

STONES, RACHEL, MD^F




Provider ID: 100387928007
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 (619) 255-9155
 Spanish
Teleservice
Effective as of 01-MAY-22

STONES, RACHEL, MD^F

Provider ID: 100387928008
 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 (619) 269-1269
 Spanish
Teleservice
Effective as of 01-MAY-22




SZMIDT, MARIA, MD^F

Provider ID: 100108398011
 12395 EL CAMINO REAL
STE 100
SAN DIEGO, CA 92130
 (858) 259-5655
 Polish, Russian, Spanish
Effective as of 01-JAN-21




SZMIDT, MARIA, MD^F

Provider ID: 100108398007
 12395 EL CAMINO REAL
STE 100
SAN DIEGO, CA 92130
 (858) 259-5655
 Polish, Russian, Spanish
Effective as of 01-SEP-15

TEGUH, COLLIN, DO^{Mt}



Provider ID: 100089123007
 2045 ADAMS AVE
SAN DIEGO, CA 92116
 (619) 281-8988
 German, Indonesian,
Malayalam
Teleservice
Effective as of 01-AUG-20

VAZQUEZ-BOJORQUEZ, ALEJANDRA, MD^F




Provider ID: 100391945010
 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
 (858) 554-1212
 Spanish
Effective as of 01-NOV-22

VILLA, MARIA, MD^{Ft}




Provider ID: 100111602005
 655 SATURN BLVD STE J

SAN DIEGO, CA 92154
 (619) 575-4442
 Spanish, Tagalog
Effective as of 01-FEB-18




VILLA, MARIA, MD^{Ft}

Provider ID: 100111602015
 655 SATURN BLVD STE J
SAN DIEGO, CA 92154
 (619) 575-4442
 Spanish, Tagalog
Effective as of 01-JAN-21




VILLA, MARIA, MD^{Ft}

Provider ID: 100111602017
 655 SATURN BLVD STE J
SAN DIEGO, CA 92154
 (619) 575-4442
 Spanish, Tagalog
Effective as of 01-JAN-21


VILLA, MARIA, MD^{Ft}

Provider ID: 100111602016
 655 SATURN BLVD STE J
SAN DIEGO, CA 92154
 (619) 575-4442
 Spanish, Tagalog
Effective as of 01-JAN-21

VO, PHULUONG, DO^F

Provider ID: 100415527003
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
 (619) 662-4100
 Spanish, Vietnamese
Teleservice
Effective as of 01-NOV-23

VO, PHULUONG, DO^F

Provider ID: 100415527006
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
 (619) 662-4100
 Spanish, Vietnamese
Teleservice

C1. 网络提供者名单 主治医生

Effective as of 01-JUN-24

VOURLITIS, MELISSA, DO^{F†}

Provider ID: 100090572016

📍 9800 GLEN CENTER DR
SAN DIEGO, CA 92131

☎ (858) 832-2500

Teleservice

Effective as of 01-NOV-23

WONG, CALVIN, MD^{M†}

Provider ID: 100095226007

📍 444 W C ST STE 185
SAN DIEGO, CA 92101

☎ (619) 232-6262

📱 Chinese, Spanish

Effective as of 01-JUN-11

YUEN, SELENE, MD^{F†}

Provider ID: 100246155015

📍 4320 GENESEE AVE STE
103
SAN DIEGO, CA 92117

☎ (858) 598-6789

📱 Chinese

Teleservice

Effective as of 01-JUN-22

YUEN, SELENE, MD^{F†}

Provider ID: 100246155013

📍 4320 GENESEE AVE STE
103
SAN DIEGO, CA 92117

☎ (858) 598-6789

📱 Chinese

Teleservice

Effective as of 01-APR-22

ZINK, IRENE, MD^{F††}

Provider ID: 100324255002

📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

☎ (619) 662-4100

📱 German

Teleservice

Effective as of 01-AUG-17

ZINK, IRENE, MD^{F††}

Provider ID: 100324255006

📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

☎ (619) 662-4100

📱 German

Teleservice

Effective as of 01-APR-23

FQHC

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC,

Provider ID: PG0025044041

📍 4725 MARKET ST
SAN DIEGO, CA 92102

☎ (619) 515-2560

Effective as of 01-JAN-21

DOWNTOWN FAMILY CTR AT CONNECTIONS, †

Provider ID: PG0084437004

📍 1250 6TH AVE STE 100
SAN DIEGO, CA 92101

☎ (619) 515-2430

Effective as of 01-JAN-21

FAMILY HEALTH CTR IBARRA, †

Provider ID: PG0084517004

📍 4874 POLK AVE
SAN DIEGO, CA 92105

☎ (619) 515-2426

Effective as of 01-JAN-21

FAMILY HEALTH CTR OF SD- ELM ST, †

Provider ID: PG0083911003

📍 140 ELM ST
SAN DIEGO, CA 92101

☎ (619) 515-2520

Effective as of 01-JAN-21

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,

Provider ID: PG0084522006

📍 2114 NATIONAL AVE
SAN DIEGO, CA 92113

☎ (619) 515-2406

Effective as of 01-JAN-21

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,

Provider ID: PG0084522003

📍 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

☎ (619) 515-2454

Effective as of 01-JAN-21

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL,

Provider ID: PG0083950003

📍 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113

☎ (619) 515-2422

Effective as of 01-JAN-21

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE,

Provider ID: PG0085338003

📍 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

☎ (619) 515-2525

Effective as of 01-JAN-21

FAMILY HLTH CTR SAN DIEGO-BEACH AREA,

Provider ID: PG0083156003

📍 3705 MISSION BLVD
SAN DIEGO, CA 92109



☎ (619) 515-2444

Effective as of 01-JAN-21



FAMILY HLTH CTR SD HILLCREST, †

Provider ID: PG0084516014



C1. 网络提供者名单 主治医生

 4094 4TH AVE
SAN DIEGO, CA 92103
 (619) 515-2545
Effective as of 01-JAN-21



KING CHAVEZ HEALTH CENTER, †

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



LA MAESTRA FAMILY CLINIC INC, †

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

LINDA VISTA HEALTH CARE CTR,


Provider ID: PG0024858005
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 (858) 279-0925
Teleservice
Effective as of 01-JUL-22

LOGAN HEIGHTS FAMILY HEALTH CENTER,



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

LOGAN HEIGHTS FAMILY HEALTH CENTER,



Provider ID: PG0025044044
 2204 NATIONAL AVE

SAN DIEGO, CA 92113
 (619) 515-2355
Effective as of 01-JAN-21



MID-CITY COMMUNITY CLINIC, †

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



MID-CITY COMMUNITY CLINIC,

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



NESTOR COMMUNITY HEALTH CENTER,

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

NORTH PARK FAMILY HEALTH CENTERS,



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

NORTH PARK FAMILY HEALTH CENTERS,



Provider ID: PG0084186003
 3514 30TH ST
SAN DIEGO, CA 92104
 (619) 515-2424

Effective as of 01-JAN-21



OPERATION SAMAHAN - MIRA MESA, †

Provider ID: PG0083606005
 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
 (844) 200-2426
Teleservice
Effective as of 01-JAN-21



OPERATION SAMAHAN - MIRA MESA,

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

OPERATION SAMAHAN RANCHO PENASQUITOS,

Provider ID: PG0083903005
 9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129
 (844) 200-2426
Effective as of 01-JAN-21

SAN DIEGO AMERICAN INDIAN HEALTH CENTER,

Provider ID: PG0025869017
 2630 1ST AVE
SAN DIEGO, CA 92103
 (619) 234-2158
Teleservice
Effective as of 01-JUL-22
Indian Health Services: Y

SAN DIEGO FAMILY CARE,

Provider ID: PG0092672004
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 (858) 810-8700

C1. 网络提供者名单 主治医生

Teleservice

Effective as of 01-JUL-22

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE,

Provider ID: PG0094135003

316 25TH ST
SAN DIEGO, CA 92102

(619) 238-5551

Effective as of 01-JAN-21

SAN YSIDRO HEALTH CHC - OCEAN VIEW, †

Provider ID: PG0047560013

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

(619) 662-4100

Teleservice

Effective as of 01-JAN-21

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED,

Provider ID: PG0094138003

4690 EL CAJON BLVD
SAN DIEGO, CA 92115

(619) 662-4100

Teleservice

Effective as of 01-JAN-21

SAN YSIDRO HEALTH PRECISION PARK,

Provider ID: PG0128177002

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

(619) 662-4100

Effective as of 01-APR-24

SHERMAN HEIGHTS FAMILY HLTH CTRS INC,

Provider ID: PG0082766003

2391 ISLAND AVE
SAN DIEGO, CA 92102

(619) 515-2435

Effective as of 01-JAN-21

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER, *†

Provider ID: PG0086361006

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

(619) 233-8500

Teleservice

Effective as of 01-JUL-22

GENERAL PRACTICE

CAMPBELL, BRIANNA, MD^F

Provider ID: 100360159011

950 S EUCLID AVE
SAN DIEGO, CA 92114

(619) 662-4100

Spanish

Effective as of 01-AUG-24

DABROWSKI, THOMAS, MD^M

Provider ID: 100343180011

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

(858) 554-1212

Effective as of 01-APR-24

DABROWSKI, THOMAS, MD^M

Provider ID: 100343180012

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

(858) 554-1212

Effective as of 01-JUN-24

DABROWSKI, THOMAS, MD^M

Provider ID: 100343180013

11865 CARME MOUNTAIN
RD

STE 1104
SAN DIEGO, CA 92128

(858) 997-2583

Effective as of 01-JUN-24

DENYSIAK, JACQUELINE, MD^{F†}

Provider ID: 100363725006

3969 4TH AVE STE 203
SAN DIEGO, CA 92103

(619) 294-6500

Teleservice

Effective as of 01-JAN-21

GUEFEN, URI, MD^M

Provider ID: 100072802030

555 W C ST STE 102
SAN DIEGO, CA 92101

(858) 333-4977

Spanish

Effective as of 01-DEC-23

JEAN-MURAT, CAROLLE, MD^F

Provider ID: 100333052014

4276 54TH PL STE C
SAN DIEGO, CA 92115

(619) 501-5511

French, Spanish, Haitian
Creole

Effective as of 01-JAN-24

KIDOKORO, YASUKO, MD^{F†}

Provider ID: 100075657010

5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117

(858) 277-9669

Japanese

Teleservice

Effective as of 01-JUN-20

KIDOKORO, YASUKO, MD^{F†}

Provider ID: 100075657018

5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117

(858) 277-9669

Japanese

Teleservice

Effective as of 01-MAY-22

KIDOKORO, YASUKO, MD^{F†}

Provider ID: 100075657015

C1. 网络提供者名单 主治医生

5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117
(858) 277-9669
Japanese
Teleservice
Effective as of 01-JAN-21

MIRKARIMI, MORTEZA, MD^{Mt}

Provider ID: 100084653010
3863 CLAIREMONT DR
SAN DIEGO, CA 92117
(858) 483-5570
Farsi, Persian, Spanish
Effective as of 01-JAN-21

MIRKARIMI, MORTEZA, MD^{Mt}

Provider ID: 100084653003
3863 CLAIREMONT DR
SAN DIEGO, CA 92117
(858) 483-5570
Farsi, Persian, Spanish
Effective as of 01-DEC-12

MIRKARIMI, MORTEZA, MD^{Mt}

Provider ID: 100084653009
3863 CLAIREMONT DR
SAN DIEGO, CA 92117
(858) 483-5570
Farsi, Persian, Spanish
Effective as of 01-AUG-20

RECALDE, FRANCISCO, MD^{Mt}

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

RECALDE, FRANCISCO, MD^{Mt}

Provider ID: 100015266020
3811 EL CAJON BLVD
SAN DIEGO, CA 92105
(619) 284-5622
Spanish

Effective as of 01-JAN-21

RECALDE, FRANCISCO, MD^{Mt}

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

RECALDE, FRANCISCO, MD^{Mt}

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

INTERNAL MEDICINE

AL-SALEH, YADANI, MD^F

Provider ID: 100358544022
4275 MISSION BAY DR STE
104
SAN DIEGO, CA 92109
(858) 779-0559
Spanish
Effective as of 01-AUG-24

AL-SALEH, YADANI, MD^{Ft}

Provider ID: 100358544012
3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
(858) 799-0855
Spanish
Effective as of 01-DEC-22

AL-SALEH, YADANI, MD^{Ft}

Provider ID: 100358544020
3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
(858) 799-0855
Spanish

Effective as of 01-FEB-24

BELLA, ARCHIE, MD^M

Provider ID: 100272915018
10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
(844) 200-2426
Tagalog
Effective as of 01-AUG-24

BELLA, ARCHIE, MD^M

Provider ID: 100272915019
9995 CARMEL MOUNTAIN
RD STE 10-11B
SAN DIEGO, CA 92129
(844) 200-2426
Tagalog
Effective as of 01-AUG-24

BUTLER, LISA, MD^{Ft}

Provider ID: 100068570008
3260 3RD AVE
SAN DIEGO, CA 92103
(619) 297-3737
Hindi, Italian, Spanish
Effective as of 01-JUN-20

CARAMBAS, CLARITA, MD^{Ft}

Provider ID: 100070756004
9190 MIRA MESA BLVD
SAN DIEGO, CA 92126
(858) 689-1814
Tagalog
Effective as of 01-SEP-22

CSAPOCZI, PETER, MD^M

Provider ID: 100187372011
950 S EUCLID AVE
SAN DIEGO, CA 92114
(619) 662-4100
Hungarian, Spanish,
Ukrainian
Teleservice
Effective as of 01-JUN-24

C1. 网络提供者名单 主治医生

- DE CARVALHO, CARLOS, MD^{M†}**
 Provider ID: 100077227047
 2939 BEYER BLVD
 SAN DIEGO, CA 92154
 (619) 423-0343
 Portuguese, Spanish, Tagalog
 Teleservice
 Effective as of 01-JAN-21
- DE CARVALHO, CARLOS, MD^{M†}**
 Provider ID: 100077227054
 2939 BEYER BLVD
 SAN DIEGO, CA 92154
 (619) 423-0343
 Portuguese, Spanish, Tagalog
 Teleservice
 Effective as of 01-SEP-22
- DE CARVALHO, CARLOS, MD^{M†}**
 Provider ID: 100077227048
 2939 BEYER BLVD
 SAN DIEGO, CA 92154
 (619) 423-0343
 Portuguese, Spanish, Tagalog
 Teleservice
 Effective as of 01-SEP-20
- EL-GHONEIMY, AHMED, MD^{M†}**
 Provider ID: 100103500012
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 (619) 255-9155
 Arabic, French, Italian
 Teleservice
 Effective as of 01-AUG-22
- EL-GHONEIMY, AHMED, MD^{M†}**
 Provider ID: 100103500013
 4171 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 (619) 269-1269
- Arabic, French, Italian
 Teleservice
 Effective as of 01-AUG-22
- ELIAS, RAMIZ, MD^{M†}**
 Provider ID: 100105850039
 7695 CARDINAL CT STE
 370-375
 SAN DIEGO, CA 92123
 (858) 384-7072
 Spanish
 Effective as of 01-SEP-22
- ELIAS, RAMIZ, MD^{M†}**
 Provider ID: 100105850036
 7695 CARDINAL CT STE
 370-375
 SAN DIEGO, CA 92123
 (858) 384-7072
 Spanish
 Effective as of 01-MAR-18
- FABELLA, GABRIEL, MD^M**
 Provider ID: 100011192021
 10737 CAMINO RUIZ STE 115
 SAN DIEGO, CA 92126
 (858) 695-1262
 Japanese, Spanish, Tagalog
 Effective as of 01-MAY-23
- FABELLA, GABRIEL, MD^M**
 Provider ID: 100011192020
 10737 CAMINO RUIZ STE 115
 SAN DIEGO, CA 92126
 (858) 695-1262
 Japanese, Spanish, Tagalog
 Effective as of 01-JAN-21
- FABELLA, GABRIEL, MD^M**
 Provider ID: 100011192019
 10737 CAMINO RUIZ STE 115
 SAN DIEGO, CA 92126
 (858) 695-1262
 Japanese, Spanish, Tagalog
 Effective as of 01-JAN-21
- FABELLA, GABRIEL, MD^M**
 Provider ID: 100011192018
 10737 CAMINO RUIZ STE 115
 SAN DIEGO, CA 92126
 (858) 695-1262
 Japanese, Spanish, Tagalog
 Effective as of 01-JAN-21
- FABELLA, GABRIEL, MD^M**
 Provider ID: 100011192003
 10737 CAMINO RUIZ STE 115
 SAN DIEGO, CA 92126
 (858) 695-1262
 Japanese, Spanish, Tagalog
 Effective as of 01-NOV-09
- FAKHRO, SAMEEH, MD^{M†}**
 Provider ID: 100379921006
 3490 PALM AVE
 SAN DIEGO, CA 92154
 (619) 423-5616
 Effective as of 01-APR-22
- FAKHRO, SAMEEH, MD^{M†}**
 Provider ID: 100379921011
 3490 PALM AVE
 SAN DIEGO, CA 92154
 (619) 423-5616
 Effective as of 01-JUN-23
- FAKHRO, SAMEEH, MD^{M†}**
 Provider ID: 100379921002
 3490 PALM AVE
 SAN DIEGO, CA 92154
 (619) 423-5616
 Effective as of 01-NOV-21
- FAKHRO, SAMEEH, MD^{M†}**
 Provider ID: 100379921004
 3490 PALM AVE
 SAN DIEGO, CA 92154
 (619) 423-5616
 Effective as of 01-DEC-21

C1. 网络提供者名单 主治医生

FRANK, STEWART, MD^{M††}

Provider ID: 100018840004

4060 4TH AVE STE 605
SAN DIEGO, CA 92103

(619) 298-1318

Spanish

Effective as of 01-FEB-07

GAVRILYUK, IGOR, MD^{M†}

Provider ID: 100107169005

4060 4TH AVE STE 100
SAN DIEGO, CA 92103

(619) 718-9444

Russian, Ukrainian

Effective as of 01-SEP-09

GREEN, BILLIE, MD^{F††}

Provider ID: 100023101004

1101 FELSPAR ST
SAN DIEGO, CA 92109

(858) 483-1720

French

Effective as of 01-AUG-05

GREEN, BILLIE, MD^{F††}

Provider ID: 100023101005

1101 FELSPAR ST
SAN DIEGO, CA 92109

(858) 483-1720

French

Effective as of 01-SEP-09

GUHAROY, ASIM, MD^{M†}

Provider ID: 100107045016

4540 KEARNY VILLA RD
STE 106
SAN DIEGO, CA 92123

(858) 430-6656

Bengali, Hindi, Malayalam

Effective as of 01-OCT-23

GUHAROY, ASIM, MD^{M†}

Provider ID: 100107045011

4540 KEARNY VILLA RD
STE 106

SAN DIEGO, CA 92123

(858) 430-6656

Bengali, Hindi, Malayalam

Effective as of 01-JAN-21

GUHAROY, ASIM, MD^{M†}

Provider ID: 100107045009

4540 KEARNY VILLA RD
STE 106

SAN DIEGO, CA 92123

(858) 430-6656

Bengali, Hindi, Malayalam

Effective as of 01-SEP-20

GUHAROY, ASIM, MD^{M†}

Provider ID: 100107045012

4540 KEARNY VILLA RD
STE 106

SAN DIEGO, CA 92123

(858) 430-6656

Bengali, Hindi, Malayalam

Effective as of 01-MAR-23

GUHAROY, ASIM, MD^{M†}

Provider ID: 100107045003

4540 KEARNY VILLA RD
STE 106

SAN DIEGO, CA 92123

(858) 430-6656

Bengali, Hindi, Malayalam

Effective as of 01-APR-16

GUHAROY, ASIM, MD^M

Provider ID: 100107045014

4075 54TH ST
SAN DIEGO, CA 92105

(858) 430-6656

Bengali, Hindi, Malayalam

Effective as of 01-APR-23

HENDRICKS, MARK, MD^{M†}

Provider ID: 100055830004

2525 CAMINO DEL RIO S
STE 165

SAN DIEGO, CA 92108

(619) 543-9655

Effective as of 01-AUG-22

HENRY, ANEEL, MD^M

Provider ID: 100418814002

6386 ALVARADO CT STE
101

SAN DIEGO, CA 92120

(858) 554-1212

Effective as of 01-DEC-23

HENRY, ANEEL, MD^M

Provider ID: 100418814003

6386 ALVARADO CT STE
101

SAN DIEGO, CA 92120

(858) 554-1212

Effective as of 01-APR-24

HENRY, ANEEL, MD^{M*}

Provider ID: 100418814004

6386 ALVARADO CT STE
101

SAN DIEGO, CA 92120

(858) 554-1212

Effective as of 01-APR-24

HINOJOSA-VALENCIA, ALEJANDRO, MD^M

Provider ID: 100108386020

2939 BEYER BLVD
SAN DIEGO, CA 92154

(619) 423-0343

Spanish

Effective as of 01-MAY-24

HUA, NATHAN, MD^M

Provider ID: 100408831002

7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111

(858) 277-5463

Vietnamese

Effective as of 01-JUN-23

HUYNH, ANDREW, MD^M

C1. 网络提供者名单 主治医生

Provider ID: 100427366002

📍 4551 EL CAJON BLVD
SAN DIEGO, CA 92115
☎ (619) 280-7185

Teleservice

Effective as of 01-APR-24

KHANNA, POORNIMA, MD^F

Provider ID: 100334522010

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
☎ (619) 255-9155

Effective as of 01-JAN-21

KHEHAR, BHUPINDER, MD^{M†}

Provider ID: 100110360008

📍 3260 3RD AVE
SAN DIEGO, CA 92103
☎ (619) 297-3737

📄 Hindi, Punjabi, Swahili

Effective as of 01-JAN-21

KINGSBURY, A GRANT, MD^{M†}

Provider ID: 100063083007

📍 4060 4TH AVE STE 102
SAN DIEGO, CA 92103
☎ (619) 298-2900

Effective as of 01-NOV-22

MAI, KENNY, DO^M

Provider ID: 100169616003

📍 8901 ACTIVITY RD STE 205
SAN DIEGO, CA 92126
☎ (858) 779-9919

📄 Vietnamese

Effective as of 01-MAY-24

MAI, KENNY, DO^M

Provider ID: 100169616004

📍 8901 ACTIVITY RD STE 205
SAN DIEGO, CA 92126
☎ (858) 779-9919

📄 Vietnamese

Effective as of 01-JUL-24

MOSSON, MARK, MD^{M†}

Provider ID: 100176768003

📍 4060 4TH AVE STE 505
SAN DIEGO, CA 92103
☎ (619) 298-1318

Effective as of 01-AUG-13

NAJAR, FAUZI, MD^M

Provider ID: 100390568007

📍 3490 PALM AVE
SAN DIEGO, CA 92154
☎ (619) 423-5616

📄 Arabic

Effective as of 01-OCT-23

NAJAR, FAUZI, MD^{M*}

Provider ID: 100390568005

📍 3490 PALM AVE
SAN DIEGO, CA 92154
☎ (619) 423-5616

📄 Arabic

Effective as of 01-JUN-23

NAJAR, FAUZI, MD^M

Provider ID: 100390568003

📍 3490 PALM AVE
SAN DIEGO, CA 92154
☎ (619) 423-5616

📄 Arabic

Effective as of 01-DEC-22

NAJAR, FAUZI, MD^M

Provider ID: 100390568002

📍 3490 PALM AVE
SAN DIEGO, CA 92154
☎ (619) 423-5616

📄 Arabic

Effective as of 01-AUG-22

NARAYANAN,

PRIYADHARSHINI, MD^F

Provider ID: 100355661006

📍 11865 CARMEL MOUNTAIN
RD STE 1104
SAN DIEGO, CA 92128

☎ (858) 554-1212

Teleservice

Effective as of 01-MAY-24

OLIVER, DEANNA, MD^{F†}

Provider ID: 100328564035

📍 995 GATEWAY CENTER
WAY

SAN DIEGO, CA 92102

☎ (619) 264-1935

📄 Spanish

Effective as of 01-SEP-22

QUINONEZ, JOSE, MD^M

Provider ID: 100085905004

📍 250 MARKET ST
SAN DIEGO, CA 92101

☎ (619) 239-9675

📄 Spanish

Effective as of 01-FEB-07

RAMINENI, NEELAKANTAN, MD^{M†}

Provider ID: 100051318002

📍 4537 COLLEGE AVE
SAN DIEGO, CA 92115

☎ (619) 265-0504

📄 Spanish, Telugu

Effective as of 01-FEB-07

RAMINENI, NEELAKANTAN, MD^{M†}

Provider ID: 100051318005

📍 4537 COLLEGE AVE
SAN DIEGO, CA 92115

☎ (619) 265-0504

📄 Spanish, Telugu

Effective as of 01-NOV-18

RIADH, MAYSAM, MD^F

Provider ID: 100413125002

📍 3260 3RD AVE
SAN DIEGO, CA 92103

☎ (619) 297-3737

📄 Arabic

C1. 网络提供者名单 主治医生

Effective as of 01-SEP-23

SHAJAN, JOSHAN, MD^M

Provider ID: 100422554002

3863 CLAIREMONT DR
SAN DIEGO, CA 92117

(858) 483-5570

Spanish

Effective as of 01-FEB-24

SHAMSINEJAD BABAKI, ARASH, MD^M

Provider ID: 100107114026

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

(619) 662-4100

Farsi

Effective as of 01-JUL-24

SHI, RONG, MD^{F†}

Provider ID: 100133432007

3260 3RD AVE
SAN DIEGO, CA 92103

(619) 297-3737

Mandarin

Effective as of 01-AUG-15

SPECKART, PAUL, MD^{M†}

Provider ID: 100053933006

3260 3RD AVE
SAN DIEGO, CA 92103

(619) 297-3737

Effective as of 01-FEB-07

SULIMAN, ASHRAF, MD^{M*}

Provider ID: 100439094002

3490 PALM AVE
SAN DIEGO, CA 92154

(619) 423-5616

Effective as of 01-OCT-24

SZMIDT, MARIA, MD^F

Provider ID: 100108398006

12395 EL CAMINO REAL
STE 100

SAN DIEGO, CA 92130

(858) 259-5655

Polish, Russian, Spanish

Effective as of 01-JUL-04

TESSIER, ADLA, MD^F

Provider ID: 100077390010

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

(619) 255-9155

Spanish

Effective as of 01-JUN-23

VASANI, DHWANISHIVA, MD^F

Provider ID: 100317624004

12843 EL CAMINO REAL
STE 203

SAN DIEGO, CA 92130

(858) 554-1212

Gujarati, Hindi, Spanish

Effective as of 01-MAY-24

VILLA, MARIA, MD^{F†}

Provider ID: 100111602014

655 SATURN BLVD STE J
SAN DIEGO, CA 92154

(619) 575-4442

Spanish, Tagalog

Effective as of 01-JAN-21

WAGNER, PAUL, MD^M

Provider ID: 100088692006

4060 4TH AVE STE 100
SAN DIEGO, CA 92103

(619) 718-9444

Spanish

Effective as of 01-JAN-08

WATTS, ELI, MD^{M†}

Provider ID: 100384223003

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

(619) 662-4100

Spanish

Effective as of 01-MAR-22

WILLGING, STEFAN, MD^{M†}

Provider ID: 100106507003

4060 4TH AVE STE 505
SAN DIEGO, CA 92103

(619) 298-1318

German

Effective as of 01-FEB-07

WILLIAMS, HOWARD, MD^{M†}

Provider ID: 100070298003

4060 4TH AVE STE 505
SAN DIEGO, CA 92103

(619) 298-1318

Spanish

Effective as of 01-FEB-07

WOODALL, GARY, MD^{M†}

Provider ID: 100096806003

2970 5TH AVE STE 140
SAN DIEGO, CA 92103

(619) 260-3456

Effective as of 01-FEB-07

FAMILY PRACTICE

ASHIZAWA, JAMES, MD^{M††}

Provider ID: 100056553008

31001 RANCHO VIEJO RD
STE 200

SAN JUAN CAPISTRANO,
CA 92675

(949) 661-9600

Japanese, Spanish

Effective as of 01-JUL-15

GIGER, ANTON, DO^{M†}

Provider ID: 100164128006

31001 RANCHO VIEJO RD
STE 200

SAN JUAN CAPISTRANO,
CA 92675

(949) 661-9600

Effective as of 01-OCT-15

GONZALEZ, DAVID, MD^{M†}

C1. 网络提供者名单 主治医生

Provider ID: 100200908009
31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
(949) 661-9600
Spanish
Effective as of 01-JUL-15

GREENSPAN, SCOTT, MD^M

Provider ID: 100067813008
31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
(949) 661-9600
Spanish
Effective as of 01-JUN-24

HONG, ANDREW, MD^{M†}

Provider ID: 100043550008
31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
(949) 661-9600
Effective as of 01-OCT-15

NAFICY, K, MD^{M†}

Provider ID: 100104435017
30448 RANCHO VIEJO RD
STE 150
SAN JUAN CAPISTRANO,
CA 92675
(949) 489-0773
Farsi, French, Spanish
Teleservice
Effective as of 01-MAY-21

NAFICY, K, MD^{M†}

Provider ID: 100104435016
30448 RANCHO VIEJO RD
STE 150
SAN JUAN CAPISTRANO,
CA 92675

(949) 489-0773
Farsi, French, Spanish
Teleservice
Effective as of 01-MAY-21

NAFICY, K, MD^{M†}

Provider ID: 100104435018
30448 RANCHO VIEJO RD
STE 150
SAN JUAN CAPISTRANO,
CA 92675
(949) 489-0773
Farsi, French, Spanish
Teleservice
Effective as of 01-JUL-21

PANDY, LIZANDER, DO^{M†}

Provider ID: 100113474013
31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
(949) 661-9600
Spanish
Effective as of 01-OCT-21

PANDY, LIZANDER, DO^{M†}

Provider ID: 100113474012
31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
(949) 661-9600
Spanish
Effective as of 01-OCT-21

SERNA, SANDY, MD^{F†}

Provider ID: 100393508002
31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
(949) 661-9600
Spanish
Effective as of 01-SEP-22

SHRESTHA, ALINA, MD^{F*}

Provider ID: 100436871002
31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
(949) 661-9600
Effective as of 01-NOV-24

TRINH, MIMI, MD^{F††}

Provider ID: 100105591008
31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
(949) 661-9600
Vietnamese
Effective as of 01-JUL-15

ZHENG, VINCENT, DO^{M†}

Provider ID: 100393531003
31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
(949) 661-9600
Effective as of 01-SEP-22

ZHENG, VINCENT, DO^{M†}

Provider ID: 100393531002
31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
(949) 661-9600
Effective as of 01-SEP-22

INTERNAL MEDICINE

FORTMANN, DANIEL, MD^{M*}

Provider ID: 100017458004
32281 CAMINO CPSTRN
C102
SAN JUAN CAPISTRANO,

C1. 网络提供者名单 主治医生

CA 92675
☎ (949) 493-7981
Teleservice
Effective as of 01-JAN-18

NGUYEN, THUYTRANG, MD^{F†}

Provider ID: 100198226006
📍 30300 CAMINO
CAPISTRANO
SAN JUAN CAPISTRANO,
CA 92675
☎ (949) 240-2272
📺 Spanish, Vietnamese
Effective as of 01-JAN-18

FAMILY PRACTICE

HALIM, NEIL, MD^M

Provider ID: 100153551007
📍 1030 LA BONITA DR STE
316
SAN MARCOS, CA 92078
☎ (760) 744-9626
📺 Arabic, Spanish
Effective as of 01-FEB-13

ROCHA, CLAUDIA, MD^F

Provider ID: 100400122002
📍 150 VALPRED A RD
SAN MARCOS, CA 92069
☎ (760) 736-6767
📺 Spanish
Effective as of 01-JUL-24

WILLIE, KADEN, DO^M

Provider ID: 100350661005
📍 150 VALPRED A RD
SAN MARCOS, CA 92069
☎ (760) 736-6767
📺 Portuguese
Effective as of 01-APR-23

FQHC

TRUECARE,

Provider ID: PG0025086047
📍 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
☎ (760) 736-6767
Effective as of 01-FEB-23

TRUECARE,

Provider ID: PG0025086042
📍 150 VALPRED A RD
SAN MARCOS, CA 92069
☎ (760) 736-6767
Teleservice
Effective as of 01-JUL-22

INTERNAL MEDICINE

NGUYEN, MINH, MD^M

Provider ID: 100055170007
📍 1595 GRAND AVE STE 100
SAN MARCOS, CA 92078
☎ (760) 736-6767
📺 Vietnamese
Effective as of 01-JUN-24

TOLENTINO, ARTURO, MD^M

Provider ID: 100112985010
📍 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
☎ (833) 867-4642
📺 Tagalog
Effective as of 01-JUN-24

WITCZAK, IZABELA, MD^{F†}

Provider ID: 100036527006
📍 150 VALPRED A RD
SAN MARCOS, CA 92069
☎ (760) 736-6767
📺 Polish
Effective as of 01-FEB-19

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL, MD^{M†}

Provider ID: 100360099010

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
☎ (619) 662-4100
📺 Spanish
Effective as of 01-JAN-21

ALVAREZ-ESTRADA, MIGUEL, MD^{M†}

Provider ID: 100360099011
📍 4050 BEYER BLVD
SAN YSIDRO, CA 92173
☎ (619) 662-4100
📺 Spanish
Effective as of 01-JAN-21

ARRIETA, NOEMI, DO^F

Provider ID: 100214881015
📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
☎ (619) 662-4100
📺 Spanish
Teleservice
Effective as of 01-JUN-24

ARRIETA, NOEMI, DO^F

Provider ID: 100214881011
📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
☎ (619) 662-4100
📺 Spanish
Teleservice
Effective as of 01-APR-23

CARRIEDO-CENICEROS, MARIA, MD^{F†}

Provider ID: 100066452012
📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
☎ (619) 662-4100
📺 Spanish
Effective as of 01-JAN-21

CUTLER, MICHAEL, MD^M

Provider ID: 100225708022

C1. 网络提供者名单 主治医生

4630 BORDER VILLAGE RD
STE H
SAN YSIDRO, CA 92173

(619) 264-2591

Russian, Spanish

Effective as of 01-JAN-24

CUTLER, MICHAEL, MD^M

Provider ID: 100225708024

4630 BORDER VILLAGE RD
STE H
SAN YSIDRO, CA 92173

(619) 264-2591

Russian, Spanish

Effective as of 01-APR-24

CUTLER, MICHAEL, MD^M

Provider ID: 100225708025

4630 BORDER VILLAGE RD
STE H
SAN YSIDRO, CA 92173

(619) 264-2591

Russian, Spanish

Effective as of 01-APR-24

DAVIS, CHARLES, MD^M

Provider ID: 100433314003

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Effective as of 01-SEP-24

LEE, JOSEPH, MD^{M†}

Provider ID: 100368709004

3364 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Teleservice

Effective as of 01-AUG-21

LEPEZ, DAVID, MD^{M†}

Provider ID: 100255267005

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Effective as of 01-APR-23

LEPEZ, DAVID, MD^{M†}

Provider ID: 100255267002

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Effective as of 01-NOV-15

MANSOUR, SABAH, MD^{M*}

Provider ID: 100436982002

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Effective as of 01-AUG-24

MOYA, MARY, MD^{F*}

Provider ID: 100099596010

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Effective as of 01-APR-23

MOYA, MARY, MD^F

Provider ID: 100099596013

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Effective as of 01-SEP-24

NAVARRO, VANESSAMARIA, MD^{F†}

Provider ID: 100173914015

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

(619) 662-4100

Filipino, Spanish, Tagalog

Effective as of 01-AUG-22

NAVARRO, VANESSAMARIA, MD^{F†}

Provider ID: 100173914012

3364 BEYER BLVD STE 103
SAN YSIDRO, CA 92173

(619) 662-4100

Filipino, Spanish, Tagalog

Effective as of 01-JAN-21

ORTEGA, LUIS, MD^{M†}

Provider ID: 100394387002

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Teleservice

Effective as of 01-OCT-22

ORTEGA, LUIS, MD^{M†}

Provider ID: 100394387007

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Teleservice

Effective as of 01-JUN-24

RAJAIPOUR, NEGIN, MD^{F†}

Provider ID: 100300998007

3364 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Farsi, Persian

Effective as of 01-JAN-21

RIDGE, NEAL, DO^{M†}

Provider ID: 100356750008

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Effective as of 01-JAN-21

RODRIGUEZ, NATALIE, MD^F

Provider ID: 100382891002

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100


C1. 网络提供者名单 主治医生


 Spanish
Teleservice

Effective as of 01-JAN-22

SNYDER, CHRISTOPHER, DO^{M†}

Provider ID: 100024789042

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 (619) 662-4100


 Spanish

Effective as of 01-JAN-21

STALEY, MICHAELA, MD^{F†}

Provider ID: 100359422003

 4004 BEYER BLVD
SAN YSIDRO, CA 92173


 (619) 662-4100

Effective as of 01-JAN-21

TALAVERA, GREGORY, MD^M

Provider ID: 100334847007

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 (619) 662-4100

 Spanish


Teleservice

Effective as of 01-APR-23

WEN, AKI YEN CHANG, DO^M

Provider ID: 100229198010

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 (619) 662-4100


Effective as of 01-AUG-24

FQHC

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR, †

Provider ID: PG0047542012

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 (619) 662-4100


Teleservice

Effective as of 01-JAN-21

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER, †

Provider ID: PG0047448004

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 (619) 662-4100


Teleservice

Effective as of 01-JAN-21

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS,

Provider ID: PG0047560015

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 (619) 662-4100


Teleservice


Effective as of 01-JAN-21

INTERNAL MEDICINE

DELAROSA, JOSE, MD^M

Provider ID: 100357668007

 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

 (619) 662-4100


 Tagalog

Effective as of 01-SEP-24

DELAROSA, JOSE, MD^M

Provider ID: 100357668008

 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173


 (619) 662-4100


 Tagalog

Effective as of 01-SEP-24

DILLON, BENEDICT, MD^{M†}

Provider ID: 100166636014

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 (619) 662-4100


 Spanish

Effective as of 01-SEP-24

DILLON, BENEDICT, MD^M

Provider ID: 100166636015

 4004 BEYER BLVD
SAN YSIDRO, CA 92173


 (619) 662-4100


 Spanish

Effective as of 01-SEP-24

DILLON, BENEDICT, MD^{M†}

Provider ID: 100166636010

 4050 BEYER BLVD
SAN YSIDRO, CA 92173


 (619) 662-4100


 Spanish

Effective as of 01-JAN-21

RAMIREZSANCHEZ, CLAUDIA, MD^{F†}

Provider ID: 100392011002

 4004 BEYER BLVD
SAN YSIDRO, CA 92173


 (619) 662-4100


 Spanish

Effective as of 01-AUG-22

SALERNO, MARIANA, MD^{F†}

Provider ID: 100287873007

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 (619) 662-4100

 Spanish


Teleservice

Effective as of 01-MAR-21

SCHNEIDER-MUNOZ, MARGARITA, MD^F

Provider ID: 100335002005

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 (619) 662-4100

 Spanish

Effective as of 01-SEP-24

FAMILY PRACTICE


C1. 网络提供者名单 主治医生

ADEMA, DONALD, DO^M

Provider ID: 100086591006

 10201 MISSION GORGE RD
STE M

SANTEE, CA 92071

 (619) 596-5445


Effective as of 01-JAN-14


INTERNAL MEDICINE

CORBIN, DAVID, MD^{M†}

Provider ID: 100378968002

 120 TOWN CENTER PKWY
SANTEE, CA 92071

 (619) 662-4100

 Hungarian


Teleservice


Effective as of 01-NOV-21

CORBIN, DAVID, MD^{M†}

Provider ID: 100378968006

 120 TOWN CENTER PKWY
SANTEE, CA 92071

 (619) 662-4100

 Hungarian


Teleservice

Effective as of 01-JUN-24

GUERRA, JACQUELINE, MD^{F†}

Provider ID: 100324693006

 120 TOWN CENTER PKWY
SANTEE, CA 92071

 (619) 873-3476


Teleservice

Effective as of 01-MAR-21

GUERRA, JACQUELINE, MD^{F†}

Provider ID: 100324693009

 120 TOWN CENTER PKWY
SANTEE, CA 92071

 (619) 873-3476

Teleservice


Effective as of 01-JUN-24

FAMILY PRACTICE

VOURLITIS, MELISSA, DO^{F*}

Provider ID: 100090572017

 850 DEL MAR DOWNS RD
SOLANA BEACH, CA 92075

 (858) 832-2500

Teleservice

Effective as of 01-NOV-23

INTERNAL MEDICINE


NARAYANAN,

PRIYADHARSHINI, MD^F

Provider ID: 100355661007

 665 SAN RODOLFO DR STE
1104

SOLANA BEACH, CA 92075

 (858) 266-9551

Teleservice


Effective as of 01-MAY-24

FAMILY PRACTICE

AFFLALO, SUZANNE, MD^F

Provider ID: 100402675004

 10225 AUSTIN DR STE 105
SPRING VALLEY, CA 91978

 (858) 648-0755

Teleservice


Effective as of 01-SEP-23

FQHC

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC,

Provider ID: PG0025044038

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 (619) 515-2555


Effective as of 01-JAN-21

FAMILY PRACTICE

BEHNAWA, SUSAN, MD^{F†}

Provider ID: 100343610004

 27190 SUN CITY BLVD
SUN CITY, CA 92586

 (951) 676-4193


Teleservice

Effective as of 01-JAN-20

BEHNAWA, SUSAN, MD^{F†}

Provider ID: 100343610010

 27190 SUN CITY BLVD
SUN CITY, CA 92586

 (951) 676-4193

Teleservice


Effective as of 01-NOV-20

GANTA, SANYASI, MD^{M†}

Provider ID: 100113069009

 26960 CHERRY HILLS
BLVD STE A

SUN CITY, CA 92586

 (951) 672-2856

 Hindi, Spanish, Telugu

Teleservice


Effective as of 01-NOV-17

GANTA, SANYASI, MD^{M†}

Provider ID: 100113069006

 26960 CHERRY HILLS
BLVD STE A

SUN CITY, CA 92586

 (951) 672-2856

 Hindi, Spanish, Telugu

Teleservice


Effective as of 01-AUG-16

GANTA, SANYASI, MD^{M†}

Provider ID: 100113069012

 26960 CHERRY HILLS
BLVD STE A

SUN CITY, CA 92586

 (951) 672-2856

 Hindi, Spanish, Telugu

Teleservice

Effective as of 01-APR-21

C1. 网络提供者名单 主治医生

SCHOONMAKER, JOHN, DO^{M†}

Provider ID: 100064979020

📍 29826 HAUN RD STE 300
SUN CITY, CA 92586

☎ (951) 679-7022

📱 Spanish

Effective as of 01-SEP-22

GENERAL PRACTICE

JEAN-MURAT, CAROLLE, MD^{F†}

Provider ID: 100333052006

📍 29826 HAUN RD STE 102
SUN CITY, CA 92586

☎ (619) 501-5511

📱 French, Spanish, Haitian
Creole

Effective as of 01-AUG-19

INTERNAL MEDICINE

NGUYEN, DAVID, MD^M

Provider ID: 100105561002

📍 27830 BRADLEY RD
SUN CITY, CA 92586

☎ (951) 679-2358

📱 Vietnamese

Effective as of 01-NOV-12

NGUYEN, THANG, MD^{M†}

Provider ID: 100068936002

📍 27830 BRADLEY RD
SUN CITY, CA 92586

☎ (951) 679-2358

📱 Vietnamese

Teleservice

Effective as of 01-SEP-09

STANFORD, DAVID, MD^{M†}

Provider ID: 100030388002

📍 29798 HAUN RD STE 308
SUN CITY, CA 92586

☎ (951) 301-7611

Teleservice

Effective as of 01-SEP-09

FAMILY PRACTICE

AKLADEOS, NERMEEN, MD^F

Provider ID: 100399707003

📍 28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590

☎ (951) 676-4193

📱 Arabic, Swahili

Teleservice

Effective as of 01-AUG-23

AYON MARTINEZ, CARLOS, MD^M

Provider ID: 100152029007

📍 41715 WINCHESTER RD
TEMECULA, CA 92590

☎ (951) 694-9449

📱 Spanish

Effective as of 01-AUG-20

AYON MARTINEZ, CARLOS, MD^M

Provider ID: 100152029006

📍 41840 ENTERPRISE CIR N
TEMECULA, CA 92590

☎ (619) 440-2751

📱 Spanish

Effective as of 01-AUG-20

BAILEY, CRISTINA, MD^{F†}

Provider ID: 100060834004

📍 28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590

☎ (951) 676-4193

📱 Spanish

Effective as of 01-JUN-04

BAILEY, CRISTINA, MD^{F†}

Provider ID: 100060834010

📍 28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590

☎ (951) 676-4193

📱 Spanish

Effective as of 01-NOV-20

BERNARDO, STACEY, DO^F

Provider ID: 100377889003

📍 28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590

☎ (951) 676-4193

Teleservice

Effective as of 01-DEC-21

BLOSSER, JOSHUA, DO^M

Provider ID: 100422006002

📍 31537 RANCHO PUEBLO
RD STE 102
TEMECULA, CA 92592

☎ (833) 867-4642

Effective as of 01-JUL-24

BRIGGS, BRIDGET, MD^F

Provider ID: 100069323005

📍 31170 TEMECULA PKWY
STE 100
TEMECULA, CA 92592

☎ (951) 698-6090

📱 Spanish

Effective as of 01-JAN-16

CAMARILLO, DANIEL, MD^{M†}

Provider ID: 100110735016

📍 28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590

☎ (951) 676-4193

📱 Spanish

Effective as of 01-NOV-20

CAMARILLO, DANIEL, MD^{M†}

Provider ID: 100110735008

📍 28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590

☎ (951) 676-4193

C1. 网络提供者名单 主治医生

 Spanish


Effective as of 01-MAR-12

COBIAN, VANESSA, MD^F

Provider ID: 100350271006

 31537 RANCHO PUEBLO
RD STE 102

TEMECULA, CA 92592


 (833) 684-4642

Effective as of 01-JUL-24

COBIAN, VANESSA, MD^F

Provider ID: 100350271003

 41840 ENTERPRISE CIR N
TEMECULA, CA 92590

 (951) 225-6400


Effective as of 01-MAR-22

COMBS, WALTER, MD^{M†}

Provider ID: 100085605012

 28780 SINGLE OAK DR STE
160

TEMECULA, CA 92590

 (951) 252-8650

 Spanish


Effective as of 01-NOV-20

COMBS, WALTER, MD^{M†}

Provider ID: 100085605005

 28780 SINGLE OAK DR STE
160

TEMECULA, CA 92590

 (951) 252-8650

 Spanish


Effective as of 01-JUN-04

COMBS, MATTHEW, MD^{M†}

Provider ID: 100337168003

 28780 SINGLE OAK DR STE
160

TEMECULA, CA 92590


 (951) 676-4193

Effective as of 01-DEC-18

DORR, KASIE, DO^F

Provider ID: 100422004002

 41840 ENTERPRISE CIR N
TEMECULA, CA 92590

 (951) 225-6400


Effective as of 01-JAN-24

ELKAYAM, ISAK, MD^M

Provider ID: 100400487003

 31537 RANCHO PUEBLO
RD STE 102

TEMECULA, CA 92592

 (833) 867-4642

 Hebrew, Spanish


Effective as of 01-JUL-24


IM, TAE WOONG, MD^{M†}

Provider ID: 100039015004

 28780 SINGLE OAK DR STE
160

TEMECULA, CA 92590

 (951) 676-4193

 Korean


Effective as of 01-JUN-04

JACKSON, ANITA, MD^{F†}

Provider ID: 100060861005

 44274 GEORGE CUSHMAN
CT STE 212

TEMECULA, CA 92592

 (951) 694-4688

 Tagalog


Effective as of 01-NOV-11

MADRID, RICHARD, MD^{M†}

Provider ID: 100077741014

 28780 SINGLE OAK DR STE
160

TEMECULA, CA 92590

 (951) 676-4193


Effective as of 01-NOV-20

MADRID, RICHARD, MD^{M†}

Provider ID: 100077741005

 28780 SINGLE OAK DR STE
160

TEMECULA, CA 92590


 (951) 676-4193


Effective as of 01-OCT-05

MAJEED, WASAN, MD^F

Provider ID: 100398263003

 41840 ENTERPRISE CIR N
TEMECULA, CA 92590

 (951) 225-6400

 Arabic


Effective as of 01-MAR-23

MCDONALD, ROBERT, MD^{M†}

Provider ID: 100093825003

 31493 RANCHO PUEBLO
RD STE 107

TEMECULA, CA 92592

 (951) 303-3337


Effective as of 01-OCT-09

MCDONALD, MARY, MD^F

Provider ID: 100051408003

 31493 RANCHO PUEBLO
RD STE 107

TEMECULA, CA 92592


 (951) 303-3337

Effective as of 01-OCT-09

MILLER, BRANDON, DO^{M†}

Provider ID: 100148562008

 31720 TEMECULA PKWY
TEMECULA, CA 92592

 (951) 676-4193


Effective as of 01-OCT-11

MILLER, BRANDON, DO^{M†}

Provider ID: 100148562007

 28780 SINGLE OAK DR STE
160

TEMECULA, CA 92590

 (951) 676-4193

Effective as of 01-OCT-11

NWOSU, MICHAEL, MD^M

Provider ID: 100367685005

C1. 网络提供者名单

主治医生

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
(951) 225-6400
Effective as of 01-AUG-22

POSTE, ALETHEA, MD^F

Provider ID: 100418802002
28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590
(951) 676-4193
Italian, Spanish
Teleservice
Effective as of 01-JAN-24

RAHMAN, MAISARA, MD^{F†}

Provider ID: 100083398023
31720 TEMECULA PKWY
TEMECULA, CA 92592
(951) 676-4193
Arabic
Effective as of 01-NOV-20

RAHMAN, MAISARA, MD^{F†}

Provider ID: 100083398012
31150 TEMECULA PKWY
STE 200
TEMECULA, CA 92592
(951) 676-4193
Arabic
Effective as of 01-AUG-16

SCHULTZ, JAMES, MD^{M†}

Provider ID: 100030577018
41840 ENTERPRISE CIR N
TEMECULA, CA 92590
(951) 225-6400
Farsi, Greek, Spanish
Effective as of 01-AUG-20

SIMMONS, PAMELA, MD^{F†}

Provider ID: 100057995006
28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590

(951) 676-4193
Effective as of 01-JUL-17

SIMPSON, NEAL, MD^{M†}

Provider ID: 100080404010
31150 TEMECULA PKWY
STE 202
TEMECULA, CA 92592
(951) 302-9468
Spanish
Effective as of 01-MAY-17

SIMPSON, NEAL, MD^{M†}

Provider ID: 100080404014
31150 TEMECULA PKWY
STE 202
TEMECULA, CA 92592
(951) 302-9468
Spanish
Effective as of 01-NOV-20

SKEOCH, GORDON, MD^M

Provider ID: 100101810002
27555 YNEZ RD STE 340
TEMECULA, CA 92591
(951) 694-3535
Effective as of 01-SEP-09

VINCENT, WILLIAM, MD^{M†}

Provider ID: 100320230007
31720 TEMECULA PKWY
STE 100
TEMECULA, CA 92592
(951) 225-6838
Effective as of 01-MAY-21

WISE, DOUGLAS, DO^{M††}

Provider ID: 100023557005
40285 WINCHESTER RD
STE 103
TEMECULA, CA 92591
(951) 296-5844
Effective as of 01-NOV-22

ZEBARJADI, OMID, DO^M

Provider ID: 100379100008

27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590
(951) 503-8730
Farsi, Persian, Spanish
Teleservice
Effective as of 01-AUG-23

ZEBRACK, DAVID, DO^{M†}

Provider ID: 100064903010
40285 WINCHESTER RD
STE 103
TEMECULA, CA 92591
(951) 296-5844
Spanish
Effective as of 01-NOV-22

ZEBRACK, DAVID, DO^{M†}

Provider ID: 100064903006
40285 WINCHESTER RD
STE 103
TEMECULA, CA 92591
(951) 296-5844
Spanish
Effective as of 01-SEP-04

ZURITA, DANIELA, MD^{F†}

Provider ID: 100396617008
41840 ENTERPRISE CIR N
TEMECULA, CA 92590
(951) 225-6400
Spanish
Effective as of 01-DEC-22

GENERAL PRACTICE

JEAN-MURAT, CAROLLE, MD^{F†}

Provider ID: 100333052007
31515 RANCHO PUEBLO RD
STE 102
TEMECULA, CA 92592
(619) 501-5511
French, Spanish, Haitian
Creole

C1. 网络提供者名单 主治医生

Effective as of 01-AUG-19

JEAN-MURAT, CAROLLE, MD^{F†}

Provider ID: 100333052011

31515 RANCHO PUEBLO RD
STE 102
TEMECULA, CA 92592

(619) 501-5511

French, Spanish, Haitian
Creole

Effective as of 01-NOV-20

INTERNAL MEDICINE

BASCH, MICHAEL, MD^{M†}

Provider ID: 100011399007

41593 WINCHESTER RD
STE 101
TEMECULA, CA 92590

(951) 719-1111

Arabic, Spanish

Effective as of 01-SEP-09

BLOSSER, NICHELE, DO^F

Provider ID: 100411369003

28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590

(951) 676-4193

Effective as of 01-NOV-23

GISI, SYLVIA, MD^F

Provider ID: 100100126002

31493 RANCHO PUEBLO
RD STE 206
TEMECULA, CA 92592

(951) 303-6158

Spanish

Teleservice

Effective as of 01-AUG-19

GOMER, JEREMY, MD^{M†}

Provider ID: 100379005002

27403 YNEZ RD STE 108
TEMECULA, CA 92591

(951) 750-7888

Effective as of 01-NOV-21

KIM, IRENE, DO^F

Provider ID: 100380710003

28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590

(951) 676-4193

Effective as of 01-JAN-22

HERMAN, SAM, MD^M

Provider ID: 100414181005

31951 DOVE CANYON DR
TRABUCO CANYON, CA
92679

(949) 557-0890

Effective as of 01-SEP-23

FAMILY PRACTICE

SCHULTZ, JAMES, MD^M

Provider ID: 100030577024

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

(760) 742-9919

Farsi, Greek, Spanish

Effective as of 01-MAR-23

SCHULTZ, JAMES, MD^M

Provider ID: 100030577029

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

(760) 742-9919

Farsi, Greek, Spanish

Effective as of 01-JAN-24

FQHC NEIGHBORHOOD HEALTHCARE,

Provider ID: PG0024990061

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

(760) 742-9919

Teleservice

Effective as of 01-FEB-24

FAMILY PRACTICE

CASTREJON, JOSEPH, MD^{M*}

Provider ID: 100097250007

2023 W VISTA WAY STE K
VISTA, CA 92083

(760) 806-1406

Spanish

Effective as of 01-SEP-21

CLARK, MA BELEN, MD^{F††}

Provider ID: 100015309003

1954 VIA CTR STE B
VISTA, CA 92081

(760) 529-9700

Tagalog

Effective as of 01-DEC-15

ESPINOSA-SILVA, YAMINAH, DO^{F*}

Provider ID: 100358800015

134 GRAPEVINE RD
VISTA, CA 92083

(760) 631-5000

Spanish

Effective as of 01-JAN-24

ESPINOSA-SILVA, YAMINAH, DO^{F*}

Provider ID: 100358800014

1000 VALE TERRACE DR
VISTA, CA 92084

(760) 631-5000

Spanish

Effective as of 01-JAN-24

FERBER, JEFFREY, MD^{M††}

Provider ID: 100092669014

1926 VIA CTR
VISTA, CA 92081


(760) 940-7000


Effective as of 01-SEP-21

C1. 网络提供者名单 主治医生

HURD, MELISSA, MD^{F†}

Provider ID: 100054491003

 161 THUNDER DR STE 103
VISTA, CA 92083

 (760) 758-1988


 Spanish


Effective as of 01-JUL-13

LEONARD, LISA, MD^{F†}

Provider ID: 100278907004

 1000 VALE TERRACE DR
VISTA, CA 92084


 (760) 631-5000


 French, Spanish

Effective as of 01-OCT-21

NOVAK, LOREN, DO^{M†}

Provider ID: 100093766013

 1926 VIA CENTRE DRIVE
SUITE A
VISTA, CA 92081

 (760) 940-7000


 Spanish

Effective as of 01-SEP-21

ONG, DONALD, MD^{M†}

Provider ID: 100033027006

 1000 VALE TERRACE DR
VISTA, CA 92084

 (760) 631-5000


 Filipino, Spanish, Tagalog


Effective as of 01-JAN-24

POP, SIMONA, MD^{F†}

Provider ID: 100021772013

 145 THUNDER DR
VISTA, CA 92083

 (760) 941-9002

 Romanian


Effective as of 01-NOV-23


TRAN, DAO, DO^M

Provider ID: 100325638002

 134 GRAPEVINE RD

VISTA, CA 92083

 (760) 631-5000


 Vietnamese


Effective as of 01-JUL-19

TRAN, DAO, DO^M

Provider ID: 100325638014

 134 GRAPEVINE RD
VISTA, CA 92083

 (760) 631-5000


 Vietnamese


Effective as of 01-JAN-24

TRAN, DAO, DO^M

Provider ID: 100325638010

 134 GRAPEVINE RD
VISTA, CA 92083

 (760) 631-5000


 Vietnamese


Effective as of 01-MAR-20

TRAN, DAO, DO^M

Provider ID: 100325638009

 1000 VALE TERRACE DR
VISTA, CA 92084

 (760) 631-5000


 Vietnamese


Effective as of 01-MAR-20

FQHC

VCC DURIAN, †

Provider ID: PG0083886011

 105 DURIAN ST STE A
VISTA, CA 92083


 (844) 308-5003

Effective as of 01-JUL-22

VISTA COMMUNITY CLINIC GRAPEVINE,

Provider ID: PG0085050004

 134 GRAPEVINE RD
VISTA, CA 92083

 (760) 631-5000

Teleservice


Effective as of 01-JUL-22

GENERAL PRACTICE

ONG, DONALD, MD^{M†}

Provider ID: 100033027003

 1000 VALE TERRACE DR
VISTA, CA 92084

 (760) 631-5000


 Filipino, Spanish, Tagalog

Effective as of 01-DEC-10

ONG, DONALD, MD^{M†}

Provider ID: 100033027005

 1000 VALE TERRACE DR
VISTA, CA 92084

 (760) 631-5000


 Filipino, Spanish, Tagalog

Effective as of 01-MAR-20

SMITH, GREGORY, MD^{M*}

Provider ID: 100062596003

 161 THUNDER DR STE 207
VISTA, CA 92083

 (760) 598-8410


Effective as of 01-DEC-06

INTERNAL MEDICINE

BOQUIN, ENRIQUE, MD^M

Provider ID: 100062570003

 1000 VALE TERRACE DR
VISTA, CA 92084

 (760) 631-5000


 Spanish

Effective as of 01-DEC-07

BOQUIN, ENRIQUE, MD^M

Provider ID: 100062570008

 1000 VALE TERRACE DR
VISTA, CA 92084

 (760) 631-5000

 Spanish

Effective as of 01-JAN-24

BOQUIN, ENRIQUE, MD^M

C1. 网络提供者名单 主治医生

Provider ID: 100062570005
📍 1000 VALE TERRACE DR
VISTA, CA 92084
☎ (760) 631-5000
📄 Spanish
Effective as of 01-NOV-20

BRAR, KARANBIR, MD^{M†}
Provider ID: 100305037016
📍 1926 VIA CTR STE A
VISTA, CA 92081
☎ (760) 940-7000
Effective as of 01-SEP-21

CLANCY, TARA, DO^{F†}
Provider ID: 100265397003
📍 2375 S MELROSE DR
VISTA, CA 92081
☎ (760) 305-1900
Effective as of 01-JUL-16

CLANCY, JOHN, DO^{M†}
Provider ID: 100215810013
📍 2375 S MELROSE DR
VISTA, CA 92081
☎ (760) 305-1900
Effective as of 01-SEP-21

DAO, MARC, MD^M
Provider ID: 100307890016
📍 1000 VALE TERRACE DR
VISTA, CA 92084
☎ (760) 631-5000
📄 French, Vietnamese
Effective as of 01-JAN-24

DAO, MARC, MD^M
Provider ID: 100307890010
📍 1000 VALE TERRACE DR
VISTA, CA 92084
☎ (760) 631-5000
📄 French, Vietnamese
Effective as of 01-FEB-23

DAO, MARC, MD^M

Provider ID: 100307890014
📍 1000 VALE TERRACE DR
VISTA, CA 92084
☎ (760) 631-5000
📄 French, Vietnamese
Effective as of 01-JUN-23

HALPERIN, JASON, MD^M
Provider ID: 100400241004
📍 134 GRAPEVINE RD
VISTA, CA 92083
☎ (760) 631-5000
Effective as of 01-JAN-24

KOBAYASHI, GARY, MD^{M†}
Provider ID: 100090343008
📍 145 THUNDER DR STE 1
VISTA, CA 92083
☎ (760) 941-9002
Effective as of 01-SEP-21

LI, XIANGLI, MD^{F†}
Provider ID: 100239749009
📍 1926 VIA CTR STE A
VISTA, CA 92081
☎ (760) 940-7000
📄 Chinese
Effective as of 01-SEP-21

MOASIS, KAREEM, MD^M
Provider ID: 100379398004
📍 145 THUNDER DR
VISTA, CA 92083
☎ (760) 941-9002
📄 Arabic
Effective as of 01-JAN-24

NGUYEN, ETHAN, MD^M
Provider ID: 100362686005
📍 145 THUNDER DR
VISTA, CA 92083
☎ (760) 941-9002
📄 Vietnamese
Effective as of 01-AUG-22

RHIANNON, JULIA, MD^F
Provider ID: 100382647008
📍 105 DURIAN ST STE B
VISTA, CA 92083
☎ (760) 631-5000
Effective as of 01-SEP-22

RHIANNON, JULIA, MD^F
Provider ID: 100382647007
📍 105 DURIAN ST STE A
VISTA, CA 92083
☎ (760) 631-5000
Effective as of 01-SEP-22

RHIANNON, JULIA, MD^F
Provider ID: 100382647009
📍 1000 VALE TERRACE DR
VISTA, CA 92084
☎ (760) 631-5000
Effective as of 01-JAN-24

RHIANNON, JULIA, MD^F
Provider ID: 100382647010
📍 105 DURIAN ST STE B
VISTA, CA 92083
☎ (760) 631-5000
Effective as of 01-JAN-24


RHIANNON, JULIA, MD^F
Provider ID: 100382647006
📍 1000 VALE TERRACE DR
VISTA, CA 92084
☎ (760) 631-5000
Effective as of 01-SEP-22



RHIANNON, JULIA, MD^F
Provider ID: 100382647002
📍 1000 VALE TERRACE DR
VISTA, CA 92084
☎ (760) 631-5000
Effective as of 01-JAN-22




RUTMAN, MICHAEL, DO^{M†}
Provider ID: 100024612005
📍 2355 S MELROSE DR




C1. 网络提供者名单

主治医生



VISTA, CA 92081 Effective as of 01-JAN-22
 (760) 598-0088
Effective as of 01-OCT-00

RUTMAN, MICHAEL, DO^{M†}
Provider ID: 100024612023
 2355 S MELROSE DR
VISTA, CA 92081
 (760) 598-0088
Effective as of 01-JAN-21



SHABANIAN, LEILA, MD^F
Provider ID: 100032179027
 1000 VALE TERRACE DR
VISTA, CA 92084
 (760) 631-5000
 Farsi, French, Persian
Effective as of 01-JUL-24

SHALI, REYZAN, MD^{F†}
Provider ID: 100113968008
 1926 VIA CTR STE A
VISTA, CA 92081
 (760) 940-7000
 Arabic, Hebrew
Effective as of 01-SEP-21

FAMILY PRACTICE

BONNICI, MARCELLA, MD^{F*}
Provider ID: 100072106002
 36320 INLAND VALLEY DR
STE 201
WILDOMAR, CA 92595
 (951) 816-3233
Effective as of 01-OCT-16

INTERNAL MEDICINE

PATEL, REENABEN, MD^F
Provider ID: 100380064004
 36243 INLAND VALLEY DR
STE 160
WILDOMAR, CA 92595
 (951) 698-8821

C1. 网络提供者名单 专科护理医生

CERTIFIED NURSE PRACTITIONER

WONG, KRISTLE, NP

Provider ID: N/A

26671 ALISO CREEK RD STE 202
ALISO VIEJO, CA 92656
Effective as of 01-NOV-23

DERMATOLOGY

LANDER, JEFFREY, MD†

Provider ID: N/A

24541 PACIFIC PARK DR STE 103
ALISO VIEJO, CA 92656
Effective as of 01-DEC-22

LANDER, JEFFREY, MD†

Provider ID: N/A

24541 PACIFIC PARK DR STE 103
ALISO VIEJO, CA 92656
Effective as of 01-OCT-23

DEVELOPMENTAL

BEHAVIORAL PEDIATRICS

FELDMAN, GARY, MD†

Provider ID: N/A

11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-JAN-23

ENDOCRINOLOGY

METABOLISM DIABETES

NADEAU, DANIEL, MD

Provider ID: N/A

26671 ALISO CREEK RD STE 205
ALISO VIEJO, CA 92656*
Effective as of 01-JUN-23

NADEAU, DANIEL, MD

Provider ID: N/A

26671 ALISO CREEK RD STE 205
ALISO VIEJO, CA 92656*
Effective as of 01-JUN-23

ROBERTSON, ASHA, MD

Provider ID: N/A

26671 ALISO CREEK RD STE 205
ALISO VIEJO, CA 92656
Effective as of 01-JUN-23

ROBERTSON, ASHA, MD

Provider ID: N/A

26671 ALISO CREEK RD STE 205
ALISO VIEJO, CA 92656
Effective as of 01-JUN-23

FAMILY PRACTICE

TUNG, CHESTER, DO

Provider ID: N/A

26671 ALISO CREEK RD STE 101
ALISO VIEJO, CA 92656*
Effective as of 01-SEP-24

HEMATOLOGY / ONCOLOGY

IYER, LAXMI, MD†

Provider ID: N/A

2 JOURNEY STE 201
ALISO VIEJO, CA 92656
Effective as of 01-NOV-21

IYER, LAXMI, MD†

Provider ID: N/A

2 JOURNEY STE 201
ALISO VIEJO, CA 92656
Effective as of 01-NOV-21

IYER, LAXMI, MD†

Provider ID: N/A

2 JOURNEY STE 201
ALISO VIEJO, CA 92656
Effective as of 01-NOV-21

IYER, LAXMI, MD†

Provider ID: N/A

2 JOURNEY STE 201
ALISO VIEJO, CA 92656
Effective as of 01-NOV-21

IYER, LAXMI, MD†

Provider ID: N/A

2 JOURNEY STE 201
ALISO VIEJO, CA 92656
Effective as of 01-NOV-21

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

2 JOURNEY STE 201
ALISO VIEJO, CA 92656*
Effective as of 01-NOV-21

INFECTIOUS DISEASE

BAILEY, CHARLES, MD†

Provider ID: N/A

26671 ALISO CREEK RD STE 301
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

BAILEY, CHARLES, MD†

Provider ID: N/A

26671 ALISO CREEK RD STE 301
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

NEUROLOGY

BIXBY, MINDY, DO

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

☐ 26671 ALISO CREEK RD STE 203
ALISO VIEJO, CA 92656

Teleservice

Effective as of 01-JAN-23

BIXBY, MINDY, DO

Provider ID: N/A

☐ 26671 ALISO CREEK RD STE 203
ALISO VIEJO, CA 92656

Teleservice

Effective as of 01-JAN-23

BIXBY, MINDY, DO

Provider ID: N/A

☐ 26671 ALISO CREEK RD STE 203
ALISO VIEJO, CA 92656

Teleservice

Effective as of 01-FEB-23

BIXBY, MINDY, DO

Provider ID: N/A

☐ 26671 ALISO CREEK RD STE 203
ALISO VIEJO, CA 92656

Teleservice

Effective as of 01-FEB-23

BIXBY, MINDY, DO

Provider ID: N/A

☐ 26671 ALISO CREEK RD STE 203
ALISO VIEJO, CA 92656

Teleservice

Effective as of 01-FEB-23

BIXBY, MINDY, DO

Provider ID: N/A

☐ 26671 ALISO CREEK RD STE 203
ALISO VIEJO, CA 92656

Teleservice

Effective as of 01-FEB-23

LUDEMA, THOMAS, MD†

Provider ID: N/A

☐ 15 MAREBLU STE 250
ALISO VIEJO, CA 92656

Effective as of 01-OCT-18

LUDEMA, THOMAS, MD†

Provider ID: N/A

☐ 15 MAREBLU STE 250
ALISO VIEJO, CA 92656

Effective as of 01-OCT-18

MARTINEZ, KENNETH, MD

Provider ID: N/A

☐ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656

Effective as of 01-APR-23

MARTINEZ, KENNETH, MD

Provider ID: N/A

☐ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656

Effective as of 01-JAN-17

MARTINEZ, KENNETH, MD

Provider ID: N/A

☐ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656

Effective as of 01-NOV-14

MARTINEZ, KENNETH, MD

Provider ID: N/A

☐ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656

Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A

☐ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656

Effective as of 01-MAR-20

SALEHI, HAMID, MD†

Provider ID: N/A

☐ 26895 ALISO CREEK RD
STE B302
ALISO VIEJO, CA 92656

Effective as of 01-JAN-18

OPTOMETRIST

NGUYEN, LETHUY, OD†

Provider ID: N/A

☐ 27001 MOULTON PKWY
STE A100
ALISO VIEJO, CA 92656

Effective as of 01-JAN-18

PEDIATRICS

FELDMAN, GARY, MD†

Provider ID: N/A

☐ 11 MAREBLU STE 200
ALISO VIEJO, CA 92656

Effective as of 01-NOV-18

FELDMAN, GARY, MD†

Provider ID: N/A

☐ 11 MAREBLU STE 200
ALISO VIEJO, CA 92656

Effective as of 01-FEB-23

YANNI, ELIZABETH, MD†

Provider ID: N/A

☐ 26671 ALISO CREEK RD STE 200
ALISO VIEJO, CA 92656*

Effective as of 01-JAN-21

PHYSICIANS ASSISTANT

GREEN, TRAVIS, PA

Provider ID: N/A

☐ 26671 ALISO CREEK RD STE 101
ALISO VIEJO, CA 92656*

Effective as of 01-MAY-23

C1. 网络提供者名单 专科护理医生

PODIATRIST

ENG, STEVE, DPM†

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JUL-21

ENG, STEVE, DPM†

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JUL-21

ENG, STEVE, DPM†

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JUL-21

ENG, STEVE, DPM†

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

ENG, STEVE, DPM†

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

HEHE, KYLE, DPM

Provider ID: N/A

15 MAREBLU STE 240
ALISO VIEJO, CA 92656
Effective as of 01-AUG-23

HEHE, KYLE, DPM

Provider ID: N/A

15 MAREBLU STE 240
ALISO VIEJO, CA 92656
Effective as of 01-AUG-23

PSYCHIATRY

MARTINEZ, KENNETH, MD

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JAN-17

MARTINEZ, KENNETH, MD

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

MARTINEZ, KENNETH, MD

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-NOV-14

MARTINEZ, KENNETH, MD

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JAN-17

MARTINEZ, KENNETH, MD

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

MARTINEZ, KENNETH, MD

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A

5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-NOV-14

PULMONARY DISEASES

GALKO, BARBARA, MD

Provider ID: N/A

11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-NOV-23

SHAHINIAN, GEORGE, MD

Provider ID: N/A

11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-MAR-24

SHAHINIAN, GEORGE, MD

Provider ID: N/A

11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-MAR-24

SHAHINIAN, GEORGE, MD

Provider ID: N/A

11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-JUL-23

SHAHINIAN, GEORGE, MD

Provider ID: N/A


11 MAREBLU STE 200

C1. 网络提供者名单 专科护理医生

ALISO VIEJO, CA 92656
Effective as of 01-NOV-23

SHAHINIAN, GEORGE, MD


Provider ID: N/A

 11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-NOV-23

SURGERY GENERAL


RUSSO, MICHAEL, MD†

Provider ID: N/A

 11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-APR-21


RUSSO, MICHAEL, MD†

Provider ID: N/A

 11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-MAY-21

RUSSO, MICHAEL, MD†

Provider ID: N/A


 11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-MAY-21

SURGERY

NEUROLOGICAL


MEHTA, VIKRAM, MD

Provider ID: N/A

 26671 ALISO CREEK RD STE
203
ALISO VIEJO, CA 92656
Effective as of 01-DEC-23

MEHTA, VIKRAM, MD


Provider ID: N/A

 26671 ALISO CREEK RD STE
203
ALISO VIEJO, CA 92656
Effective as of 01-DEC-23

CERTIFIED NURSE PRACTITIONER

SANDERS, JESSICA, NP†


Provider ID: N/A

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Teleservice
Effective as of 01-NOV-22

CHIROPRACTOR


KELCHNER, MATTHEW, DC†

Provider ID: N/A

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Effective as of 01-JAN-21

PHILLIPS, KATHERINE, DC


Provider ID: N/A

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Effective as of 01-FEB-24

FAMILY PRACTICE

VANHOLLEBEKE, RACHEL, MD


Provider ID: N/A

 1620 ALPINE BLVD
ALPINE, CA 91901
Effective as of 01-JUN-23

INTERNAL MEDICINE


VANHOLLEBEKE, RACHEL, MD

Provider ID: N/A

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901*
Effective as of 01-JUL-24

VANHOLLEBEKE, RACHEL, MD

Provider ID: N/A


 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Effective as of 01-JUL-24

LICENSED CLINICAL SOCIAL WORKER

KHALEEL, AMMAR, LCSW


Provider ID: N/A

 1620 ALPINE BLVD
ALPINE, CA 91901
Effective as of 01-NOV-22

OPHTHALMOLOGY


BINDER, NICHOLAS, MD†

Provider ID: N/A

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-SEP-22


BINDER, NICHOLAS, MD†

Provider ID: N/A

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-JAN-21


CHANG, TOM, MD†

Provider ID: N/A

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-SEP-22


PATEL, GITANE, MD†

Provider ID: N/A

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-AUG-20

PATEL, SARJAN, MD†

Provider ID: N/A

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
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PATEL, GITANE, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
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PATEL, GITANE, MD†

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
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PATEL, GITANE, MD†

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
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OPTOMETRIST

AOTO, KIM, OD†

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
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DYER, SHARON, OD†

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A

1620 ALPINE BLVD STE 117
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MARR, RYAN, OD

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
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MARR, RYAN, OD

Provider ID: N/A

1620 ALPINE BLVD STE 117

ALPINE, CA 91901
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ZVANUT, DONALD, OD

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
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PSYCHOLOGIST

FRITZ, JENNIFER, PhD†

Provider ID: N/A

1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Effective as of 01-DEC-22

FRITZ, JENNIFER, PhD†

Provider ID: N/A

1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Effective as of 01-DEC-22

SMITH, STEPHANIE, PhD†

Provider ID: N/A

1620 ALPINE BLVD STE 110
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SMITH, STEPHANIE, PhD†

Provider ID: N/A

1620 ALPINE BLVD STE 110
ALPINE, CA 91901
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TORRES, RANDALL, PSYD

Provider ID: N/A

1620 ALPINE BLVD STE 110
ALPINE, CA 91901
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TORRES, RANDALL, PSYD

Provider ID: N/A

1620 ALPINE BLVD STE 110
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OPTOMETRIST

HOLMSTROM, STEVEN, OD†

Provider ID: N/A

31722 RAILROAD CANYON
RD
CANYON LAKE, CA 92587
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ANESTHESIOLOGY PAIN MANAGEMENT

MADHAV, SANDIP, MD†

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6010 HIDDEN VALLEY RD
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CARLSBAD, CA 92011
Teleservice
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MADHAV, SANDIP, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
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Teleservice
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PRASAD, RUPA, MD†

Provider ID: N/A

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PRASAD, RUPA, MD†

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STE 200

C1. 网络提供者名单 专科护理医生

CARLSBAD, CA 92011
Teleservice
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AUDIOLOGIST

SERENO, EMILY, AuD

Provider ID: N/A
6010 HIDDEN VALLEY RD
CARLSBAD, CA 92008
Teleservice
Effective as of 01-MAY-24

CERTIFIED NURSE PRACTITIONER

BINAVI, HOWNAZ, NP†

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6010 HIDDEN VALLEY RD
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CARLSBAD, CA 92011
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BISHOP, LESLIE, NP†

Provider ID: N/A
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BISHOP, LESLIE, NP†

Provider ID: N/A
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HALPERN, DAVID, NP†

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1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009

Effective as of 01-JAN-21

HOOPER, BONNIE, NP†

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JAN-21

HOOPER, BONNIE, NP†

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

POLIZZI, BRITTANY, NP†

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

POLIZZI, BRITTANY, NP†

Provider ID: N/A
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CARLSBAD, CA 92011
Effective as of 01-JAN-22

RICE, ELIZABETH, NP

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

SOLIC, DIANE, NP

Provider ID: N/A
1905 CALLE BARCELONA
STE 211
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Teleservice
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SYMANSKI, ELIZABETH, NP†

Provider ID: N/A
1905 CALLE BARCELONA
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Teleservice
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CHIROPRACTOR

BERRY, MICHAEL, DC

Provider ID: N/A
6986 EL CAMINO REAL STE
F
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MILLER, JAMES, DC

Provider ID: N/A
6986 EL CAMINO REAL STE
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CLINICAL

NEUROPSYCHOLOGIST

ALASANTRO, LORI, PhD†

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ALASANTRO, LORI, PhD†

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ALASANTRO, LORI, PhD†

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C1. 网络提供者名单 专科护理医生

STE 200
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KAUP, ALLISON, PhD[†]

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DERMATOLOGY

ANGRA, KUNAL, MD[†]

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6010 HIDDEN VALLEY RD
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BUSCH, HEIDI, MD[†]

Provider ID: N/A
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RILEY, JESSICA, DO[†]

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RILEY, JESSICA, DO[†]

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RILEY, JESSICA, DO[†]

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RILEY, JESSICA, DO[†]

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ZUBAIR, RAHEEL, MD

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ZUBAIR, RAHEEL, MD

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ZUBAIR, RAHEEL, MD

Provider ID: N/A
6010 HIDDEN VALLEY RD
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ZUBAIR, RAHEEL, MD

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6010 HIDDEN VALLEY RD
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FAMILY PRACTICE

CHAVEZSANTOS, MARIA, MD

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1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008
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MADHAV, KINJAL, MD[†]

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HEARING AID DEALER / SUPPLIER

DAVIS, KELLE, MA[†]

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1820 MARRON RD
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DAVIS, KELLE, MA[†]

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GALLAGHER, JEFFERY, MA

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NEPHROLOGY

SAVANI, AMAN, MD

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NEUROLOGY

C1. 网络提供者名单 专科护理医生

BAKER, DAVID, DO

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BAKER, DAVID, DO

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Teleservice

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BAKER, DAVID, DO

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CHOUDRY, BILAL, MD†

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CHOUDRY, BILAL, MD†

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CHOUDRY, BILAL, MD†

Provider ID: N/A

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CHOUDRY, BILAL, MD†

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DELANEY, MICHAEL, MD†

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DELANEY, MICHAEL, MD†

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Teleservice

Effective as of 01-SEP-21

DELANEY, MICHAEL, MD†

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DROKER, BRIAN, MD

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Teleservice

Effective as of 01-MAR-24

DROKER, BRIAN, MD

Provider ID: N/A

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Teleservice

Effective as of 01-DEC-23

DROKER, BRIAN, MD

Provider ID: N/A

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Teleservice

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FARNSWORTH, WILLIAM, MD†

Provider ID: N/A

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Teleservice

Effective as of 01-FEB-22

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
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Teleservice

Effective as of 01-NOV-21

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
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CARLSBAD, CA 92011

Teleservice

Effective as of 01-NOV-21

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
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CARLSBAD, CA 92011

Teleservice

Effective as of 01-JUN-24

FRISHBERG, BENJAMIN, MD†

C1. 网络提供者名单

专科护理医生

Provider ID: N/A

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

FRISHBERG, BENJAMIN, MD[†]

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

FRISHBERG, BENJAMIN, MD[†]

Provider ID: N/A

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

FRISHBERG, BENJAMIN, MD[†]

Provider ID: N/A

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

FRISHBERG, BENJAMIN, MD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
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Effective as of 01-SEP-22

HALL, JACOB, MD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-24

HAMILTON, ROSS, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011*

Effective as of 01-OCT-24

HO, GILBERT, MD

Provider ID: N/A

5814 VAN ALLEN WAY STE
209
CARLSBAD, CA 92008
Effective as of 01-JAN-21

LANE, RICHARD, MD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
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Effective as of 01-JAN-21

LANE, RICHARD, MD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
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Effective as of 01-SEP-22

LANE, RICHARD, MD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
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CARLSBAD, CA 92011
Effective as of 01-APR-24

LANE, RICHARD, MD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-DEC-23

LUHAR, RIYA, DO

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice

Effective as of 01-AUG-23

LUHAR, RIYA, DO

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JAN-23

LUHAR, RIYA, DO

Provider ID: N/A

6010 HIDDEN VALLEY RD
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Teleservice
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NIELSEN, AMY, DO[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
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CARLSBAD, CA 92011
Effective as of 01-SEP-21

NIELSEN, AMY, DO[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
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CARLSBAD, CA 92011
Effective as of 01-JAN-21

NIELSEN, AMY, DO[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
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CARLSBAD, CA 92011
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NIELSEN, AMY, DO[†]

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Effective as of 01-JAN-16

C1. 网络提供者名单 专科护理医生

NIELSEN, AMY, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
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CARLSBAD, CA 92011
Effective as of 01-MAR-21

OH, IRENE, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

OH, IRENE, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

OH, IRENE, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

OH, IRENE, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

OMURO, ARTHUR, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

OMURO, ARTHUR, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD

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PADUGA, REMIA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
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CARLSBAD, CA 92011
Effective as of 01-JAN-24

PADUGA, REMIA, MD†

Provider ID: N/A

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

QUESNELL, TARA, DO†

Provider ID: N/A

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Effective as of 01-SEP-21

QUESNELL, TARA, DO†

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Effective as of 01-JAN-24

QUESNELL, TARA, DO†

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SADOFF, MARK, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
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SADOFF, MARK, MD†

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SADOFF, MARK, MD†

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6010 HIDDEN VALLEY RD
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SADOFF, MARK, MD†

Provider ID: N/A

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SAVANI, AMAN, MD

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6010 HIDDEN VALLEY RD
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SAVANI, AMAN, MD

Provider ID: N/A

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SAVANI, AMAN, MD

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C1. 网络提供者名单 专科护理医生

SCHIM, JACK, MD†

Provider ID: N/A

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SCHIM, JACK, MD†

Provider ID: N/A

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SCHIM, JACK, MD†

Provider ID: N/A

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Effective as of 01-FEB-16

WANG, CHUNYANG, MD†

Provider ID: N/A

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

WANG, ANCHI, MD†

Provider ID: N/A

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

WANG, ANCHI, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
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WANG, ANCHI, MD†

Provider ID: N/A

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

WANG, ANCHI, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
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WANG, ANCHI, MD†

Provider ID: N/A

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

WANG, CHUNYANG, MD†

Provider ID: N/A

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WANG, CHUNYANG, MD†

Provider ID: N/A

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

WANG, CHUNYANG, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
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WRIGHT, BRENTON, MD

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YOSHII-CONTRERAS, JUNE, MD†

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NEUROPHYSIOLOGY CLINICAL

PADUGA, REMIA, MD†

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OTOLARYNGOLOGY

ABDOU, RAMI, MD†

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CARLSBAD, CA 92008
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CALZADA, AUDREY, MD†

Provider ID: N/A

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Effective as of 01-OCT-22

CHANG, EDWARD, MD

Provider ID: N/A

2390 FARADAY AVE
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Effective as of 01-SEP-24

CHANG, EDWARD, MD

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CHANG, EDWARD, MD

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DATE, AMIT, MD

Provider ID: N/A

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DONALDSON, CHADWICK, MD†

Provider ID: N/A

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DONALDSON, CHADWICK, MD†

Provider ID: N/A

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GOLDSZTEIN, HERNAN, MD†

Provider ID: N/A

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PAUL, SUPRITI, MD†

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
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SALGADO, MOSES, MD

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TIAN, QING, MD†

Provider ID: N/A

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CARLSBAD, CA 92008
Teleservice
Effective as of 01-JAN-21

TIAN, QING, MD†

Provider ID: N/A

📍 2390 FARADAY AVE
CARLSBAD, CA 92008
Teleservice
Effective as of 01-NOV-21

PHYSICAL MEDICINE / REHABILITATION

CURRY, JASON, MD†

Provider ID: N/A

📍 6121 PASEO DEL NORTE
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-SEP-21

MADHAV, SANDIP, MD†

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JAN-21

TAHAEI, SEYED, MD†

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
STE 110
CARLSBAD, CA 92011

Teleservice

Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

DEVERA, SARAH, PA

Provider ID: N/A

📍 2659 GATEWAY RD STE 106
CARLSBAD, CA 92009
Teleservice
Effective as of 01-APR-24

DRILLING, KATHERINE, PA

Provider ID: N/A

📍 1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009
Effective as of 01-MAR-23

DU, SARAH, PA

Provider ID: N/A

📍 2390 FARADAY AVE
CARLSBAD, CA 92008
Teleservice
Effective as of 01-APR-24

FANNIN, HANA AH, PA

Provider ID: N/A

📍 2659 GATEWAY RD STE 106
CARLSBAD, CA 92009
Effective as of 01-JAN-23

GONZALEZ, NICOLETTE, PA

Provider ID: N/A

📍 1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009
Teleservice
Effective as of 01-JUN-24

HASHAM, SOPHIA, PA

Provider ID: N/A

📍 2659 GATEWAY RD STE 106
CARLSBAD, CA 92009

C1. 网络提供者名单 专科护理医生

Teleservice

Effective as of 01-JUN-24

HERMANSON, KATHLEEN, PA†

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-SEP-22

HERMANSON, KATHLEEN, PA†

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

HUANG, STEPHANIE, PA†

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-OCT-22

HUANG, STEPHANIE, PA†

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

INOCELDA, ANDREW, PA†

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

INOCELDA, ANDREW, PA†

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-SEP-22

JOHNSON, RYAN, PA

Provider ID: N/A

☒ 6121 PASEO DEL NORTE
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JUN-24

MEGALI, NICOLE, PA

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-APR-24

MEGALI, NICOLE, PA

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JAN-24

MORENO, SYDNIE, PA

Provider ID: N/A

☒ 1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009

Effective as of 01-APR-24

POGGI, SARA, PA

Provider ID: N/A

☒ 2390 FARADAY AVE
CARLSBAD, CA 92008

Teleservice

Effective as of 01-APR-24

POLLINGTON, CHRISTOPHER, PA

Provider ID: N/A

☒ 6121 PASEO DEL NORTE
CARLSBAD, CA 92011

Teleservice

Effective as of 01-OCT-23

RAHIM, ARIANNA, PA

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-OCT-23

PSYCHIATRY

CAI, SHEILA, MD†

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011

Effective as of 01-OCT-23

CAI, SHEILA, MD†

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011

Effective as of 01-OCT-23

CAI, SHEILA, MD†

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011

Effective as of 01-OCT-23

CAI, SHEILA, MD†

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011

Effective as of 01-OCT-23

PAULITSCH-BUCKINGHAM, ANDREA, MD†

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011

Effective as of 01-OCT-23

C1. 网络提供者名单 专科护理医生

**PAULITSCH-BUCKINGHAM,
ANDREA, MD[†]**

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

**PAULITSCH-BUCKINGHAM,
ANDREA, MD[†]**

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

**PAULITSCH-BUCKINGHAM,
ANDREA, MD[†]**

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

PSYCHIATRY CHILD

CAI, SHEILA, MD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

CAI, SHEILA, MD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

CAI, SHEILA, MD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115

CARLSBAD, CA 92011
Effective as of 01-OCT-23

CAI, SHEILA, MD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

PSYCHOLOGIST

KAUP, ALLISON, PhD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-24

KAUP, ALLISON, PhD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-NOV-23

KAUP, ALLISON, PhD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-24

KAUP, ALLISON, PhD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-NOV-23

NOEL, NANCY, PhD

Provider ID: N/A

6768 PASEO DEL VIS
CARLSBAD, CA 92009
Effective as of 01-FEB-23

NOEL, NANCY, PhD

Provider ID: N/A

6768 PASEO DEL VIS
CARLSBAD, CA 92009
Effective as of 01-FEB-23

NOEL, NANCY, PhD

Provider ID: N/A

6768 PASEO DEL VIS
CARLSBAD, CA 92009
Effective as of 01-FEB-23

NOEL, NANCY, PhD

Provider ID: N/A

6768 PASEO DEL VIS
CARLSBAD, CA 92009
Effective as of 01-FEB-23

ROSEN, JAY, PhD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

ROSEN, JAY, PhD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

ROSEN, JAY, PhD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

ROSEN, JAY, PhD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

C1. 网络提供者名单 专科护理医生

REGISTERED PHYSICAL THERAPIST

AMBROSE, CHRISTOPHER, PT

Provider ID: N/A

3070 MADISON ST
CARLSBAD, CA 92008
Effective as of 01-JAN-21

DOULL, MATTHEW, PT

Provider ID: N/A

6121 PASEO DEL NORTE
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JUN-23

GARBER, MARC, PT

Provider ID: N/A

6121 PASEO DEL NORTE
CARLSBAD, CA 92011
Teleservice
Effective as of 01-OCT-21

MCGEE, JACQUELINE, PT

Provider ID: N/A

3070 MADISON ST
CARLSBAD, CA 92008
Effective as of 01-JAN-21

TAMAYO, SYDNIE, PT

Provider ID: N/A

6121 PASEO DEL NORTE
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-OCT-23

SLEEP MEDICINE

MADHAV, KINJAL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011
Teleservice
Effective as of 01-JAN-21

MADHAV, KINJAL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-OCT-19

SURGERY NEUROLOGICAL

MURTHY, NIKHIL, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JUL-23

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

DURAN, ANTONIO, MD

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-JUL-23

HOAGLAND, PETER, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Effective as of 01-JAN-21

JASKI, BRIAN, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-JAN-21

ALLERGY IMMUNOLOGY

SHARMA, KUSUM, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-JUN-22

SHARMA, KUSUM, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

ANESTHESIOLOGY

GLASSER, MARGA, MD†

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-OCT-21

GLASSER, MARGA, MD†

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-SEP-21

GLASSER, MARGA, MD†

Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Effective as of 01-SEP-21

MACCHIO, GREGORY, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-JUL-22

ROMERO, KENNETH, MD†
Provider ID: N/A

752 MEDICAL CENTER CT
STE 206
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

VERDOLIN, MICHAEL, MD
Provider ID: N/A

2452 FENTON ST STE 205
CHULA VISTA, CA 91914
Effective as of 01-JAN-21

ANESTHESIOLOGY

CRITICAL CARE MEDICINE

MACCHIO, GREGORY, MD†
Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Effective as of 01-SEP-22

MACCHIO, GREGORY, MD†
Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-SEP-22

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY, MD
Provider ID: N/A

344 F ST STE 203
CHULA VISTA, CA 91910
Effective as of 01-APR-24

DAIRO, BRANDON, MD†
Provider ID: N/A

340 4TH AVE STE 19

CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-22

GLASSER, MARGA, MD†
Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Effective as of 01-JAN-22

LEE, INSUN, MD†
Provider ID: N/A

344 F ST STE 203
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-APR-24

MACCHIO, GREGORY, MD†
Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-DEC-18

NAVARRO, ROSA, MD†
Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Effective as of 01-AUG-17

NAVARRO, ROSA, MD†
Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-SEP-15

NAVARRO, ROSA, MD†
Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-JUL-22

NAVARRO, ROSA, MD†
Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914

Effective as of 01-JAN-14

NAVARRO, ROSA, MD†
Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-SEP-22

NAVARRO, ROSA, MD†
Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Effective as of 01-SEP-22

ROMERO, KENNETH, MD†
Provider ID: N/A

752 MEDICAL CENTER CT
STE 103
CHULA VISTA, CA 91911
Effective as of 01-JUN-19

VERDOLIN, MICHAEL, MD
Provider ID: N/A

2452 FENTON ST STE 205
CHULA VISTA, CA 91914
Effective as of 01-MAR-22

AUDIOLOGIST

JESPERSEN, RHONDA, AuD
Provider ID: N/A

310 3RD AVE STE B21
CHULA VISTA, CA 91910
Effective as of 01-AUG-24

SERENO, EMILY, AuD
Provider ID: N/A

577 THIRD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-24

CARDIAC

ELECTROPHYSIOLOGY

C1. 网络提供者名单 专科护理医生

ATHILL, CHARLES, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914
Effective as of 01-JAN-21

BERMAN, BRETT, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-16

DAWOOD, FARAH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT STE 207
CHULA VISTA, CA 91911
Effective as of 01-DEC-20

LERNER, JONATHAN, MD

Provider ID: N/A

765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

LERNER, JONATHAN, MD

Provider ID: N/A

865 THIRD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

PUGH, MATTHEW, DO†

Provider ID: N/A

765 MEDICAL CENTER CT STE 205
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-SEP-21

PUGH, MATTHEW, DO†

Provider ID: N/A

765 MEDICAL CENTER CT STE 205
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-NOV-21

SHAH, ABHISHEK, MD

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

CARDIOVASCULAR DISEASE

ABELHAD, NADIA, MD

Provider ID: N/A

765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

AIZIN, VITALI, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-MAR-21

AIZIN, VITALI, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-JUN-16

AIZIN, VITALI, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

BERMAN, BRETT, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-FEB-21

CARLSON, STEVEN, MD†

Provider ID: N/A

751 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

CARLSON, STEVEN, MD†

Provider ID: N/A

765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-SEP-22

CARLSON, STEVEN, MD†

Provider ID: N/A

765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-APR-21

CEPIN, DANIEL, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914
Effective as of 01-FEB-21

COX, JUSTIN, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914
Teleservice

C1. 网络提供者名单 专科护理医生

Effective as of 01-SEP-21

COX, JUSTIN, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-MAY-24

DAWOOD, FARAH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

DAWOOD, FARAH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911

Effective as of 01-AUG-21

DO, HULBERT, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-OCT-23

DO, HULBERT, MD

Provider ID: N/A

865 THIRD AVE
STE 133
CHULA VISTA, CA 91911

Effective as of 01-OCT-23

FERNANDEZ, GENARO, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911

Effective as of 01-AUG-21

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-NOV-23

HOURLANI, RAYAN, MD

Provider ID: N/A

890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-FEB-23

KAFRI, HASSAN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910

Effective as of 01-AUG-22

KHAN, HASHIM, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914

Effective as of 01-APR-21

KHARAZI, ALEXANDRA, MD†

Provider ID: N/A

345 F ST STE 200
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

KIM, JAMES, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUN-23

KIM, JAMES, MD†

Provider ID: N/A

754 MEDICAL CENTER CT

STE 101

CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUN-21

LY, NANCY, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Effective as of 01-JUN-21

LY, NANCY, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Effective as of 01-JUN-23

LY, NANCY, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Effective as of 01-NOV-23

MEHTA, HIRSCH, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914

Effective as of 01-JAN-21

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

MONDRAGON, GUSTAVO, MD

Provider ID: N/A

855 THIRD AVE
STE 2230
CHULA VISTA, CA 91911

C1. 网络提供者名单 专科护理医生

Effective as of 01-OCT-23

MONDRAGON, GUSTAVO, MD

Provider ID: N/A

📍 855 THIRD AVE
STE 2230
CHULA VISTA, CA 91911

Effective as of 01-FEB-24

MONDRAGON, GUSTAVO, MD†

Provider ID: N/A

📍 480 4TH AVE STE 500
CHULA VISTA, CA 91910

Effective as of 01-NOV-20

NAGHI, JESSE, MD†

Provider ID: N/A

📍 752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911

Effective as of 01-AUG-21

NARAYANAN, MEENA, MD†

Provider ID: N/A

📍 765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-APR-21

NARAYANAN, MEENA, MD†

Provider ID: N/A

📍 765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

NISHIMURA-KAMINSKI,

MARIN, MD

Provider ID: N/A

📍 890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-MAR-23

OMRAN, JAD, MD

Provider ID: N/A

📍 890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-FEB-23

OVIDO-LINARES, RAUL, MD†

Provider ID: N/A

📍 754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Effective as of 01-JUN-21

OVIDO-LINARES, RAUL, MD†

Provider ID: N/A

📍 754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Effective as of 01-JUN-23

PARIKH, MILIND, DO†

Provider ID: N/A

📍 765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

PARIKH, MILIND, DO†

Provider ID: N/A

📍 765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

PARIZO, JUSTIN, MD†

Provider ID: N/A

📍 890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-SEP-21

PONCE, SONIA, MD†

Provider ID: N/A

📍 340 4TH AVE STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-21

PONCE, SONIA, MD†

Provider ID: N/A

📍 340 4TH AVE STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-24

PONCE, SONIA, MD†

Provider ID: N/A

📍 340 4TH AVE STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-APR-21

PONCE, SONIA, MD†

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

PONCE, SONIA, MD†

Provider ID: N/A

📍 480 4TH AVE STE 401
CHULA VISTA, CA 91910

Effective as of 01-AUG-20

ROUGH, STEVEN, MD

Provider ID: N/A

📍 754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-AUG-23

SARSAM, LUAY, MD

Provider ID: N/A

📍 765 MEDICAL CENTER CT
STE 211

C1. 网络提供者名单 专科护理医生

CHULA VISTA, CA 91911
Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911
Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911

Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911

Effective as of 01-JUL-23

SHAH, KULIN, MD†

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911

Effective as of 01-JAN-23

SHAH, KULIN, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911
Effective as of 01-JAN-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SHARF, ALBERT, MD

Provider ID: N/A

1310 3RD AVE STE B4

CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SHEREV, DIMITRI, MD

Provider ID: N/A

340 FOURTH AVE
STE 4

CHULA VISTA, CA 91910
Effective as of 01-SEP-23

SHEREV, DIMITRI, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207

CHULA VISTA, CA 91911
Effective as of 01-AUG-21

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911
Effective as of 01-JAN-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911

Effective as of 01-JAN-23

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911
Effective as of 01-JAN-23

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911
Effective as of 01-JUN-21

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911
Effective as of 01-JUN-23

YAU, STEPHEN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-23

YAU, STEPHEN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-AUG-22

ZAVARO, SUHAIL, MD

Provider ID: N/A

890 EASTLAKE PKWY STE
205

CHULA VISTA, CA 91914
Teleservice

Effective as of 01-FEB-23

CERTIFIED

ACUPUNCTURIST

LAM, KHANH, LAC†

Provider ID: N/A

340 4TH AVE STE 19
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-SEP-21

WILCOX, WENONAH, LAC†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

C1. 网络提供者名单 专科护理医生

CERTIFIED NURSE PRACTITIONER

ARMSTON, LINDSEY, NPF

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-AUG-24

BRACEY-ASIEDU, ALEKSANDRYA, NP

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-AUG-24

BRACEY-ASIEDU, ALEKSANDRYA, NP

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910*
Effective as of 01-OCT-24

BRAYTENBAH, MELANIE, NP†

Provider ID: N/A

📍 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JAN-21

BRAYTENBAH, MELANIE, NP†

Provider ID: N/A

📍 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-SEP-22

BURKE, ALICIA, NP

Provider ID: N/A

📍 765 3RD AVE STE 100
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-DEC-22

CARRION GELABERT, ANA, NPF

Provider ID: N/A

📍 450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

CORREA, CARINA, NP

Provider ID: N/A

📍 299 J ST
CHULA VISTA, CA 91910
Effective as of 01-AUG-22

IBARRA, MARTHA, NP

Provider ID: N/A

📍 855 THIRD AVE
STE 2220
CHULA VISTA, CA 91911
Effective as of 01-JUL-24

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

📍 429 BROADWAY
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-21

KANTAS, PARIS, NP†

Provider ID: N/A

📍 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-AUG-22

KELLER, YESENIA, NP

Provider ID: N/A

📍 340 FOURTH AVE
STE 11
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-FEB-24

KELLER, YESENIA, NP

Provider ID: N/A

📍 340 FOURTH AVE
STE 11
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-23

MAGANDA, JESSICA, NP

Provider ID: N/A

📍 340 FOURTH AVE
STE 11
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAY-24

MAGANDA, JESSICA, NP

Provider ID: N/A

📍 340 FOURTH AVE
STE 11
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-APR-24

OLESCO, JENNIFER, NP†

Provider ID: N/A

📍 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-NOV-22

PANTOJA, DANICA-ELLA, NP

Provider ID: N/A

📍 340 FOURTH AVE
STE 9
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

RADMAN, MIRKA, NP†

Provider ID: N/A

📍 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-AUG-24

C1. 网络提供者名单 专科护理医生

ROSS, CRYSTAL, NP†

Provider ID: N/A

📍 678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-24

ROSS, CRYSTAL, NP†

Provider ID: N/A

📍 678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAY-21

SHAKYA, KELLY, NPF

Provider ID: N/A

📍 752 MEDICAL CENTER CT
STE 200
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUN-24

SHAW, MARILYNN, NP

Provider ID: N/A

📍 890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Effective as of 01-MAR-23

SICKLES, MAGGIE, NP

Provider ID: N/A

📍 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-DEC-21

SPAULDING, ENJOLI, NP†

Provider ID: N/A

📍 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

TOMICICH, STEPHANIE, NP

Provider ID: N/A

📍 752 MEDICAL CENTER CT

STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

VAZQUEZ-ERLBECK, MARTHA, NP

Provider ID: N/A

📍 880 THIRD AVE
STE A
CHULA VISTA, CA 91911
Effective as of 01-MAY-24

YALDO, ATHMAR, NP†

Provider ID: N/A

📍 429 BROADWAY
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-21

CHIROPRACTOR

WENDEL, TREVOR, DC

Provider ID: N/A

📍 535 H ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

DERMATOLOGY

ANGRA, KUNAL, MD†

Provider ID: N/A

📍 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-22

MCKESEY, JACQUELINE, MD

Provider ID: N/A

📍 256 LANDIS AVE FL 3
CHULA VISTA, CA 91910
Effective as of 01-FEB-23

RULLAN, JENNIFER, MD†

Provider ID: N/A

📍 256 LANDIS AVE STE 300

CHULA VISTA, CA 91910
Effective as of 01-MAR-14

RULLAN, PETER, MD†

Provider ID: N/A

📍 256 LANDIS AVE STE 300
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

STEIN, ALEXANDER, MD†

Provider ID: N/A

📍 340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

STEIN, ALEXANDER, MD†

Provider ID: N/A

📍 340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

STEIN, ALEXANDER, MD†

Provider ID: N/A

📍 340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

TOMPKINS, STACY, MD†

Provider ID: N/A

📍 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-AUG-22

TOMPKINS, STACY, MD†

Provider ID: N/A

📍 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-22

TOMPKINS, STACY, MD†

Provider ID: N/A

📍 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914

C1. 网络提供者名单 专科护理医生

Teleservice

Effective as of 01-DEC-22

TOMPKINS, STACY, MD†

Provider ID: N/A

📄 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-NOV-23

ZALESKI-LARSEN, LISA, DO

Provider ID: N/A

📄 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-NOV-23

ZALESKI-LARSEN, LISA, DO

Provider ID: N/A

📄 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-JAN-24

ZALESKI-LARSEN, LISA, DO

Provider ID: N/A

📄 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-MAY-23

EMERGENCY MEDICINE

AZAM, ARSALAN, MD

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-FEB-24

BRODAK, DANIKA, MD

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-FEB-24

BROWN, MITCHELL, MD

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-AUG-24

CORTES, JAMES, MD

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-AUG-24

DILLMAN, ARIANA, MD†

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

DILLMAN, ARIANA, MD†

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

EINSTEIN, ERIC, MD†

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

EINSTEIN, ERIC, MD†

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

FAIQ, NADIA, MD

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-AUG-24

FRENCH, TONIANNE, MD†

Provider ID: N/A

📄 333 H ST STE 2080

CHULA VISTA, CA 91910

Effective as of 01-JAN-21

FRENCH, TONIANNE, MD†

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

GALASSO, MADISON, MD†

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

GALASSO, MADISON, MD†

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

GRIESINGER, MICHAEL, MD†

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

GRIESINGER, MICHAEL, MD†

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

HARE, MARC, MD†

Provider ID: N/A

📄 1111 BROADWAY STE 305
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-APR-23

HARE, MARC, MD†

Provider ID: N/A

📄 1111 BROADWAY STE 305
CHULA VISTA, CA 91911


Teleservice

C1. 网络提供者名单 专科护理医生

Effective as of 01-MAR-24


HARRELL-BRUDER, BEVERLY, MD[†]

Provider ID: N/A

 333 H ST STE 280
CHULA VISTA, CA 91910
Effective as of 01-MAY-24


HARRELL-BRUDER, BEVERLY, MD[†]

Provider ID: N/A

 333 H ST STE 280
CHULA VISTA, CA 91910
Effective as of 01-FEB-21


JOURDAIN, VICTOR, MD[†]

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22


JOURDAIN, VICTOR, MD[†]

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-FEB-21


MARMON, JULIE, MD

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-AUG-24


MCMILLAN, MONICA, MD[†]

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22


NARDI, SEAN, DO[†]

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-DEC-21


PORTILLO, TANIA, MD[†]

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22


QUENZER, FAITH, DO[†]

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22


QUENZER, FAITH, DO[†]

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


REARDON, JACQUELINE, DO[†]

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


REARDON, JACQUELINE, DO[†]

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22


ROXAS, ROGER, MD[†]

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22


ROXAS, ROGER, MD[†]

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


SBIROLI, EMILY, MD[†]

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-AUG-21


SBIROLI, EMILY, MD[†]

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22


TOVAR, JUAN, MD[†]

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


TRESENITTER, MEGAN, MD[†]

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-AUG-21


TRESENITTER, MEGAN, MD[†]

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22


WHITLEY, NICHOLAS, MD[†]

Provider ID: N/A

 678 3RD AVE
CHULA VISTA, CA 91910^{*}
Effective as of 01-AUG-18

YAU, STEPHEN, MD[†]

Provider ID: N/A

 429 BROADWAY
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-APR-23

***ENDOCRINOLOGY
METABOLISM DIABETES***

ARGOUD, GEORGES, MD[†]

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

☐ 340 4TH AVE STE 7A
CHULA VISTA, CA 91910
Effective as of 01-SEP-20

ARGOUD, GEORGES, MD†

Provider ID: N/A

☐ 340 4TH AVE STE 7A
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

ARGOUD, GEORGES, MD†

Provider ID: N/A

☐ 340 4TH AVE STE 7A
CHULA VISTA, CA 91910
Effective as of 01-JUN-19

ARGOUD, GEORGES, MD†

Provider ID: N/A

☐ 340 4TH AVE STE 7A
CHULA VISTA, CA 91910*
Effective as of 01-JAN-21

ARGOUD, GEORGES, MD†

Provider ID: N/A

☐ 340 4TH AVE STE 7A
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

ARGOUD, GEORGES, MD†

Provider ID: N/A

☐ 340 4TH AVE STE 7A
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

CARRILLO, MARITZA, MD†

Provider ID: N/A

☐ 678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-22

CARRILLO, MARITZA, MD†

Provider ID: N/A

☐ 678 3RD AVE

CHULA VISTA, CA 91910
Teleservice

Effective as of 01-JUL-22

ROGERS, MEGAN, MD†

Provider ID: N/A

☐ 480 4TH AVE STE 202A
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

ROGERS, MEGAN, MD†

Provider ID: N/A

☐ 480 4TH AVE STE 202A
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

ROGERS, MEGAN, MD†

Provider ID: N/A

☐ 480 4TH AVE STE 202A
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-22

VINCENT, LAUREN, MD†

Provider ID: N/A

☐ 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

VINCENT, LAUREN, MD†

Provider ID: N/A

☐ 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

FAMILY PRACTICE

DILLON, MAYRA, MD

Provider ID: N/A

☐ 880 THIRD AVE
A
CHULA VISTA, CA 91911

Effective as of 01-JUL-24

RODRIGUEZ, NATALIE, MD

Provider ID: N/A

☐ 480 PALOMAR ST
CHULA VISTA, CA 91911*
Effective as of 01-NOV-23

ROJAS, SARAH, MD

Provider ID: N/A

☐ 678 THIRD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-24

SHAFT, ALEXANDER, MD†

Provider ID: N/A

☐ 303 H ST STE 103
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-22

SHAFT, ALEXANDER, MD†

Provider ID: N/A

☐ 303 H ST STE 103
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-FEB-23

SPAK, DARYL, MD

Provider ID: N/A

☐ 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-SEP-24

GASTROENTEROLOGY

ALAYO, ERICK, MD†

Provider ID: N/A

☐ 400 E ST
CHULA VISTA, CA 91910
Effective as of 01-OCT-21

ALAYO, ERICK, MD†

Provider ID: N/A

☐ 400 E ST

C1. 网络提供者名单 专科护理医生

CHULA VISTA, CA 91910
Effective as of 01-OCT-21

ALAYO, ERICK, MD†

Provider ID: N/A

☒ 400 E ST
CHULA VISTA, CA 91910
Effective as of 01-OCT-21

BAIG, NABIL, DO†

Provider ID: N/A

☒ 303 H ST STE 103
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-OCT-22

DESTA, TADDESE, MD

Provider ID: N/A

☒ 296 H ST STE 301
CHULA VISTA, CA 91910
Effective as of 01-JAN-23

DUQUE, JOHN, MD†

Provider ID: N/A

☒ 480 4TH AVE STE 316
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

DUQUE, JOHN, MD†

Provider ID: N/A

☒ 480 4TH AVE STE 316
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

DUQUE, JOHN, MD†

Provider ID: N/A

☒ 480 4TH AVE STE 316
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

DUQUE, JOHN, MD†

Provider ID: N/A

☒ 480 4TH AVE STE 316
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

HASSANEIN, TAREK, MD†

Provider ID: N/A

☒ 303 H ST STE 103
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-21

HASSANEIN, TAREK, MD†

Provider ID: N/A

☒ 303 H ST STE 103
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-22

HASSANEIN, TAREK, MD†

Provider ID: N/A

☒ 303 H ST STE 103
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAY-21

HASSANEIN, TAREK, MD†

Provider ID: N/A

☒ 256 LANDIS AVE STE 202
CHULA VISTA, CA 91910
Effective as of 01-MAR-18

HASSANEIN, TAREK, MD†

Provider ID: N/A

☒ 256 LANDIS AVE STE 204
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

HASSANEIN, TAREK, MD†

Provider ID: N/A

☒ 256 LANDIS AVE STE 202
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

HASSANEIN, TAREK, MD†

Provider ID: N/A

☒ 1323 3RD AVE
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

KORN, ERROL, MD

Provider ID: N/A

☒ 769 MEDICAL CENTER CT
STE 303
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

KORN, ERROL, MD

Provider ID: N/A

☒ 769 MEDICAL CENTER CT
STE 303
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

NOVO, MEGAN, MD

Provider ID: N/A

☒ 296 H ST STE 301
CHULA VISTA, CA 91910
Effective as of 01-AUG-24

SWEET, PATRICK, MD†

Provider ID: N/A

☒ 353 CHURCH AVE STE A
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAY-22

THOMAS, CARLTON, MD†

Provider ID: N/A

☒ 296 H ST
CHULA VISTA, CA 91910
Effective as of 01-APR-21

WIENER, GREGORY, MD†

Provider ID: N/A

☒ 353 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

WIENER, GREGORY, MD†

Provider ID: N/A

☒ 353 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

C1. 网络提供者名单 专科护理医生

WIENER, GREGORY, MD†

Provider ID: N/A

📍 353 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

WIENER, GREGORY, MD†

Provider ID: N/A

📍 353 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

WIENER, GREGORY, MD†

Provider ID: N/A

📍 353 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-AUG-20

WIENER, GREGORY, MD†

Provider ID: N/A

📍 353 CHURCH AVE STE A
CHULA VISTA, CA 91910*
Effective as of 01-SEP-15

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE, MA†

Provider ID: N/A

📍 310 3RD AVE STE B21/C11
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

ANDERSON, ELAINE, MA†

Provider ID: N/A

📍 310 3RD AVE STE C11
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

DAVIS, KELLE, MA†

Provider ID: N/A

📍 310 3RD AVE STE C11
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

GALLAGHER, JEFFERY, MA

Provider ID: N/A

📍 577 THIRD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-24

HEMATOLOGY / ONCOLOGY

ANDREY, JEFFREY, MD†

Provider ID: N/A

📍 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

BASERI, BABAK, MD†

Provider ID: N/A

📍 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-MAY-24

BASERI, BABAK, MD†

Provider ID: N/A

📍 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

BASERI, BABAK, MD†

Provider ID: N/A

📍 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-FEB-24

BASERI, BABAK, MD†

Provider ID: N/A

📍 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-DEC-23

ITURBE-ALESSIO, IGNACIO, MD†

Provider ID: N/A

📍 855 3RD AVE STE 3330
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-FEB-22

JOHNSON, KENNETH, MD†

Provider ID: N/A

📍 769 MEDICAL CENTER CT
STE 202
CHULA VISTA, CA 91911
Effective as of 01-MAY-15

MOOLANI, RAMESH, MD†

Provider ID: N/A

📍 855 3RD AVE STE 3330
CHULA VISTA, CA 91911
Effective as of 01-FEB-22

MOOLANI, RAMESH, MD†

Provider ID: N/A

📍 855 3RD AVE STE 3330
CHULA VISTA, CA 91911
Effective as of 01-APR-23

NORTON, MARILYN, MD†

Provider ID: N/A

📍 769 MEDICAL CENTER CT
STE 202
CHULA VISTA, CA 91911
Effective as of 01-MAY-15

NORTON, MARILYN, MD†

Provider ID: N/A

📍 769 MEDICAL CENTER CT
STE 202
CHULA VISTA, CA 91911
Effective as of 01-FEB-22

QUIROZ, ELISA, MD†

Provider ID: N/A

📍 678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-OCT-21

C1. 网络提供者名单 专科护理医生

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

☒ 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

☒ 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

☒ 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-MAY-22

HEPATOLOGY

HASSANEIN, TAREK, MD†

Provider ID: N/A

☒ 303 H ST STE 103
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-24

HASSANEIN, TAREK, MD

Provider ID: N/A

☒ 2436 FENTON ST STE
100-B
CHULA VISTA, CA 91914
Effective as of 01-SEP-24

INTERNAL MEDICINE

BALDERAS-MAGALLANES, RODOLFO, MD

Provider ID: N/A

☒ 678 THIRD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-APR-24

CHITKARA, PUJA, MD†

Provider ID: N/A

☒ 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

HILES, DANIEL, MD

Provider ID: N/A

☒ 880 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-24

JAIN, SUPRABHA, MD

Provider ID: N/A

☒ 765 3RD AVE STE 10
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-OCT-22

LIRA, JOSE, MD†

Provider ID: N/A

☒ 841 KUHN DR STE 200
CHULA VISTA, CA 91914
Effective as of 01-NOV-23

LIRA, JOSE, MD†

Provider ID: N/A

☒ 841 KUHN DR STE 200
CHULA VISTA, CA 91914
Effective as of 01-JAN-24

LIU, ANDREW, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-SEP-23

MEYER, JILL, MD†

Provider ID: N/A

☒ 340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-MAY-24

MEYER, JILL, MD†

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-MAY-24

MEYER, JILL, MD†

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

MOOLANI, UJJALA, MD

Provider ID: N/A

☒ 340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-MAY-23

MOOLANI, UJJALA, MD†

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

NARAYANAN, MEENA, MD†

Provider ID: N/A

☒ 765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911*
Effective as of 01-JAN-21

NARULA, ARVIN, MD†

Provider ID: N/A

☒ 890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Effective as of 01-JAN-21

OLIVER, DEANNA, MD†

Provider ID: N/A

☒ 303 H ST STE 103
CHULA VISTA, CA 91910
Effective as of 01-MAY-21

C1. 网络提供者名单

专科护理医生

OLIVER, DEANNA, MD†

Provider ID: N/A

303 H ST STE 103
CHULA VISTA, CA 91910*
Effective as of 01-OCT-22

PATEL, AMAR, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-23

PONCE, SONIA, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

REDDY, SMITHA, MD†

Provider ID: N/A

272 CHURCH AVE STE 1
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-OCT-21

INTERVENTIONAL CARDIOLOGY

AIZIN, VITALI, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-FEB-16

BARVALIA, MIHIR, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207

CHULA VISTA, CA 91911
Effective as of 01-NOV-22

BERMAN, BRETT, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-16

BERMAN, BRETT, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

BERMAN, BRETT, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

CEPIN, DANIEL, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Effective as of 01-DEC-22

FERNANDEZ, GENARO, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-MAR-23

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Effective as of 01-JAN-21

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Effective as of 01-JUN-21

JOHN, ALAN, MD

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

JOHN, ALAN, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

KAFRI, HASSAN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-AUG-20

KAFRI, HASSAN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-APR-21

KAFRI, HASSAN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

KAFRI, HASSAN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

KIM, JAMES, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911*

Teleservice

Effective as of 01-OCT-24

LY, NANCY, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Effective as of 01-JUN-24

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-JAN-21

MONDRAGON, GUSTAVO, MD†

Provider ID: N/A

480 4TH AVE STE 500
CHULA VISTA, CA 91910*

Effective as of 01-JAN-21

NAGHI, JESSE, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911

Effective as of 01-JAN-21

OVIEDO-LINARES, RAUL, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Effective as of 01-OCT-23

OVIEDO-LINARES, RAUL, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911

Effective as of 01-FEB-24

PONCE, SONIA, MD†

Provider ID: N/A

340 4TH AVE STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-SEP-22

PONCE, SONIA, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

PONCE, SONIA, MD†

Provider ID: N/A

340 4TH AVE STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUL-21

ROUGH, STEVEN, MD

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-NOV-23

ROUGH, STEVEN, MD

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-OCT-23

ROUGH, STEVEN, MD

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JAN-24

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911

Effective as of 01-MAY-23

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911

Effective as of 01-DEC-22

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-MAY-23

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-DEC-22

SHAH, KULIN, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-APR-23

SHEREV, DIMITRI, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911

Effective as of 01-OCT-19

SHEREV, DIMITRI, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SHETABI, KAMBIZ, MD

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-APR-24

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-APR-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-APR-23

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

750 MEDICAL CENTER CT
STE 3
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

MARRIAGE FAMILY THERAPIST

CAMARGO, SANDRA, MFT

Provider ID: N/A

880 3RD AVE STE A

CHULA VISTA, CA 91911
Effective as of 01-APR-24

CASTELLANOS, GRACIELA, MFT†

Provider ID: N/A

1061 TIERRA DEL REY STE
303
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-21

CASTELLANOS, GRACIELA, MFT†

Provider ID: N/A

1061 TIERRA DEL REY STE
304
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-21

CASTELLANOS, GRACIELA, MFT†

Provider ID: N/A

1061 TIERRA DEL REY STE
305
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-21

SHIELDS, SEBASTIAN, MFT

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUN-23

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-MAY-23

FERNANDEZ, RODRIGO, MD†

Provider ID: N/A

450 4TH AVE STE 201
CHULA VISTA, CA 91910
Effective as of 01-MAY-21

HOREISH, ADAM, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

HOREISH, ADAM, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-15

HOREISH, ADAM, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-AUG-15

HOREISH, ADAM, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

HOREISH, ADAM, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

KAYAL, ANAS, MD†

Provider ID: N/A

296 H ST STE 304
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

KHAING, KATHY, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-APR-19

KHAING, KATHY, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

KHAING, KATHY, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

KHAING, KATHY, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A

340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-SEP-20

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

LOZADA-PASTORIO,

ELIZABETH, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-15

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-NOV-16

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

MEYER, JILL, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

MEYER, JILL, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

MEYER, JILL, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-AUG-14

MEYER, JILL, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

MEYER, JILL, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

MEYER, JILL, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

MEYER, JILL, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-SEP-20

MOOLANI, UJJALA, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

C1. 网络提供者名单 专科护理医生

MOOLANI, UJJALA, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-FEB-23

MOOLANI, UJJALA, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-NOV-22

PATEL, AMAR, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

PATEL, AMAR, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-24

PATEL, AMAR, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-FEB-20

PHAM, JENNIFER, MD

Provider ID: N/A

340 FOURTH AVE
STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-23

PHAM, JENNIFER, MD

Provider ID: N/A

340 FOURTH AVE
STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-24

PHAM, JENNIFER, MD

Provider ID: N/A

340 FOURTH AVE
STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAY-24

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-APR-17

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SOLTERO, RICARDO, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

VIDEEN, JOHN, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-SEP-20

VIDEEN, JOHN, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

VIDEEN, JOHN, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

VIDEEN, JOHN, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

VIDEEN, JOHN, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

VIDEEN, JOHN, MD†

Provider ID: N/A

786 3RD AVE STE B

C1. 网络提供者名单 专科护理医生

CHULA VISTA, CA 91910
Effective as of 01-JAN-21

YUAN, HENRY, MD†

Provider ID: N/A

📍 340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

NEUROLOGY

BINDAL, ANKUR, MD†

Provider ID: N/A

📍 765 3RD AVE STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

FARHIDVASH, FARIBA, MD†

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JUL-24

FARHIDVASH, FARIBA, MD†

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-SEP-24

FARHIDVASH, FARIBA, MD†

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-AUG-22

FARHIDVASH, FARIBA, MD†

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-DEC-22

GRATIANNE, ROBERTO, MD†

Provider ID: N/A

📍 450 4TH AVE STE 215

CHULA VISTA, CA 91910
Effective as of 01-JAN-22

GRATIANNE, ROBERTO, MD†

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-MAY-22

GUPTA, MONIKA, MD†

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JUN-22

GUPTA, MONIKA, MD†

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JUL-24

GUPTA, MONIKA, MD†

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

HOSSEINZADEHMALEKI, ANA, MD

Provider ID: N/A

📍 450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

HOSSEINZADEHMALEKI, ANA, MD

Provider ID: N/A

📍 450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

HUISA-GARATE, BRANKO, MD†

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-MAR-24

HUISA-GARATE, BRANKO, MD†

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

HUISA-GARATE, BRANKO, MD†

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-FEB-21

MANDEVILLE, ROSS, MD

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-SEP-24

MAREK, MAKSYM, MD

Provider ID: N/A

📍 450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAY-24

MAREK, MAKSYM, MD

Provider ID: N/A

📍 450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-FEB-24

MAREK, MAKSYM, MD

Provider ID: N/A

📍 450 FOURTH AVE
STE 215

C1. 网络提供者名单 专科护理医生

CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

MAREK, MAKSYM, MD

Provider ID: N/A
450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAY-24

MAREK, MAKSYM, MD

Provider ID: N/A
450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-OCT-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A
450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A
450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAY-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A
450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-23

MOHAMMAD, AHMADSHAH, MD†

Provider ID: N/A
750 MEDICAL CENTER CT
STE 6
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

MOHAMMAD, AHMADSHAH, MD†

Provider ID: N/A
750 MEDICAL CENTER CT
STE 6
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

OLENSKI, KLARI, DO†

Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JUN-22

OLENSKI, KLARI, DO†

Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-MAY-24

PHAM, JENNIFER, MD

Provider ID: N/A
340 FOURTH AVE
STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

PHAM, ALISE, DO

Provider ID: N/A
450 FOURTH AVE STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUN-24

PHAM, ALISE, DO

Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-24

PHAM, ALISE, DO

Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-24

SILVER, BRENT, MD†

Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-DEC-22

SILVER, BRENT, MD†

Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

SILVER, BRENT, MD†

Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-SEP-24

SORIALOPEZ, JOSE, MD†

Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-MAR-21

SORIALOPEZ, JOSE, MD†

Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-SEP-21

NEUROLOGY CHILD

C1. 网络提供者名单 专科护理医生

OLENSKI, KLARI, DO[†]

Provider ID: N/A

☒ 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-MAY-22

OBSTETRICS / GYNECOLOGY

ANGUIANO, FRANCISCO, MD[†]

Provider ID: N/A

☒ 765 MEDICAL CENTER CT
STE 209
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

ATIGA, SCHUBERT, MD[†]

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911
Effective as of 01-AUG-20

ATIGA, SCHUBERT, MD[†]

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

ATIGA, SCHUBERT, MD[†]

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

ATIGA, SCHUBERT, MD[†]

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

CHAC, RICK, MD[†]

Provider ID: N/A

☒ 660 OLD TELEGRAPH
CANYON RD
CHULA VISTA, CA 91910
Effective as of 01-SEP-20

CHAC, RICK, MD[†]

Provider ID: N/A

☒ 660 OLD TELEGRAPH
CANYON RD
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

CHAC, RICK, MD[†]

Provider ID: N/A

☒ 660 OLD TELEGRAPH
CANYON RD
CHULA VISTA, CA 91910
Effective as of 01-AUG-20

CHAC, RICK, MD[†]

Provider ID: N/A

☒ 660 OLD TELEGRAPH
CANYON RD
CHULA VISTA, CA 91910
Effective as of 01-SEP-16

MENDEZ, DIEGO, MD[†]

Provider ID: N/A

☒ 678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-21

SHORT, ABIADE, MD[†]

Provider ID: N/A

☒ 678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-22

OCCUPATIONAL THERAPIST

CUA, NICOLE, OT

Provider ID: N/A

☒ 88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-MAR-24

CUA, NICOLE, OT

Provider ID: N/A

☒ 88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-APR-24

HUGHES, ELISA, OT[†]

Provider ID: N/A

☒ 880 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUN-22

LOPEZ, ALYSSA-NICOLE, OT

Provider ID: N/A

☒ 88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-DEC-23

LOPEZ, ALYSSA-NICOLE, OT

Provider ID: N/A

☒ 88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-OCT-23

MORRIS, SHEILA, OT[†]

Provider ID: N/A

☒ 1020 TIERRA DEL REY STE
A-1
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

PORTER, EILEEN, OT

Provider ID: N/A

☒ 88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

PORTER, EILEEN, OT

Provider ID: N/A

☒ 88 E BONITA RD STE C

C1. 网络提供者名单 专科护理医生

CHULA VISTA, CA 91910
Effective as of 01-JAN-22

OPHTHALMOLOGY

ABDALLAH, WALID, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-APR-24

BRYANT, DUANE, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-OCT-19

BRYANT, DUANE, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUN-19

BRYANT, DUANE, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

BRYANT, DUANE, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

CARRABY, ARNETT, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-AUG-20

CARRABY, ARNETT, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

CARRABY, ARNETT, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

COCKERHAM, KIMBERLY, MD

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Effective as of 01-DEC-23

DELENGOCKY, TAYSON, DO†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

DELENGOCKY, TAYSON, DO†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

GOLDMAN, DAVID, MD

Provider ID: N/A

311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-24

GOMEZ, JESSICA, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUN-24

MANI, MAJID, MD†

Provider ID: N/A

835 3RD AVE STE A

CHULA VISTA, CA 91911
Effective as of 01-JUL-22

MANI, MAJID, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

MASLIN, JESSICA, MD

Provider ID: N/A

311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-AUG-24

MASLIN, JESSICA, MD

Provider ID: N/A

311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-FEB-23

MASLIN, JESSICA, MD

Provider ID: N/A

311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-FEB-23

MASLIN, JESSICA, MD

Provider ID: N/A

311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-FEB-23

MASLIN, JESSICA, MD

Provider ID: N/A

480 FOURTH AVE
STE 201
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

MCDONNELL, EMMA, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

C1. 网络提供者名单 专科护理医生

MCDONNELL, EMMA, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-APR-23

PAPASTERGIOU, GEORGIOS, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

PAPASTERGIOU, GEORGIOS, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

PAPASTERGIOU, GEORGIOS, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

PEAIRS, JAMES, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

PEAIRS, JAMES, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-AUG-20

PONS, MAURICIO, MD†

Provider ID: N/A

835 3RD AVE STE A

CHULA VISTA, CA 91911
Effective as of 01-AUG-22

PONS, MAURICIO, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

PONS, MAURICIO, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

PONS, MAURICIO, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

RAJSBAUM, MARTIN, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

RAJSBAUM, MARTIN, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SASSANI, PATRICK, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-MAR-23

SASSANI, PATRICK, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SASSANI, PATRICK, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-APR-24

SCHER, BARRY, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SCHER, BARRY, MD†

Provider ID: N/A

480 4TH AVE STE 201
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

SCHER, BARRY, MD†

Provider ID: N/A

480 4TH AVE STE 201
CHULA VISTA, CA 91910
Effective as of 01-MAR-19

SCHER, BARRY, MD

Provider ID: N/A

311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-23

SKAF, AYHAM, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

SKAF, AYHAM, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SKAF, AYHAM, MD†

Provider ID: N/A

835 3RD AVE STE A

C1. 网络提供者名单 专科护理医生

CHULA VISTA, CA 91911
Effective as of 01-JUL-22

SKAF, AYHAM, MD†

Provider ID: N/A
☐ 835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

STAINER, GREGORY, MD†

Provider ID: N/A
☐ 835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

ZABANEH, ALEXANDER, MD†

Provider ID: N/A
☐ 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

ZABANEH, ALEXANDER, MD†

Provider ID: N/A
☐ 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-NOV-20

ZABANEH, ALEXANDER, MD†

Provider ID: N/A
☐ 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

ZABANEH, ALEXANDER, MD†

Provider ID: N/A
☐ 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

ZABANEH, ALEXANDER, MD†

Provider ID: N/A
☐ 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-JUL-20

OPTOMETRIST

CHAIN, PEI CHI, OD

Provider ID: N/A
☐ 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-APR-23

EL-MOGHRABI, ROULA, OD†

Provider ID: N/A
☐ 835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

EL-MOGHRABI, NANCY, OD†

Provider ID: N/A
☐ 835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

KOO, ANITA, OD

Provider ID: N/A
☐ 835 THIRD AVE
STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

KOO, ANITA, OD

Provider ID: N/A
☐ 835 THIRD AVE
STE A
CHULA VISTA, CA 91911
Effective as of 01-FEB-24

KOO, ANITA, OD

Provider ID: N/A
☐ 835 THIRD AVE
STE A
CHULA VISTA, CA 91911
Effective as of 01-JUN-24

KOO, ANITA, OD

Provider ID: N/A
☐ 678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-MAY-24

KOO, ANITA, OD

Provider ID: N/A
☐ 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-FEB-24

MASCARENO, EFRAIN, OD†

Provider ID: N/A
☐ 440 4TH AVE STE 9
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

MASCARENO, EFRAIN, OD†

Provider ID: N/A
☐ 440 4TH AVE STE 9
CHULA VISTA, CA 91910*
Effective as of 01-SEP-22

MASCARENO, EFRAIN, OD†

Provider ID: N/A
☐ 2260 OTAY LAKES RD STE
111
CHULA VISTA, CA 91915*
Effective as of 01-SEP-22

MASCARENO, EFRAIN, OD†

Provider ID: N/A
☐ 2260 OTAY LAKES RD STE
111
CHULA VISTA, CA 91915
Effective as of 01-JAN-21

NGUYEN, THU, OD†

Provider ID: N/A
☐ 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

NGUYEN, THU, OD†

Provider ID: N/A
☐ 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

C1. 网络提供者名单 专科护理医生

SCOVILL, ALEXANDRA, OD†

Provider ID: N/A

☐ 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SCOVILL, ALEXANDRA, OD†

Provider ID: N/A

☐ 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-APR-23

THACH, QUEEN, OD

Provider ID: N/A

☐ 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-SEP-24

THACH, QUEEN, OD

Provider ID: N/A

☐ 835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-24

OTOLARYNGOLOGY

ABDOU, RAMI, MD†

Provider ID: N/A

☐ 577 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-AUG-22

BANTHIA, VISHAL, MD†

Provider ID: N/A

☐ 577 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-21

BANTHIA, VISHAL, MD†

Provider ID: N/A

☐ 577 3RD AVE
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-JAN-22

BANTHIA, VISHAL, MD†

Provider ID: N/A

☐ 577 3RD AVE
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-SEP-21

CALZADA, AUDREY, MD†

Provider ID: N/A

☐ 577 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-OCT-22

CHANG, EDWARD, MD

Provider ID: N/A

☐ 577 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUN-24

CHANG, EDWARD, MD

Provider ID: N/A

☐ 577 THIRD AVE,
CHULA VISTA, CA 91910
Effective as of 01-MAR-24

CHANG, EDWARD, MD

Provider ID: N/A

☐ 577 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-AUG-24

CHANG, EDWARD, MD

Provider ID: N/A

☐ 577 THIRD AVE,
CHULA VISTA, CA 91910
Effective as of 01-SEP-24

JIMENEZ, CARLOS, MD†

Provider ID: N/A

☐ 321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-OCT-20

JIMENEZ, CARLOS, MD†

Provider ID: N/A

☐ 321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-OCT-20

MEHTA, RITVIK, MD†

Provider ID: N/A

☐ 577 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

MOSHTAGHI, OMID, MD

Provider ID: N/A

☐ 765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

MOSHTAGHI, OMID, MD

Provider ID: N/A

☐ 2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913
Effective as of 01-JUL-24

MOSHTAGHI, OMID, MD

Provider ID: N/A

☐ 2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913
Effective as of 01-JUL-24

PATSIAS, ALEXIS, MD†

Provider ID: N/A

☐ 765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAY-21

PATSIAS, ALEXIS, MD†

Provider ID: N/A

☐ 765 MEDICAL CENTER CT
STE 210

C1. 网络提供者名单 专科护理医生

CHULA VISTA, CA 91911
Teleservice
Effective as of 01-SEP-22

PATSIAS, ALEXIS, MD

Provider ID: N/A
2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913
Effective as of 01-JUN-24

PATSIAS, ALEXIS, MD

Provider ID: N/A
2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913
Effective as of 01-SEP-24

PATSIAS, ALEXIS, MD†

Provider ID: N/A
765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-APR-21

RASUL, LAILA, MD

Provider ID: N/A
321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-AUG-24

SAEZ, NEIL, MD

Provider ID: N/A
2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913
Effective as of 01-NOV-23

SAEZ, NEIL, MD

Provider ID: N/A
765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SAEZ, NEIL, MD

Provider ID: N/A
2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913
Effective as of 01-JUL-24

SAEZ, NEIL, MD

Provider ID: N/A
2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913
Effective as of 01-JUL-24

SAEZ, NEIL, MD

Provider ID: N/A
2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913
Effective as of 01-FEB-24

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A
765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JAN-21

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A
765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-AUG-20

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A
765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUL-22

WOO, LINDA, MD†

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

WOO, LINDA, MD†

Provider ID: N/A
321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-AUG-20

WOO, LINDA, MD†

Provider ID: N/A
321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

WOO, LINDA, MD†

Provider ID: N/A
321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-FEB-18

WOO, LINDA, MD†

Provider ID: N/A
321 E ST
CHULA VISTA, CA 91910
Effective as of 01-MAR-18

WOO, LINDA, MD†

Provider ID: N/A
435 H ST
CHULA VISTA, CA 91910
Effective as of 01-AUG-21

PEDIATRICS

PIANSAY, MARIACORAZON, MD

Provider ID: N/A
1637 3RD AVE STE H-I
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

C1. 网络提供者名单 专科护理医生

PIANSAY, MARIACORAZON, MD

Provider ID: N/A

1637 3RD AVE STE B-F
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

ROWHANI, NAGHMEH, MD

Provider ID: N/A

280 E ST
CHULA VISTA, CA 91910
Effective as of 01-FEB-24

TIZNADO, ERNESTO, MD†

Provider ID: N/A

1635 3RD AVE STE L
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

PHYS MED/ REHAB PAIN MEDICINE

KATZEN, SETH, DO

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-MAY-23

KATZEN, SETH, DO

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-MAR-24

KOLODGE, GAVIN, DO

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-JUN-23

RICHARDSON, HENRY, MD†

Provider ID: N/A

340 4TH AVE STE 19
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

PHYSICAL MEDICINE / REHABILITATION

BULLOCK, ANDREW, DO†

Provider ID: N/A

344 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

BULLOCK, ANDREW, DO†

Provider ID: N/A

344 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

BULLOCK, ANDREW, DO†

Provider ID: N/A

344 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

KATZEN, SETH, DO

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

KOLODGE, GAVIN, DO

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-SEP-23

TAHAEI, SEYED, MD†

Provider ID: N/A

340 4TH AVE STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

BURILA, FAITH, PA

Provider ID: N/A

299 J ST
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-JUN-24

CHAN, ALONSO, PA†

Provider ID: N/A

299 J ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

DU, SARAH, PA

Provider ID: N/A

577 THIRD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-APR-24

GUTH, CARA, PA†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-24

GUTH, CARA, PA†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-21

INDA, PRISCILLA, PA†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

INDA, PRISCILLA, PA†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

C1. 网络提供者名单 专科护理医生

INDA, PRISCILLA, PA†

Provider ID: N/A

☒ 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

INDA, PRISCILLA, PA†

Provider ID: N/A

☒ 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

INDA, PRISCILLA, PA†

Provider ID: N/A

☒ 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

INDA, PRISCILLA, PA

Provider ID: N/A

☒ 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-MAY-23

KOLODGE, KAITLEN, PA

Provider ID: N/A

☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-AUG-23

KOLODGE, KAITLEN, PA

Provider ID: N/A

☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-DEC-21

LEE, MYUNGHEE, PA

Provider ID: N/A

☒ 340 FOURTH AVE
STE 7A
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-23

LENIHAN, MICHAEL, PA

Provider ID: N/A

☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-DEC-21

MACASADIA, MARITES, PA

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Effective as of 01-SEP-20

MARISCAL, MIGUEL, PA

Provider ID: N/A

☒ 855 THIRD AVE
STE 2200
CHULA VISTA, CA 91911
Effective as of 01-JUL-24

MARTINEZ-MURGUIA, IRENE, PA

Provider ID: N/A

☒ 855 THIRD AVE
STE 2220
CHULA VISTA, CA 91911
Effective as of 01-JUL-24

MENDEZ, JESUS, PA†

Provider ID: N/A

☒ 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

MOREO, HUNTER, PA

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUL-24

NGUYEN, THUY-VY, PA†

Provider ID: N/A

☒ 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-AUG-22

NGUYEN, THUY-VY, PA†

Provider ID: N/A

☒ 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-NOV-23

ORTEGA-ENDAHL, DAVID, PA

Provider ID: N/A

☒ 2648 MAIN ST STE A
CHULA VISTA, CA 91911
Effective as of 01-OCT-21

PEDROZA, JENNIFER, PA†

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911
Effective as of 01-AUG-20

POGGI, SARA, PA

Provider ID: N/A

☒ 577 THIRD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-APR-24

PYLE, ALEXANDRA, PA

Provider ID: N/A

☒ 480 FOURTH AVE
STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

ROBICHAUD, FAITH, PA

Provider ID: N/A

☒ 299 J ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-23

ROBINSON, JENELLE, PA

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

☐ 340 FOURTH AVE
STE 7A
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

SCHAUT, ELIZABETH, PA

Provider ID: N/A

☐ 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-AUG-24

SHAH, SHEENA, PA

Provider ID: N/A

☐ 765 3RD AVE STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

STIFF, TYLER, PA

Provider ID: N/A

☐ 296 H ST STE 203
CHULA VISTA, CA 91910
Effective as of 01-APR-24

TAYLOR, RYAN, PA

Provider ID: N/A

☐ 480 FOURTH AVE
STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

THOMAS, KIMBERLY, PA

Provider ID: N/A

☐ 678 THIRD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-24

TODD, RACHEL, PA

Provider ID: N/A

☐ 299 J ST
CHULA VISTA, CA 91910
Effective as of 01-JUN-23

VARGAS, CHRISTOPHER, PA†

Provider ID: N/A

☐ 2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Effective as of 01-SEP-22

VARGAS, CHRISTOPHER, PA

Provider ID: N/A

☐ 2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-JAN-23

VARGAS, CHRISTOPHER, PA†

Provider ID: N/A

☐ 2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Effective as of 01-JAN-23

WHITE, KYLE, PA

Provider ID: N/A

☐ 765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

WILAND, WINONA, PA

Provider ID: N/A

☐ 577 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUN-23

WINTER, JENNIFER, PA

Provider ID: N/A

☐ 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-JUL-24

WRIGHT, DEREK, PA

Provider ID: N/A

☐ 340 FOURTH AVE
STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-23

WRIGHT, DEREK, PA

Provider ID: N/A

☐ 340 FOURTH AVE
STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-23

WRIGHT, DEREK, PA

Provider ID: N/A

☐ 340 FOURTH AVE
STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-23

PODIATRIST

BRAZIER, SETH, DPM

Provider ID: N/A

☐ 855 THIRD AVE
STE 1100
CHULA VISTA, CA 91911
Effective as of 01-SEP-24

CAINE, SAMUEL, DPM

Provider ID: N/A

☐ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-APR-24

CAINE, SAMUEL, DPM

Provider ID: N/A

☐ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-24

CAINE, SAMUEL, DPM

Provider ID: N/A

☐ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice

C1. 网络提供者名单 专科护理医生

Effective as of 01-DEC-23

CHU, ANDREW, DPM†

Provider ID: N/A

📄 855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-JUN-24

COLLINS, MICHAEL, DPM†

Provider ID: N/A

📄 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

COLLINS, MICHAEL, DPM†

Provider ID: N/A

📄 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-APR-23

COLLINS, MICHAEL, DPM†

Provider ID: N/A

📄 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

COLLINS, MICHAEL, DPM†

Provider ID: N/A

📄 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

DAVIDSONIII, JOHN, DPM†

Provider ID: N/A

📄 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-18

DAVIDSONIII, JOHN, DPM†

Provider ID: N/A

📄 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-23

DAVIDSONIII, JOHN, DPM†

Provider ID: N/A

📄 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

DAVIDSONIII, JOHN, DPM†

Provider ID: N/A

📄 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

DAVIDSONIII, JOHN, DPM†

Provider ID: N/A

📄 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-22

DAVIDSONIII, JOHN, DPM†

Provider ID: N/A

📄 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

HAN, KYOUNG, DPM

Provider ID: N/A

📄 855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-JAN-22

KRIGER, STEPHEN, DPM†

Provider ID: N/A

📄 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-22

MANCHEL, BRUCE, DPM†

Provider ID: N/A

📄 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

MAZZA, DAVID, DPM†

Provider ID: N/A

📄 276 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

MAZZA, DAVID, DPM†

Provider ID: N/A

📄 276 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-DEC-22

MAZZA, DAVID, DPM†

Provider ID: N/A

📄 276 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

MORGAN, CRAIG, DPM†

Provider ID: N/A

📄 276 CHURCH AVE STE A
CHULA VISTA, CA 91910*
Effective as of 01-DEC-17

NGUYEN, HAN, DPM

Provider ID: N/A

📄 345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-SEP-24

NGUYEN, HAN, DPM

Provider ID: N/A

📄 345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUN-23

NGUYEN, HAN, DPM

Provider ID: N/A

📄 345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

C1. 网络提供者名单 专科护理医生

NGUYEN, HAN, DPM

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUL-23

PUCCINELLI, ALAYNA, DPM†

Provider ID: N/A

☒ 340 4TH AVE STE 6
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

PUCCINELLI, ALAYNA, DPM†

Provider ID: N/A

☒ 340 4TH AVE STE 6
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

QUE, HOWIE, DPM

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 6
CHULA VISTA, CA 91911
Effective as of 01-JUN-23

READ, TRENTON, DPM

Provider ID: N/A

☒ 855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-APR-23

SMITH, COLLIN, DPM†

Provider ID: N/A

☒ 855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-JUN-24

SMITH, COLLIN, DPM†

Provider ID: N/A

☒ 855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-JUN-21

SMITH, COLLIN, DPM†

Provider ID: N/A

☒ 855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SOUVOROVA, JULIA, DPM†

Provider ID: N/A

☒ 336 OXFORD ST STE 104
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24

SOUVOROVA, JULIA, DPM†

Provider ID: N/A

☒ 336 OXFORD ST STE 104
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAY-24

TOUMA, ELIE, DPM

Provider ID: N/A

☒ 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Effective as of 01-APR-23

TSAI, GRACE, DPM

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-SEP-23

TSAI, GRACE, DPM

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-APR-23

TSAI, GRACE, DPM

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-DEC-23

TSAI, GRACE, DPM

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-FEB-23

XU, DIXON, DPM†

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

XU, DIXON, DPM†

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-23

XU, DIXON, DPM†

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

XU, DIXON, DPM†

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

XU, DIXON, DPM†

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-20

XU, DIXON, DPM†

Provider ID: N/A

☒ 345 F ST STE 100

C1. 网络提供者名单 专科护理医生

CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

XU, DIXON, DPM†

Provider ID: N/A
☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAY-21

PSYCHIATRY

BINDAL, ANKUR, MD†

Provider ID: N/A
☒ 765 3RD AVE STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

BINDAL, ANKUR, MD†

Provider ID: N/A
☒ 765 3RD AVE STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

BINDAL, ANKUR, MD†

Provider ID: N/A
☒ 765 3RD AVE STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

BINDAL, ANKUR, MD†

Provider ID: N/A
☒ 765 3RD AVE STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

BINDAL, ANKUR, MD†

Provider ID: N/A
☒ 765 3RD AVE STE 100

CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

BINDAL, ANKUR, MD†

Provider ID: N/A
☒ 765 3RD AVE STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A
☒ 2300 BOSWELL RD STE 225
CHULA VISTA, CA 91914
Effective as of 01-AUG-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A
☒ 2300 BOSWELL RD STE 225
CHULA VISTA, CA 91914
Effective as of 01-AUG-22

DIXON, THOMAS, MD

Provider ID: N/A
☒ 765 3RD AVE
STE 100
CHULA VISTA, CA 91910
Effective as of 01-SEP-24

DIXON, THOMAS, MD

Provider ID: N/A
☒ 765 3RD AVE
STE 100
CHULA VISTA, CA 91910
Effective as of 01-SEP-24

KARIPPOT, ANOOP, MD†

Provider ID: N/A
☒ 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A
☒ 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUN-22

MARTINEZ, STEPHANIE, MD†

Provider ID: N/A
☒ 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

MARTINEZ, STEPHANIE, MD†

Provider ID: N/A
☒ 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

MCGEHRIN, KEVIN, MD

Provider ID: N/A
☒ 450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A
☒ 450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A
☒ 450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-23

C1. 网络提供者名单 专科护理医生

MCGEHRIN, KEVIN, MD

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-24

MISHRA, GAURAV, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

MISHRA, GAURAV, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

NICHOLS, ALPHONSO, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUL-22

PHAM, ALISE, DO

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-SEP-24

PHAM, ALISE, DO

Provider ID: N/A

450 FOURTH AVE STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUN-24

PHAM, ALISE, DO

Provider ID: N/A

450 FOURTH AVE STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUN-24

PHAM, ALISE, DO

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-SEP-24

TROYER, EMILY, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-22

TROYER, EMILY, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-22

PSYCHIATRY CHILD

KARIPPOT, ANOOP, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JAN-23

KARIPPOT, ANOOP, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216

CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216

CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216

CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JAN-23

MISHRA, GAURAV, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

MISHRA, GAURAV, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

NICHOLS, ALPHONSO, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216

CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUL-22

PSYCHIATRY SLEEP MEDICINE

KARIPPOT, ANOOP, MD[†]
Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JAN-23

PSYCHOLOGIST

BAYLON, ALDO, PSYD
Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-22

BAYLON, ALDO, PSYD

Provider ID: N/A
678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-22

CELAYA, PATRICIA, PhD[†]

Provider ID: N/A
678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-22

CELAYA, PATRICIA, PhD[†]

Provider ID: N/A
678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-22

GALLO, LINDA, PhD

Provider ID: N/A
780 BAY BLVD STE 200
CHULA VISTA, CA 91910
Effective as of 01-APR-23

GALLO, LINDA, PhD

Provider ID: N/A
780 BAY BLVD STE 200
CHULA VISTA, CA 91910
Effective as of 01-APR-23

GOULD, HILARY, PhD[†]

Provider ID: N/A
678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

GOULD, HILARY, PhD[†]

Provider ID: N/A
678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

MAPLES, RANDI, PSYD[†]

Provider ID: N/A
765 3RD AVE STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

MAPLES, RANDI, PSYD[†]

Provider ID: N/A
765 3RD AVE STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

**PATTERSON-HYATT,
KIMBERLY, PSYD[†]**

Provider ID: N/A
1061 TIERRA DEL REY STE
303
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

PATTERSON-HYATT,

KIMBERLY, PSYD[†]

Provider ID: N/A
1061 TIERRA DEL REY STE
304
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

**PATTERSON-HYATT,
KIMBERLY, PSYD[†]**

Provider ID: N/A
1061 TIERRA DEL REY STE
305
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

**PATTERSON-HYATT,
KIMBERLY, PSYD[†]**

Provider ID: N/A
1061 TIERRA DEL REY STE
303
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

**PATTERSON-HYATT,
KIMBERLY, PSYD[†]**

Provider ID: N/A
1061 TIERRA DEL REY STE
304
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

**PATTERSON-HYATT,
KIMBERLY, PSYD[†]**

Provider ID: N/A
1061 TIERRA DEL REY STE
305
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

**WIJAYARATNE, IMANIE,
PSYD[†]**

Provider ID: N/A
678 3RD AVE
CHULA VISTA, CA 91910

C1. 网络提供者名单 专科护理医生

Effective as of 01-JAN-21

WIJAYARATNE, IMANIE, PSYD[†]

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

PULMONARY DISEASES

LIRA, JOSE, MD[†]

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914

Effective as of 01-FEB-21

LIRA, JOSE, MD[†]

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914

Effective as of 01-JAN-14

LIRA, JOSE, MD[†]

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914

Effective as of 01-SEP-22

LOZANO, MARTHA, MD[†]

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914

Effective as of 01-MAR-21

LOZANO, MARTHA, MD[†]

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914

Effective as of 01-SEP-15

LOZANO, MARTHA, MD[†]

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914

Effective as of 01-JAN-14

LOZANO, MARTHA, MD[†]

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914

Effective as of 01-SEP-22

PENA ROMERO, CESAR, MD[†]

Provider ID: N/A

227 CHURCH AVE
CHULA VISTA, CA 91910

Effective as of 01-SEP-15

PENA ROMERO, CESAR, MD[†]

Provider ID: N/A

227 CHURCH AVE
CHULA VISTA, CA 91910

Effective as of 01-OCT-19

SANCHEZ, LUIS, MD[†]

Provider ID: N/A

227 CHURCH AVE
CHULA VISTA, CA 91910*

Effective as of 01-JAN-14

SANCHEZ, LUIS, MD[†]

Provider ID: N/A

227 CHURCH AVE
CHULA VISTA, CA 91910

Effective as of 01-SEP-15

RADIATION ONCOLOGY

BRUGGEMAN, ANDREW, MD

Provider ID: N/A

769 MEDICAL CENTER CT
STE 100

CHULA VISTA, CA 91911

Effective as of 01-JAN-24

CARMONA, RUBEN, MD

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911

Effective as of 01-JAN-24

CARMONA, RUBEN, MD

Provider ID: N/A

769 MEDICAL CENTER CT
STE 100

CHULA VISTA, CA 91911

Effective as of 01-JAN-24

COLEMAN, LORI, MD[†]

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911

Effective as of 01-JAN-21

HATTANGADI-GLUTH, JONA, MD[†]

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-DEC-21

JABBARI, SIAVASH, MD[†]

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911

Effective as of 01-OCT-22

MANSY, GINA, MD[†]

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-APR-21

MELL, LOREN, MD[†]

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-DEC-21

PEJAVAR, SUNANDA, MD[†]

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

RAHN, DOUGLAS, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-APR-21

RASH, DOMINIQUE, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-21

ROSE, BRENT, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-21

STRAKA, CHRISTOPHER, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-21

UHL, BARRY, MD†

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JAN-21

VOLPP, PAUL, MD†

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911

Effective as of 01-JAN-21

WHITE, EVAN, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-APR-21

RADIOLOGY DIAGNOSTIC

FOSSUM, CROIX, MD

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Effective as of 01-MAY-24

YORK, JOHN, MD

Provider ID: N/A

865 3RD AVE STE 100
CHULA VISTA, CA 91911
Effective as of 01-JUN-23

REGISTERED PHYSICAL THERAPIST

ALLOS, ALEXANDER, PT†

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

BURLAKOVSKY, NATHAN, PT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

CHENG, BRANDON, PT

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-FEB-24

DORSEY, KYLE, PT†

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-DEC-21

DORSEY, KYLE, PT†

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-SEP-22

FARRAR, COURTNEY, PT

Provider ID: N/A

340 FOURTH AVE
STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-23

FARRAR, COURTNEY, PT

Provider ID: N/A

340 FOURTH AVE
STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-24

HERMAN, RACHEL, PT†

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-NOV-21

HERMAN, RACHEL, PT†

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-SEP-22

JAIN, ALEXANDRA, PT

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

880 THIRD AVE
STE A
CHULA VISTA, CA 91911
Effective as of 01-MAR-24

KARANDE, PRACHI, PT[†]

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-JAN-22

LONG, RYAN, PT

Provider ID: N/A

2417 FENTON ST STE A
CHULA VISTA, CA 91914*
Effective as of 01-JUL-22

LONG, RYAN, PT

Provider ID: N/A

320 BROADWAY STE 2
CHULA VISTA, CA 91910*
Effective as of 01-JUL-22

NGUYEN, TIA, PT

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-MAR-24

NOVENCIDO, ANDREW, PT[†]

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-SEP-22

PAPA, AMY, PT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

PAPA, AMY, PT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

PHILLIP, OMARI, PT[†]

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-DEC-21

POLIS, NICK, PT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-MAY-22

SPARKS, TODD, PT[†]

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-JAN-21

STAHL, KEVIN, PT

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-SEP-23

THOMAS, KAITLIN, PT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

RHEUMATOLOGY

ALNAHLAWI, BASMA, MD[†]

Provider ID: N/A

296 H ST STE 304
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-SEP-22

ASFAR, RAFID, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-AUG-24

ASFAR, RAFID, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-MAY-24

CHITKARA, PUJA, MD[†]

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-AUG-24

CHITKARA, PUJA, MD[†]

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-SEP-15

CHITKARA, PUJA, MD[†]

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

CHITKARA, PUJA, MD[†]

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-MAR-16

CHWA, JEFFREY, DO

C1. 网络提供者名单

专科护理医生

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

HAMMETT, ERIN, DO[†]

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

KHANNA, SURABHI, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUN-23

REDDY, DANA, MD[†]

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

REDDY, SMITHA, MD[†]

Provider ID: N/A

272 CHURCH AVE STE 1
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

REDDY, SMITHA, MD[†]

Provider ID: N/A

272 CHURCH AVE STE 1
CHULA VISTA, CA 91910
Effective as of 01-FEB-19

REDDY, SMITHA, MD[†]

Provider ID: N/A

272 CHURCH AVE STE 1
CHULA VISTA, CA 91910
Effective as of 01-JUL-24

SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS, SP

Provider ID: N/A

333 H ST STE 5000
CHULA VISTA, CA 91910
Effective as of 01-JUN-22

AROCHO-SALGADO, MIRELIS, SP

Provider ID: N/A

333 H ST STE 5000
CHULA VISTA, CA 91910
Effective as of 01-JUN-22

CALDERON MORALES, ASTRID, SP

Provider ID: N/A

333 H ST STE 5000
CHULA VISTA, CA 91910
Effective as of 01-APR-24

DURNAN, CASSANDRA, SP

Provider ID: N/A

333 H ST STE 5000
CHULA VISTA, CA 91910
Effective as of 01-JUL-24

SURGERY GENERAL

ARCOVEDO, RODOLFO, MD[†]

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JUN-19

ARCOVEDO, RODOLFO, MD[†]

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JUN-19

ARCOVEDO, RODOLFO, MD[†]

Provider ID: N/A

786 3RD AVE STE B

CHULA VISTA, CA 91910
Effective as of 01-AUG-23

ARCOVEDO, RODOLFO, MD[†]

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

ARCOVEDO, RODOLFO, MD[†]

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

BARRERA, HUGO, MD[†]

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

BARRERA, HUGO, MD[†]

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-SEP-14

BARRERA, HUGO, MD[†]

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-19

BARRERA, HUGO, MD[†]

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

CASILLAS BERUMEN, SERGIO, MD

Provider ID: N/A

1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Effective as of 01-JUL-24

C1. 网络提供者名单 专科护理医生

CASILLAS BERUMEN, SERGIO, MD

Provider ID: N/A

☒ 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Effective as of 01-FEB-24

EWBANK, CLIFTON, MD†

Provider ID: N/A

☒ 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

EWBANK, CLIFTON, MD†

Provider ID: N/A

☒ 786 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

EWBANK, CLIFTON, MD†

Provider ID: N/A

☒ 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-OCT-22

EWBANK, CLIFTON, MD†

Provider ID: N/A

☒ 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-AUG-22

HSU, BRADFORD, MD†

Provider ID: N/A

☒ 480 4TH AVE STE 404
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

HSU, BRADFORD, MD†

Provider ID: N/A

☒ 480 4TH AVE STE 404
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

HSU, BRADFORD, MD†

Provider ID: N/A

☒ 480 4TH AVE STE 404
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

HSU, BRADFORD, MD

Provider ID: N/A

☒ 865 THIRD AVE
STE 112
CHULA VISTA, CA 91911
Effective as of 01-MAY-24

HUANG, MARK, MD†

Provider ID: N/A

☒ 345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-OCT-17

KHARAZI, ALEXANDRA, MD†

Provider ID: N/A

☒ 345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-MAY-23

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

☒ 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

☒ 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-AUG-24

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

☒ 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24

MORAL, JOHN, MD

Provider ID: N/A

☒ 865 THIRD AVE
STE 112
CHULA VISTA, CA 91911
Effective as of 01-MAY-24

MORAL, JOHN, MD

Provider ID: N/A

☒ 480 4TH AVE STE 404
CHULA VISTA, CA 91910
Effective as of 01-SEP-23

MORAL, JOHN, MD

Provider ID: N/A

☒ 480 4TH AVE STE 404
CHULA VISTA, CA 91910
Effective as of 01-JUN-23

SPITZER, BLAKE, MD†

Provider ID: N/A

☒ 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SPITZER, BLAKE, MD†

Provider ID: N/A

☒ 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-OCT-19

SPITZER, BLAKE, MD†

Provider ID: N/A

☒ 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

SPITZER, BLAKE, MD†


Provider ID: N/A

☒ 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-MAY-20


SUMMERS, STEPHEN, MD†

Provider ID: N/A


C1. 网络提供者名单 专科护理医生

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-SEP-15


SUMMERS, STEPHEN, MD†
Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SUMMERS, STEPHEN, MD†
Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JUN-21


SUMMERS, STEPHEN, MD†
Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


TALEBZADEH, NOJAN, MD†
Provider ID: N/A

 246 F ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-14


UNKART, JONATHAN, MD
Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910*
Effective as of 01-OCT-24

YANG, YIFAN, MD†
Provider ID: N/A


 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JUN-23

YANG, YIFAN, MD†
Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-SEP-15


YANG, YIFAN, MD†

Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-19


YANG, YIFAN, MD†

Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


YANG, YIFAN, MD†

Provider ID: N/A

 786 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

YANG, YIFAN, MD†


Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SURGERY GENERAL VASCULAR


CHAMMAS, JOSEPH, MD†

Provider ID: N/A

 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Effective as of 01-JUL-24


**MORENO MARTINEZ,
ENRIQUE, MD†**

Provider ID: N/A

 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24


SALLOUM, ALEXANDER, MD†

Provider ID: N/A

 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24


SALLOUM, ALEXANDER, MD†

Provider ID: N/A

 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24


SALLOUM, ALEXANDER, MD†

Provider ID: N/A

 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†


Provider ID: N/A

 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-AUG-24

SURGERY HAND

POMERANTZ, MICHAEL, MD†


Provider ID: N/A

 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-DEC-21

SURGERY NEUROLOGICAL

WHITE, DANIEL, MD†

Provider ID: N/A

 296 H ST STE 303
CHULA VISTA, CA 91910
Effective as of 01-MAR-23

WHITE, DANIEL, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

☒ 296 H ST STE 303
CHULA VISTA, CA 91910
Effective as of 01-OCT-21

WHITE, DANIEL, MD†

Provider ID: N/A

☒ 296 H ST STE 303
CHULA VISTA, CA 91910
Effective as of 01-SEP-23

SURGERY ORTHOPEDIC

ANDRY, JAMES, MD

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911*
Effective as of 01-MAR-24

ANDRY, JAMES, MD

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-MAR-24

BRERETON, DANIEL, DO†

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-DEC-21

DOWNING, KRISTOPHER, MD

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911*
Effective as of 01-MAR-24

DOWNING, KRISTOPHER, MD

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14

CHULA VISTA, CA 91911
Effective as of 01-MAR-24

DUTTON, PASCUAL, MD

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

☒ 296 H ST STE 203
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

EVES, WILLIAM, MD†

Provider ID: N/A

☒ 480 4TH AVE STE 307
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

EVES, WILLIAM, MD†

Provider ID: N/A

☒ 480 4TH AVE STE 307
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

GROTTING, JOHN, MD

Provider ID: N/A

☒ 296 H ST STE 203
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

GROTTING, JOHN, MD

Provider ID: N/A

☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-JAN-24

GROTTING, JOHN, MD†

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

GROTTING, JOHN, MD†

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-AUG-23

GROTTING, JOHN, MD†

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-NOV-21

HOFMEISTER, ERIC, MD†

Provider ID: N/A

☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-NOV-21

HOFMEISTER, ERIC, MD†

Provider ID: N/A

☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-FEB-18

HOFMEISTER, ERIC, MD†

Provider ID: N/A

☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-AUG-23

KIMBALL, MICHAEL, MD†

Provider ID: N/A

☒ 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

C1. 网络提供者名单

专科护理医生

KLATMAN, SAMUEL, MD†

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-AUG-23

KLATMAN, SAMUEL, MD†

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-NOV-21

KOLODGE, GAVIN, DO

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-AUG-23

KUSNEZOV, NICHOLAS, MD

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-APR-24

MCKNIGHT, BRADEN, MD

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-APR-24

POMERANTZ, MICHAEL, MD†

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-FEB-18

RICKARDS, ENASS, MD

Provider ID: N/A

480 FOURTH AVE
STE 501

CHULA VISTA, CA 91910
Effective as of 01-FEB-24

ROSENFELD, ALAN, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

ROSENFELD, ALAN, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910*
Effective as of 01-FEB-07

ROSENFELD, ALAN, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

ROSENFELD, ALAN, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

ROSENFELD, ALAN, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-APR-23

ROSENFELD, ALAN, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-NOV-09

TAYYAB, NEIL, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

TAYYAB, NEIL, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

TAYYAB, NEIL, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

TAYYAB, NEIL, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

TAYYAB, NEIL, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-OCT-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-NOV-23

SURGERY THORACIC

HUANG, MARK, MD†

Provider ID: N/A

345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-SEP-17

HUANG, MARK, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

☒ 345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

MUMTAZ, SEEMAL, MD†

Provider ID: N/A

☒ 345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

MUMTAZ, SEEMAL, MD†

Provider ID: N/A

☒ 345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-SEP-17

SURGICAL ONCOLOGY

QUIROZ, ELISA, MD†

Provider ID: N/A

☒ 678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

UROLOGY

COHEN, EDWARD, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

DICKS, BRIAN, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

GRIMALDI, JOHN, DO†

Provider ID: N/A

☒ 450 4TH AVE STE 312

CHULA VISTA, CA 91910
Effective as of 01-SEP-15

GRIMALDI, JOHN, DO†

Provider ID: N/A

☒ 450 4TH AVE STE 312
CHULA VISTA, CA 91910*
Effective as of 01-JAN-14

JUMA, SAAD, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

KEILLER, DANNY, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

NGUYEN, HUNG, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

PE, MARK-RALLY, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

ROBERTS, JAMES, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JUN-24

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-SEP-21

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-NOV-22

SEVILLA, CLAUDIA, MD†

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14

C1. 网络提供者名单 专科护理医生

CHULA VISTA, CA 91911
Teleservice
Effective as of 01-OCT-21

SEVILLA, CLAUDIA, MD†

Provider ID: N/A
750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-NOV-21

VAPNEK, EVAN, MD†

Provider ID: N/A
786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

VAPNEK, EVAN, MD

Provider ID: N/A
752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

CERTIFIED NURSE PRACTITIONER

NAVA, PETER, NP

Provider ID: N/A
818 PIER VIEW WAY
CMP PENDLETON, CA
92054
Effective as of 01-JAN-24

NAVA, PETER, NP

Provider ID: N/A
517 N HORNE ST
CMP PENDLETON, CA
92054
Effective as of 01-JAN-24

EMERGENCY MEDICINE

EL SAID, KHALED, MD†

Provider ID: N/A
11882 DE PALMA RD STE
2F-1
CORONA, CA 92883
Teleservice
Effective as of 01-MAR-24

INFECTIOUS DISEASE

RESTREPO, DALILAH, MD†

Provider ID: N/A
3334 E COAST HWY PMB
655
CORONA DEL MAR, CA
92625
Effective as of 01-AUG-22

CARDIOVASCULAR DISEASE

MAI, TUAN, MD†

Provider ID: N/A
230 PROSPECT PL STE 250
CORONADO, CA 92118
Effective as of 01-NOV-22

CERTIFIED NURSE PRACTITIONER

DWYER, ERIN, NP

Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-FEB-24

GOSHEN, KIRSTEN, NP†

Provider ID: N/A
230 PROSPECT PL STE 340
CORONADO, CA 92118
Effective as of 01-DEC-22

TOMICICH, STEPHANIE, NP

Provider ID: N/A
230 PROSPECT PL STE 210

CORONADO, CA 92118
Effective as of 01-FEB-24

FAMILY PRACTICE

SHAFT, ALEXANDER, MD†

Provider ID: N/A
131 ORANGE AVE STE 101
CORONADO, CA 92118
Teleservice
Effective as of 01-FEB-23

SHAFT, ALEXANDER, MD†

Provider ID: N/A
131 ORANGE AVE STE 101
CORONADO, CA 92118
Teleservice
Effective as of 01-MAR-22

GASTROENTEROLOGY

BAIG, NABIL, DO†

Provider ID: N/A
131 ORANGE AVE STE 101B
CORONADO, CA 92118
Teleservice
Effective as of 01-OCT-22

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE, MA†

Provider ID: N/A
801 ORANGE AVE
CORONADO, CA 92118
Effective as of 01-SEP-22

INTERNAL MEDICINE

BORTZ, DAVID, MD†

Provider ID: N/A
230 PROSPECT PL STE 340
CORONADO, CA 92118*
Effective as of 01-DEC-22

C1. 网络提供者名单 专科护理医生

DAVIS, JASON, MD†

Provider ID: N/A

📍 230 PROSPECT PL STE 340B
CORONADO, CA 92118
Effective as of 01-JAN-24

OLIVER, DEANNA, MD†

Provider ID: N/A

📍 131 ORANGE AVE STE 101
CORONADO, CA 92118
Effective as of 01-MAR-21

OLIVER, DEANNA, MD†

Provider ID: N/A

📍 131 ORANGE AVE STE 101
CORONADO, CA 92118
Effective as of 01-APR-21

NEPHROLOGY

DAVIS, JASON, MD†

Provider ID: N/A

📍 230 PROSPECT PL STE 340B
CORONADO, CA 92118
Effective as of 01-JUL-22

DAVIS, JASON, MD†

Provider ID: N/A

📍 230 PROSPECT PL STE 340B
CORONADO, CA 92118
Effective as of 01-MAR-16

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI, MD†

Provider ID: N/A

📍 230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-21

SEFA-BOAKYE, KOFI, MD†

Provider ID: N/A

📍 230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JUL-14

SURGERY GENERAL

BHOYRUL, SUNIL, MD†

Provider ID: N/A

📍 230 PROSPECT PL STE 340
CORONADO, CA 92118
Effective as of 01-DEC-22

BORTZ, PASCAL, MD†

Provider ID: N/A

📍 230 PROSPECT PL STE 340
CORONADO, CA 92118
Effective as of 01-DEC-22

MORELL, MICHAEL, MD

Provider ID: N/A

📍 230 PROSPECT PL STE 340
CORONADO, CA 92118
Effective as of 01-DEC-23

SURGERY ORTHOPEDIC

ANDRY, JAMES, MD

Provider ID: N/A

📍 230 PROSPECT PL STE 230
CORONADO, CA 92118
Effective as of 01-MAR-24

ANDRY, JAMES, MD

Provider ID: N/A

📍 230 PROSPECT PL STE 230
CORONADO, CA 92118*
Effective as of 01-MAR-24

KUSNEZOV, NICHOLAS, MD

Provider ID: N/A

📍 230 PROSPECT PL STE 230
CORONADO, CA 92118
Teleservice
Effective as of 01-APR-24

MCKNIGHT, BRADEN, MD

Provider ID: N/A

📍 230 PROSPECT PL STE 230
CORONADO, CA 92118
Teleservice
Effective as of 01-APR-24

PALLIA, CHRISTOPHER, MD

Provider ID: N/A

📍 230 PROSPECT PL STE 230
CORONADO, CA 92118
Teleservice
Effective as of 01-APR-24

PALLIA, CHRISTOPHER, MD

Provider ID: N/A

📍 230 PROSPECT PL STE 230
CORONADO, CA 92118*
Teleservice
Effective as of 01-MAR-24

UROLOGY

BUTLER, PHILIP, MD

Provider ID: N/A

📍 230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

COHEN, EDWARD, MD

Provider ID: N/A

📍 230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-FEB-24

DATO, PAUL, MD

Provider ID: N/A

📍 230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

DICKS, BRIAN, MD

Provider ID: N/A

📍 230 PROSPECT PL STE 210

C1. 网络提供者名单 专科护理医生

CORONADO, CA 92118
Effective as of 01-JAN-24

JUMA, SAAD, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

KEILLER, DANNY, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

NGUYEN, HUNG, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

PE, MARK-RALLY, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

ROBERTS, JAMES, MD†

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

ROBERTS, JAMES, MD†

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-21

ROBERTS, JAMES, MD†

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-20

SALEM, CAROL, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

VAPNEK, EVAN, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

CERTIFIED NURSE PRACTITIONER

PASICOLAN, MARI, NP

Provider ID: N/A

24833 DEL PRADO
DANA POINT, CA 92629
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

24833 DEL PRADO
DANA POINT, CA 92629
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

24833 DEL PRADO
DANA POINT, CA 92629
Effective as of 01-DEC-22

MARRIAGE FAMILY THERAPIST

MOORE, CANDACE, MFT

Provider ID: N/A

23 TERRAZA DEL MAR
DANA POINT, CA 92629
Effective as of 01-JAN-22

MOORE, CANDACE, MFT

Provider ID: N/A

23 TERRAZA DEL MAR
DANA POINT, CA 92629
Effective as of 01-JAN-22

OPTOMETRIST

SPAETH, JOHN, OD

Provider ID: N/A

24040 CAMINO DEL AVION
STE G
DANA POINT, CA 92629
Effective as of 01-SEP-23

WANG, MATTHEW, OD

Provider ID: N/A

24692 DEL PRADO STE B
DANA POINT, CA 92629
Effective as of 01-JAN-23

WANG, MATTHEW, OD

Provider ID: N/A

24692 DEL PRADO STE B
DANA POINT, CA 92629
Effective as of 01-OCT-23

PSYCHOLOGIST

UNGER, ARLENE, PhD†

Provider ID: N/A

34145 PACIFIC COAST HWY
STE 821
DANA POINT, CA 92629
Effective as of 01-DEC-20

UNGER, ARLENE, PhD†

Provider ID: N/A

34145 PACIFIC COAST HWY
STE 821
DANA POINT, CA 92629

C1. 网络提供者名单 专科护理医生

Effective as of 01-DEC-20

UNGER, ARLENE, PhD[†]

Provider ID: N/A

☒ 34145 PACIFIC COAST HWY
STE 821
DANA POINT, CA 92629

Effective as of 01-DEC-20

UNGER, ARLENE, PhD[†]

Provider ID: N/A

☒ 34145 PACIFIC COAST HWY
STE 821
DANA POINT, CA 92629

Effective as of 01-DEC-20

DERMATOLOGY

MARRIOTT, AGATA, MD

Provider ID: N/A

☒ 1349 CAMINO DEL MAR
STE D
DEL MAR, CA 92014

Effective as of 01-SEP-22

PHYSICIANS ASSISTANT

HANSEN, CHRISTINA, PA

Provider ID: N/A

☒ 12865 POINTE DEL MAR
WAY STE 200
DEL MAR, CA 92014

Teleservice

Effective as of 01-OCT-23

LEE, ISABEL, PA

Provider ID: N/A

☒ 1349 CAMINO DEL MAR
STE B
DEL MAR, CA 92014

Teleservice

Effective as of 01-DEC-23

SZABO, HAYLIE, PA

Provider ID: N/A

☒ 12865 POINTE DEL MAR
WAY STE 200
DEL MAR, CA 92014

Teleservice

Effective as of 01-OCT-22

PSYCHIATRY

COLOGNE, SCOTT, MD[†]

Provider ID: N/A

☒ 12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014

Effective as of 01-OCT-23

COLOGNE, SCOTT, MD[†]

Provider ID: N/A

☒ 12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014

Effective as of 01-OCT-23

COLOGNE, SCOTT, MD[†]

Provider ID: N/A

☒ 12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014

Effective as of 01-OCT-23

COLOGNE, SCOTT, MD[†]

Provider ID: N/A

☒ 12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014

Effective as of 01-OCT-23

COLOGNE, SCOTT, MD[†]

Provider ID: N/A

☒ 12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014

Effective as of 01-OCT-23

COLOGNE, SCOTT, MD[†]

Provider ID: N/A

☒ 12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014

Effective as of 01-OCT-23

COLOGNE, SCOTT, MD[†]

Provider ID: N/A

☒ 12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014

Effective as of 01-OCT-23

COLOGNE, SCOTT, MD[†]

Provider ID: N/A

☒ 12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014

Effective as of 01-OCT-23

VIJAYASARATHI, KRISHNA, DO[†]

Provider ID: N/A

☒ 12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014

Effective as of 01-OCT-23

VIJAYASARATHI, KRISHNA, DO[†]

Provider ID: N/A

☒ 12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014

Effective as of 01-OCT-23

VIJAYASARATHI, KRISHNA, DO[†]

Provider ID: N/A

☒ 12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014

Effective as of 01-OCT-23

VIJAYASARATHI, KRISHNA, DO[†]

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

PSYCHOLOGIST

**ROSENGARTEN, ARTHUR,
PhD†**

Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

**ROSENGARTEN, ARTHUR,
PhD†**

Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

**ROSENGARTEN, ARTHUR,
PhD†**

Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

**ROSENGARTEN, ARTHUR,
PhD†**

Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

SURGERY ORTHOPEDIC

BROWN, RICHARD, MD†

Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 200
DEL MAR, CA 92014
Teleservice
Effective as of 01-JAN-22

MOHLENBROCK, WILLIAM, MD

Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 200
DEL MAR, CA 92014
Teleservice
Effective as of 01-JAN-22

THUNDER, RICHARD, MD†

Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 200
DEL MAR, CA 92014
Teleservice
Effective as of 01-JAN-22

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY, MD

Provider ID: N/A

278 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-JUL-24

COHEN, ZACHARY, MD†

Provider ID: N/A

278 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-NOV-21

PRABHU, NAMRATHA, MD

Provider ID: N/A

278 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-APR-24

AUDIOLOGIST

SHASKY, GARY, AuD†

Provider ID: N/A

1767 E MAIN ST
EL CAJON, CA 92021
Effective as of 01-JAN-21

CARDIAC

ELECTROPHYSIOLOGY

LENER, JONATHAN, MD

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-JUL-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-JAN-23

CARDIOVASCULAR DISEASE

ABELHAD, NADIA, MD

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-JAN-24

BARVALIA, MIHIR, MD†

Provider ID: N/A

1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020
Teleservice
Effective as of 01-AUG-21

BARVALIA, MIHIR, MD†

Provider ID: N/A

1380 EL CAJON BLVD STE
212
EL CAJON, CA 92020
Effective as of 01-JAN-22

C1. 网络提供者名单 专科护理医生

CARLSON, STEVEN, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Teleservice

Effective as of 01-APR-21

DO, HULBERT, MD

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-OCT-23

FERNANDEZ, GENARO, MD†

Provider ID: N/A

1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020

Effective as of 01-AUG-21

HOURANI, RAYAN, MD†

Provider ID: N/A

300 S PIERCE ST STE 102
EL CAJON, CA 92020

Teleservice

Effective as of 01-JAN-21

KAFRI, HASSAN, MD†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-AUG-20

KAFRI, HASSAN, MD†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-JAN-21

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

1625 E MAIN ST STE 201

EL CAJON, CA 92021

Effective as of 01-SEP-22

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-SEP-22

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-APR-21

NAGHI, JESSE, MD†

Provider ID: N/A

1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020

Effective as of 01-AUG-21

NARAYANAN, MEENA, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-APR-21

NARAYANAN, MEENA, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-SEP-22

NISHIMURA-KAMINSKI, MARIN, MD

Provider ID: N/A

300 S PIERCE ST STE 102
EL CAJON, CA 92020

Teleservice

Effective as of 01-MAR-23

OMRAN, JAD, MD†

Provider ID: N/A

300 S PIERCE ST STE 102

EL CAJON, CA 92020

Teleservice

Effective as of 01-JAN-21

PARIKH, MILIND, DO†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-SEP-22

PATEL, PRASHANT, MD

Provider ID: N/A

1679 E MAIN ST
EL CAJON, CA 92021

Effective as of 01-JUL-24

PONCE, SONIA, MD†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-SEP-22

REDDY, PAVAN, MD

Provider ID: N/A

1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020

Effective as of 01-SEP-24

SARSAM, LUAY, MD

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-JUL-23

SHAH, KULIN, MD†

Provider ID: N/A


1625 E MAIN ST STE 201

C1. 网络提供者名单 专科护理医生

EL CAJON, CA 92021
Effective as of 01-JAN-23


SHAH, ABHISHEK, MD[†]

Provider ID: N/A

 1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-SEP-22


SHARF, ALBERT, MD

Provider ID: N/A

 1679 E MAIN ST
EL CAJON, CA 92021
Effective as of 01-JUN-24

SHARF, ALBERT, MD


Provider ID: N/A

 1240 BROADWAY STE 210
EL CAJON, CA 92021
Teleservice

Effective as of 01-JAN-24


SHARF, ALBERT, MD

Provider ID: N/A

 230 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-JAN-24


SHEREV, DIMITRI, MD[†]

Provider ID: N/A

 1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020
Effective as of 01-AUG-21


SUDHAKAR, DEEPTHI, MD[†]

Provider ID: N/A

 1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-JAN-23

YAU, STEPHEN, MD[†]


Provider ID: N/A

 328 HIGHLAND AVE STE
200

EL CAJON, CA 92020
Teleservice
Effective as of 01-MAR-23


YAU, STEPHEN, MD[†]

Provider ID: N/A

 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Teleservice
Effective as of 01-AUG-22

ZAVARO, SUHAIL, MD[†]

Provider ID: N/A


 300 S PIERCE ST STE 102
EL CAJON, CA 92020
Teleservice
Effective as of 01-JAN-21

CERTIFIED

ACUPUNCTURIST


LOPEZ, MARIA, LAC

Provider ID: N/A

 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JUL-24


LOPEZ, MARIA, LAC

Provider ID: N/A

 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JUN-24

SLOAN, ERICA, LAC

Provider ID: N/A


 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-MAR-24

CERTIFIED NURSE

PRACTITIONER


BRANNEN, MANDY, NP[†]

Provider ID: N/A

 215 W MADISON AVE
EL CAJON, CA 92020*
Effective as of 01-JAN-21


CARDENAS, MIRIAM, NPF

Provider ID: N/A

 1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-OCT-23


CHUDACEK, JANET, NP[†]

Provider ID: N/A

 215 W MADISON AVE
EL CAJON, CA 92020*
Teleservice
Effective as of 01-JAN-21


JOHNSON, KIMBERLY, NP[†]

Provider ID: N/A

 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Teleservice
Effective as of 01-AUG-21


LUCKETT, DECOURCY, NP[†]

Provider ID: N/A

 1580 N 2ND ST
EL CAJON, CA 92021
Effective as of 01-JAN-21


MANRIQUEZ, LISETTE, NPF

Provider ID: N/A

 875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-MAY-24

MURRAY, CARLA, NP

Provider ID: N/A

 855 E MADISON AVE
EL CAJON, CA 92020*
Effective as of 01-FEB-24

C1. 网络提供者名单 专科护理医生

PIRTLE, KEYSHONE, NP†

Provider ID: N/A

📍 5442 SYCUAN RD
EL CAJON, CA 92019
Effective as of 01-SEP-21

REAL, MARIA, NP

Provider ID: N/A

📍 1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-OCT-23

REDDY, PRIYA, NP

Provider ID: N/A

📍 1032 BROADWAY
EL CAJON, CA 92021
Effective as of 01-NOV-22

RENZAS, JENNIFER, NP

Provider ID: N/A

📍 1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-JUL-21

RENZAS, JENNIFER, NP

Provider ID: N/A

📍 165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-JUL-21

SHAW, MARILYNN, NP

Provider ID: N/A

📍 300 S PIERCE ST STE 102
EL CAJON, CA 92020
Effective as of 01-MAY-23

SIRLEAF, MASSANU, NP†

Provider ID: N/A

📍 1351 BROADWAY
EL CAJON, CA 92021
Effective as of 01-JAN-21

WILLIAMS, SHANTRICE, NP

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-FEB-23

WILLIAMS, BREAHA, NP

Provider ID: N/A

📍 1032 BROADWAY
EL CAJON, CA 92021
Effective as of 01-DEC-21

WILLIAMS, BREAHA, NP

Provider ID: N/A

📍 165 S 1ST ST
EL CAJON, CA 92019
Effective as of 01-DEC-21

YALDO, ATHMAR, NP†

Provider ID: N/A

📍 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Teleservice
Effective as of 01-DEC-21

CERTIFIED REGISTERED NURSE MIDWIFE

HAMMOND, HEATHER, CRNM†

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020*
Effective as of 01-JAN-24

CHIROPRACTOR

DORADO, SUE, DC

Provider ID: N/A

📍 1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-OCT-23

DORADO, SUE, DC

Provider ID: N/A

📍 165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-OCT-23

FULKS, ZACKARY, DC

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-MAY-23

HALEY, STEVEN, DC

Provider ID: N/A

📍 1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-OCT-23

HALEY, STEVEN, DC

Provider ID: N/A

📍 165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-OCT-23

MANSOUR, RASHAD, DC

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-MAR-23

MCCOWN, BARRY, DC

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-MAY-23

ZECHA, RONALD, DC

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JUL-22

C1. 网络提供者名单 专科护理医生

DERMATOLOGY

BARRIO, VICTORIA, MD

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Teleservice

Effective as of 01-MAR-24

BARRIO, VICTORIA, MD

Provider ID: N/A

222 W MADISON AVE
EL CAJON, CA 92020

Effective as of 01-APR-24

BROGAN, JACQUELINE, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JUL-22

BROGAN, JACQUELINE, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-OCT-21

CELANO, NICHOLAS, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JAN-21

CELANO, NICHOLAS, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JAN-21

CELANO, NICHOLAS, MD

Provider ID: N/A

222 W MADISON AVE
EL CAJON, CA 92020

Effective as of 01-APR-24

CELANO, NICHOLAS, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JUL-24

CHIANG, JENNIFER, MD

Provider ID: N/A

222 W MADISON AVE
EL CAJON, CA 92020

Effective as of 01-APR-24

CHIANG, JENNIFER, MD

Provider ID: N/A

222 W MADISON AVE
EL CAJON, CA 92020

Effective as of 01-APR-24

CHIANG, JENNIFER, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JAN-21

CHIANG, JENNIFER, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-MAR-18

CHIANG, JENNIFER, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JAN-21

GONZALEZ, JOSE, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Teleservice

Effective as of 01-AUG-22

GONZALEZ, JOSE, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Teleservice

Effective as of 01-MAY-23

GORDON, JUSTIN, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-AUG-22

GORDON, JUSTIN, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-APR-22

HANSEN, DOYLE, MD†

Provider ID: N/A

1679 E MAIN ST STE 208
EL CAJON, CA 92021*

Effective as of 01-JAN-14

KASSAB, GHADA, MD

Provider ID: N/A

624 EL CAJON BLVD
EL CAJON, CA 92020

Effective as of 01-MAR-23

KASSAB, GHADA, MD

Provider ID: N/A

624 EL CAJON BLVD
EL CAJON, CA 92020

Effective as of 01-JUL-23

LIN, SHINKO, MD

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Teleservice

Effective as of 01-MAR-24

LIN, SHINKO, MD

Provider ID: N/A


222 W MADISON AVE

C1. 网络提供者名单 专科护理医生

EL CAJON, CA 92020
Effective as of 01-APR-24


LIN, SHINKO, MD

Provider ID: N/A

 222 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-APR-24


SATEESH, BROOKE, MD

Provider ID: N/A

 222 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-APR-24


SATEESH, BROOKE, MD

Provider ID: N/A

 222 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-APR-24


SATEESH, BROOKE, MD†

Provider ID: N/A

 292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-MAR-16


SATEESH, BROOKE, MD†

Provider ID: N/A

 292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-JAN-21


TYAGI, ABHILASHA, MD†

Provider ID: N/A

 292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-AUG-22


TYAGI, ABHILASHA, MD†

Provider ID: N/A

 292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-APR-22


TYAGI, ABHILASHA, MD

Provider ID: N/A

 222 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-APR-24


UEBELHOER, NATHAN, DO

Provider ID: N/A

 222 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-APR-24

UEBELHOER, NATHAN, DO†


Provider ID: N/A

 292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-FEB-22

EMERGENCY MEDICINE

YAU, STEPHEN, MD†

Provider ID: N/A


 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Teleservice

Effective as of 01-APR-23

FAMILY PRACTICE


GHAFARI, DAUOD, MD

Provider ID: N/A

 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JUL-24

PATEL, RAKESH, MD

Provider ID: N/A

 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-AUG-24

SHAFT, ALEXANDER, MD†

Provider ID: N/A

 463 N MAGNOLIA AVE

EL CAJON, CA 92020
Teleservice

Effective as of 01-OCT-21

SHAFT, ALEXANDER, MD†


Provider ID: N/A

 463 N MAGNOLIA AVE
EL CAJON, CA 92020
Teleservice

Effective as of 01-FEB-23

THIERMANN, PAIGE, MD


Provider ID: N/A

 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-MAY-24

GASTROENTEROLOGY


CUBAS, IVAN, MD†

Provider ID: N/A

 2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JUL-18


DESTA, TADDESE, MD†

Provider ID: N/A

 2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-APR-24

DESTA, TADDESE, MD†

Provider ID: N/A

 2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JUL-18

HASSANEIN, TAREK, MD†

Provider ID: N/A

 463 N MAGNOLIA AVE
EL CAJON, CA 92020
Teleservice

Effective as of 01-MAR-18

HASSANEIN, TAREK, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

463 N MAGNOLIA AVE STE
A
EL CAJON, CA 92020
Effective as of 01-DEC-20

HASSANEIN, TAREK, MD†

Provider ID: N/A

463 N MAGNOLIA AVE
EL CAJON, CA 92020
Teleservice
Effective as of 01-FEB-21

HASSANEIN, TAREK, MD†

Provider ID: N/A

463 N MAGNOLIA AVE
EL CAJON, CA 92020
Teleservice
Effective as of 01-SEP-22

NOVO, MEGAN, MD

Provider ID: N/A

2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-MAY-23

NOVO, MEGAN, MD

Provider ID: N/A

2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JAN-23

SCHAEFFER, CYNTHIA, MD†

Provider ID: N/A

2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JUL-18

SHAFFER, KATHERINE, MD†

Provider ID: N/A

2732 NAVAJO RD STE 201
EL CAJON, CA 92020
Effective as of 01-JAN-21

THOMAS, CARLTON, MD†

Provider ID: N/A

2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JUL-18

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE, MA†

Provider ID: N/A

1767 E MAIN ST
EL CAJON, CA 92021
Effective as of 01-SEP-22

DANDURAND, JOHN, MA†

Provider ID: N/A

1767 E MAIN ST
EL CAJON, CA 92021
Teleservice
Effective as of 01-JAN-21

DAVIS, KELLE, MA†

Provider ID: N/A

1767 E MAIN ST
EL CAJON, CA 92021
Effective as of 01-SEP-22

DAVIS, KELLE, MA†

Provider ID: N/A

1767 E MAIN ST
EL CAJON, CA 92021
Effective as of 01-JAN-21

HEPATOLOGY

HASSANEIN, TAREK, MD†

Provider ID: N/A

463 N MAGNOLIA AVE STE
A
EL CAJON, CA 92020
Effective as of 01-SEP-24

INTERNAL MEDICINE

AWDISHO, ALAN, DO†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Teleservice
Effective as of 01-SEP-22

MAY, LOUIS, MD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-DEC-22

MICHAEL, RAMI, MD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Teleservice
Effective as of 01-NOV-22

OLIVER, DEANNA, MD†

Provider ID: N/A

463 N MAGNOLIA AVE
EL CAJON, CA 92020*
Effective as of 01-OCT-22

OLIVER, DEANNA, MD†

Provider ID: N/A

463 N MAGNOLIA AVE
EL CAJON, CA 92020
Effective as of 01-MAR-21

INTERVENTIONAL CARDIOLOGY

BARVALIA, MIHIR, MD†

Provider ID: N/A

1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020
Teleservice
Effective as of 01-NOV-22

BARVALIA, MIHIR, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

1380 EL CAJON BLVD STE 100
EL CAJON, CA 92020
Teleservice
Effective as of 01-JAN-24

JOHN, ALAN, MD

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-MAY-23

KAFRI, HASSAN, MD†

Provider ID: N/A

328 HIGHLAND AVE STE 200
EL CAJON, CA 92020
Effective as of 01-SEP-22

KAFRI, HASSAN, MD†

Provider ID: N/A

328 HIGHLAND AVE STE 200
EL CAJON, CA 92020
Effective as of 01-JAN-21

KAFRI, HASSAN, MD†

Provider ID: N/A

328 HIGHLAND AVE STE 200
EL CAJON, CA 92020
Effective as of 01-JAN-19

KAFRI, HASSAN, MD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-JUL-22

NAGHI, JESSE, MD†

Provider ID: N/A

1380 EL CAJON BLVD STE 100
EL CAJON, CA 92020
Effective as of 01-JAN-24

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-DEC-22

SHAH, KULIN, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-APR-23

SHEREV, DIMITRI, MD

Provider ID: N/A

1380 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-JAN-24

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-APR-23

LICENSED CLINICAL SOCIAL WORKER

FRAGOSO, DOMINIQUE, LCSW

Provider ID: N/A

215 W MADISON AVE
EL CAJON, CA 92020*
Effective as of 01-JAN-24

MANUEL, FRANCESCA, LCSW

Provider ID: N/A

215 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-FEB-23

TAYAG, DYLAN, LCSW†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-SEP-22

TAYLOR, MISTY, LCSW

Provider ID: N/A

5442 SYCUAN RD
EL CAJON, CA 92019
Effective as of 01-FEB-24

WELSH, BRITT, LCSW†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-FEB-21

MARRIAGE FAMILY THERAPIST

ARNOLD, REBECCA, MFT

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-FEB-24

ARNOLD, REBECCA, MFT

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JUN-24

ESTAVILLO, SAUL, MFT

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-AUG-23

OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER, MD

Provider ID: N/A

165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-OCT-23

AL-MSHHDANI, AYSER, MD

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-OCT-23

BULLOCH, EDGAR, MD†

Provider ID: N/A

133 W MAIN ST STE 100
EL CAJON, CA 92020

Effective as of 01-JUN-22

DAVIS, TRACIE, MD

Provider ID: N/A

165 S 1ST ST
EL CAJON, CA 92019

Teleservice

Effective as of 01-OCT-23

DAVIS, TRACIE, MD

Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-OCT-23

FOLCHTORRES-AGUIAR, BEATRIZ, MD†

Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-AUG-22

FOLCHTORRES-AGUIAR, BEATRIZ, MD†

Provider ID: N/A

165 S 1ST ST
EL CAJON, CA 92019

Teleservice

Effective as of 01-AUG-22

GELLENS, ANDREW, MD†

Provider ID: N/A

165 S 1ST ST
EL CAJON, CA 92019

Teleservice

Effective as of 01-NOV-21

GELLENS, ANDREW, MD†

Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-NOV-21

MELLENDEZBERRIOS, IARA, MD

Provider ID: N/A

181 REA AVE
EL CAJON, CA 92020

Teleservice

Effective as of 01-AUG-24

TAJРАН, DEENA, MD†

Provider ID: N/A

291 E LEXINGTON AVE STE
AC

EL CAJON, CA 92020

Effective as of 01-JAN-21

OPHTHALMOLOGY

ABDALLAH, WALID, MD

Provider ID: N/A

231 W MAIN ST
EL CAJON, CA 92020

Effective as of 01-FEB-24

BINDER, NICHOLAS, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-NOV-23

BINDER, NICHOLAS, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-DEC-23

BINDER, NICHOLAS, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-FEB-24

BINDER, NICHOLAS, MD

Provider ID: N/A

450 FLETCHER PKWY STE
112

EL CAJON, CA 92020

Effective as of 01-NOV-23

HSU, CHRISTOPHER, MD

Provider ID: N/A

450 FLETCHER PKWY STE
112

EL CAJON, CA 92020

Effective as of 01-NOV-23

HSU, CHRISTOPHER, MD†

Provider ID: N/A

225 W MADISON AVE STE 1
EL CAJON, CA 92020

Effective as of 01-SEP-22

MCDONNELL, EMMA, MD†

Provider ID: N/A

231 W MAIN ST
EL CAJON, CA 92020

Effective as of 01-NOV-22

PATEL, GITANE, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-JAN-24

PATEL, SARJAN, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-JAN-24

C1. 网络提供者名单 专科护理医生

PATEL, GITANE, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-DEC-23

PATEL, SARJAN, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-DEC-23

PATEL, GITANE, MD

Provider ID: N/A

450 FLETCHER PKWY STE
112
EL CAJON, CA 92020
Effective as of 01-NOV-23

PATEL, SARJAN, MD†

Provider ID: N/A

450 FLETCHER PKWY STE
112
EL CAJON, CA 92020
Effective as of 01-DEC-23

PONS, MAURICIO, MD†

Provider ID: N/A

231 W MAIN ST
EL CAJON, CA 92020
Effective as of 01-AUG-22

PONS, MAURICIO, MD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-JUL-22

PRABHU, SUJATA, MD

Provider ID: N/A

450 FLETCHER PKWY STE
112
EL CAJON, CA 92020
Effective as of 01-NOV-23

SKAF, AYHAM, MD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-JUL-22

ZHAO, TAILUN, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-JAN-24

ZHAO, TAILUN, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-SEP-24

ZHAO, TAILUN, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-NOV-23

ZHAO, TAILUN, MD

Provider ID: N/A

450 FLETCHER PKWY STE
112
EL CAJON, CA 92020
Effective as of 01-NOV-23

ZHAO, TAILUN, MD

Provider ID: N/A

450 FLETCHER PKWY STE
112
EL CAJON, CA 92020
Effective as of 01-MAY-24

OPTOMETRIST

AOTO, KIM, OD†

Provider ID: N/A

450 FLETCHER PKWY STE
112
EL CAJON, CA 92020

Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A

450 FLETCHER PKWY STE
112
EL CAJON, CA 92020
Effective as of 01-DEC-23

DYER, SHARON, OD†

Provider ID: N/A

225 W MADISON AVE STE 1
EL CAJON, CA 92020
Effective as of 01-SEP-22

HAN, SUL, OD†

Provider ID: N/A

450 FLETCHER PKWY STE
112
EL CAJON, CA 92020
Effective as of 01-DEC-23

KHALIL, VADY, OD†

Provider ID: N/A

450 FLETCHER PKWY STE
112
EL CAJON, CA 92020
Effective as of 01-DEC-23

KHALIL, VADY, OD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-DEC-23

KOO, ANITA, OD

Provider ID: N/A

231 W MAIN ST
EL CAJON, CA 92020
Effective as of 01-FEB-24

KOO, ANITA, OD

Provider ID: N/A

231 W MAIN ST
EL CAJON, CA 92020

C1. 网络提供者名单 专科护理医生

Effective as of 01-JAN-24

KOO, ANITA, OD

Provider ID: N/A

📍 231 W MAIN ST
EL CAJON, CA 92020
Effective as of 01-JUN-24

THACH, QUEEN, OD

Provider ID: N/A

📍 231 W MAIN ST
EL CAJON, CA 92020
Effective as of 01-SEP-24

ZVANUT, DONALD, OD†

Provider ID: N/A

📍 225 W MADISON AVE STE 1
EL CAJON, CA 92020
Effective as of 01-SEP-22

ZVANUT, DONALD, OD

Provider ID: N/A

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-DEC-23

PHYSICIANS ASSISTANT

ALYAS, ALISIA, PA

Provider ID: N/A

📍 1032 BROADWAY
EL CAJON, CA 92021
Teleservice

Effective as of 01-JUN-21

ALYAS, ALISIA, PA

Provider ID: N/A

📍 165 S 1ST ST
EL CAJON, CA 92019
Teleservice

Effective as of 01-JUN-21

HABBOUSH, RANA, PA

Provider ID: N/A

📍 1032 BROADWAY

EL CAJON, CA 92021

Teleservice

Effective as of 01-OCT-23

INDA, PRISCILLA, PA†

Provider ID: N/A

📍 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-JAN-21

INDA, PRISCILLA, PA†

Provider ID: N/A

📍 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-JAN-21

INDA, PRISCILLA, PA†

Provider ID: N/A

📍 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-JAN-21

MERCER, KELLY, PA†

Provider ID: N/A

📍 165 S 1ST ST
EL CAJON, CA 92019
Teleservice

Effective as of 01-APR-21

MERCER, KELLY, PA†

Provider ID: N/A

📍 1032 BROADWAY
EL CAJON, CA 92021
Teleservice

Effective as of 01-APR-21

ROSENBLATT, SHERILYN, PA

Provider ID: N/A

📍 875 EL CAJON BLVD
EL CAJON, CA 92020

Effective as of 01-JUN-23

RYAN, TYLER, PA†

Provider ID: N/A

📍 463 N MAGNOLIA AVE STE
B
EL CAJON, CA 92020

Effective as of 01-DEC-22

VILLA, ANGEL, PA

Provider ID: N/A

📍 470 N MOLLISON AVE
EL CAJON, CA 92021*

Effective as of 01-OCT-24

PSYCHIATRY

KURZ, TROY, MD†

Provider ID: N/A

📍 133 W MAIN ST STE 100
EL CAJON, CA 92020
Effective as of 01-OCT-22

KURZ, TROY, MD†

Provider ID: N/A

📍 133 W MAIN ST STE 100
EL CAJON, CA 92020
Effective as of 01-OCT-22

MATIALEU, LEOPOLDINE, MD

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-DEC-22

MATIALEU, LEOPOLDINE, MD

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-DEC-22

MATIALEU, LEOPOLDINE, MD

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-DEC-22

C1. 网络提供者名单 专科护理医生

MATIALEU, LEOPOLDINE, MD

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-DEC-22

POSTLETHWAITE, ALEJANDRA, MD†

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020*
Effective as of 01-JAN-24

POSTLETHWAITE, ALEJANDRA, MD†

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020*
Effective as of 01-JAN-24

SADDA, REEM, MD

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-MAR-24

SADDA, REEM, MD

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-MAR-24

PSYCHOLOGIST

ARAIZA, ERNESTINA, PSYD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-AUG-21

ARAIZA, ERNESTINA, PSYD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020

Effective as of 01-AUG-21

RADIOLOGY DIAGNOSTIC

MOSHFEGH, AMIEL, MD†

Provider ID: N/A

463 N MAGNOLIA AVE STE
B
EL CAJON, CA 92020
Effective as of 01-SEP-22

REGISTERED PHYSICAL THERAPIST

DASCENZO, EMILY, PT†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Teleservice
Effective as of 01-JUL-22

LONG, RYAN, PT

Provider ID: N/A

181 JAMACHA RD
EL CAJON, CA 92019*
Effective as of 01-JUL-22

SPEECH PATHOLOGIST

HILL, CARLA, SP

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020*
Effective as of 01-OCT-24

SURGERY ORTHOPEDIC

NOURI, LABEED, MD

Provider ID: N/A

330 S MAGNOLIA AVE STE
302
EL CAJON, CA 92020
Effective as of 01-JAN-21

ANESTHESIOLOGY PAIN

MANAGEMENT

DAIRO, BRANDON, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE B301
ENCINITAS, CA 92024
Effective as of 01-DEC-20

CARDIAC

ELECTROPHYSIOLOGY

HAMZEI, ALI, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

WHITWAM, WAYNE, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-AUG-22

CARDIOVASCULAR DISEASE

AVALOS, ROY, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

BACKMAN, JOHN, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

BULIBEK, BATYRJAN, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

C1. 网络提供者名单 专科护理医生

CARTER, STEPHANIE, MD†

Provider ID: N/A

354 SANTA FE DR
ENCINITAS, CA 92024
Effective as of 01-JUN-21

CARTER, STEPHANIE, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
204
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUN-21

CARTER, STEPHANIE, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
204
ENCINITAS, CA 92024
Teleservice
Effective as of 01-SEP-21

DURAN, EDWARD, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE D300
ENCINITAS, CA 92024
Effective as of 01-SEP-24

JACOBY, RICHARD, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

KULHANEK, JAN, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

MCGINTY, PATRICK, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

MEHBOOB, SALMAN, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
204
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-21

RASCH, DAMIAN, DO†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

SAB, SHIV, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUN-22

SAB, SHIV, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Teleservice
Effective as of 01-DEC-22

SHEREV, DIMITRI, MD

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Effective as of 01-SEP-23

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

1200 GARDEN VIEW RD

ENCINITAS, CA 92024
Effective as of 01-FEB-24

GONZALEZ, ANDRES, LAC

Provider ID: N/A

1130 2ND ST
ENCINITAS, CA 92024
Effective as of 01-MAY-23

JULIAN, FIDES, LAC

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-FEB-24

MURRAY, STEVEN, LAC†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-AUG-21

TANG-RITCHIE, LENG, LAC†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-21

YOO, HEATHER, LAC

Provider ID: N/A

477 N EL CAMINO REAL
STE C204
ENCINITAS, CA 92024
Effective as of 01-APR-24

CERTIFIED NURSE PRACTITIONER

BINAVI, HOWNAZ, NP†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-SEP-22

C1. 网络提供者名单 专科护理医生

CARDINELL, ANNA, NP†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-AUG-22

CHAMBERS, KATRINA, NP

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUN-23

DWYER, ERIN, NP

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-JAN-24

FAIQ, JAMILA, NP†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-NOV-22

FAIQ, JAMILA, NP†

Provider ID: N/A

477 N EL CAMINO REAL
STE D200
ENCINITAS, CA 92024
Effective as of 01-JAN-21

HERR, COLLEEN, NP

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024
Effective as of 01-JAN-21

HOOPER, BONNIE, NP†

Provider ID: N/A

477 N EL CAMINO REAL

STE D308

ENCINITAS, CA 92024

Effective as of 01-JAN-21

HOOPER, BONNIE, NP†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-JAN-21

KORMANIK, PATRICIA, NP†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUL-21

LOWE, ASHLEY, NP

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUL-23

LOWE, ASHLEY, NP

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAY-24

MOONEY, PATRICIA, NP†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAY-21

MOONEY, PATRICIA, NP†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice

Effective as of 01-JAN-24

MOORE, HEATHER, NP

Provider ID: N/A

477 N EL CAMINO REAL
STE A100
ENCINITAS, CA 92024
Effective as of 01-APR-24

MORENO, KATHERINE, NP

Provider ID: N/A

700 GARDEN VIEW CT STE
204
ENCINITAS, CA 92024
Teleservice
Effective as of 01-DEC-23

MWAURA, WAIRIMU, NP†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUN-21

MWAURA, WAIRIMU, NP†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

MYERS, JESSE, NP

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024
Effective as of 01-JAN-21

NIZHEBORSKY, OKSANA, NP†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

NIZHEBORSKY, OKSANA, NP

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-24

PACHOE, MADISON, NP

Provider ID: N/A

477 N EL CAMINO REAL
STE A200
ENCINITAS, CA 92024

Teleservice

Effective as of 01-DEC-21

POLIZZI, BRITTANY, NP†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-JAN-22

POLIZZI, BRITTANY, NP†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-SEP-22

POVOLI, LAUREN, NPF

Provider ID: N/A

477 N EL CAMINO REAL
STE A100
ENCINITAS, CA 92024

Effective as of 01-APR-24

SRILASAK, MICHELE, NP†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024

Effective as of 01-JUL-21

STUBBE, AMANDA, NPF

Provider ID: N/A

477 N EL CAMINO REAL
STE A100

ENCINITAS, CA 92024

Effective as of 01-APR-24

SYMANSKI, ELIZABETH, NP†

Provider ID: N/A

477 N EL CAMINO REAL
STE A200
ENCINITAS, CA 92024

Effective as of 01-AUG-22

TOMICICH, STEPHANIE, NP†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-DEC-21

WALLA, MEGAN, NPF

Provider ID: N/A

477 N EL CAMINO REAL
STE A100
ENCINITAS, CA 92024

Effective as of 01-APR-24

WILLEY, MARTI, NP†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-21

WILLEY, MARTI, NP†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-24

WOODRUFF, WHITNEY, NP

Provider ID: N/A

700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024

Effective as of 01-JAN-21

WOODRUFF, WHITNEY, NP

Provider ID: N/A

781 GARDEN VIEW CT STE
102

ENCINITAS, CA 92024

Effective as of 01-MAR-23

WOODRUFF, WHITNEY, NP

Provider ID: N/A

781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024

Effective as of 01-MAR-23

YEO, ALEXANDRIA, NP

Provider ID: N/A

1505 ENCINITAS BLVD
ENCINITAS, CA 92024

Effective as of 01-JUN-23

CERTIFIED REGISTERED NURSE ANESTHETIST

ASHMAN, RANDY, CRNA

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUL-23

ESTABROOK, LARA, CRNA

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Effective as of 01-JUL-23

ESTABROOK, LARA, CRNA

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-JUL-23

FITZPATRICK, APRIL, CRNA

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-MAR-23

FITZPATRICK, APRIL, CRNA

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-MAR-23

KING, APRIL, CRNA

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-MAR-23

KING, APRIL, CRNA

Provider ID: N/A

781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-MAR-23

KING, APRIL, CRNA[†]

Provider ID: N/A

700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-JAN-21

LAZARUS, ELIZABETH, CRNA

Provider ID: N/A

781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-JUL-23

CERTIFIED REGISTERED NURSE MIDWIFE

CORRY, ANDREA, CRNM

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-SEP-23

ELY-KONOSKE, RACHEL, CRNM

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

CHIROPRACTOR

TRAINER, JASON, DC

Provider ID: N/A

1130 2ND ST
ENCINITAS, CA 92024
Effective as of 01-MAR-24

DERMATOLOGY

ANGRA, KUNAL, MD[†]

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUL-21

BRAUN, TARA, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-24

BROUHA, BROOK, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-JAN-24

BROUHA, BROOK, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-NOV-23

GLADSJO, JULIE, MD[†]

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-SEP-22

GLADSJO, JULIE, MD[†]

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-SEP-22

GLADSJO, JULIE, MD[†]

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-JAN-21

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

285 N EL CAMINO REAL
STE 117
ENCINITAS, CA 92024
Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

285 N EL CAMINO REAL
STE 117
ENCINITAS, CA 92024
Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

285 N EL CAMINO REAL
STE 117

C1. 网络提供者名单 专科护理医生

ENCINITAS, CA 92024
Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

📍 285 N EL CAMINO REAL
STE 117

ENCINITAS, CA 92024
Effective as of 01-JAN-24

HEMPERLY, STEPHEN, DO†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024
Teleservice

Effective as of 01-JAN-21

HEMPERLY, STEPHEN, DO†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024
Teleservice

Effective as of 01-NOV-23

KRISHNA, SHEILA, MD

Provider ID: N/A

📍 345 SAXONY RD STE 201
ENCINITAS, CA 92024

Effective as of 01-JUL-24

RILEY, JESSICA, DO†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024
Effective as of 01-SEP-22

RILEY, JESSICA, DO†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024
Effective as of 01-AUG-20

RILEY, JESSICA, DO†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024
Effective as of 01-JAN-21

TOMPKINS, STACY, MD†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024
Effective as of 01-MAY-19

TOMPKINS, STACY, MD

Provider ID: N/A

📍 477 N EL CAMINO REAL
ENCINITAS, CA 92024

Effective as of 01-JUN-24

ENDOCRINOLOGY

METABOLISM DIABETES

HUPFELD, CHRISTOPHER, MD†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 100

ENCINITAS, CA 92024
Effective as of 01-MAR-21

SHAH, NANDI, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-JAN-24

FAMILY PRACTICE

ANDERSON, LINDSEY, DO†

Provider ID: N/A

📍 1505 ENCINITAS BLVD
ENCINITAS, CA 92024

Effective as of 01-AUG-23

ESTRADA, JOHANNA, MD†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220

ENCINITAS, CA 92024*
Effective as of 01-AUG-21

GASTROENTEROLOGY

ALHANKAWI, DHUHA, MD

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE A308

ENCINITAS, CA 92024
Effective as of 01-APR-23

ALHANKAWI, DHUHA, MD

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE A308

ENCINITAS, CA 92024
Effective as of 01-AUG-23

BORTNIKER, ETHAN, MD

Provider ID: N/A

📍 781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024
Effective as of 01-DEC-23

BORTNIKER, ETHAN, MD

Provider ID: N/A

📍 781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024
Effective as of 01-JUN-23

BORTNIKER, ETHAN, MD

Provider ID: N/A

📍 781 GARDEN VIEW CT STE
102

ENCINITAS, CA 92024
Effective as of 01-JUN-23

BORTNIKER, ETHAN, MD

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-JUN-23

BORTNIKER, ETHAN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-MAR-24

DILAURO, STEVEN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAY-24

DILAURO, STEVEN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-OCT-23

DILAURO, STEVEN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAR-23

DILAURO, STEVEN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAR-23

DILAURO, STEVEN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-23

DILAURO, STEVEN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-24

GOLDKLANG, ROBERT, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-JAN-24

GOLDKLANG, ROBERT, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-JAN-21

GOLDKLANG, ROBERT, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-APR-23

GOLDKLANG, ROBERT, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-MAR-23

GOLDKLANG, ROBERT, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-OCT-23

GOLDKLANG, ROBERT, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

GOLDKLANG, ROBERT, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-MAR-23

LAJOIE, ADRIANNE, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-MAR-23

LAJOIE, ADRIANNE, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-OCT-23

LAJOIE, ADRIANNE, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-MAR-23

LAJOIE, ADRIANNE, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100

C1. 网络提供者名单 专科护理医生

ENCINITAS, CA 92024
Effective as of 01-JUN-23

LAJOIE, ADRIANNE, MD†

Provider ID: N/A
700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-JAN-21

LAJOIE, ADRIANNE, MD

Provider ID: N/A
781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-JAN-24

MADANI, BAHAR, MD

Provider ID: N/A
477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024
Effective as of 01-FEB-22

PATEL, JANKI, MD

Provider ID: N/A
781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-FEB-24

PATEL, JANKI, MD†

Provider ID: N/A
700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-21

PATEL, JANKI, MD†

Provider ID: N/A
700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Teleservice

Effective as of 01-JAN-21

PATEL, JANKI, MD

Provider ID: N/A
700 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAR-23

PATEL, JANKI, MD

Provider ID: N/A
700 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUN-23

PATEL, JANKI, MD

Provider ID: N/A
354 SANTA FE DR
ENCINITAS, CA 92024
Effective as of 01-FEB-24

PATEL, JANKI, MD

Provider ID: N/A
781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-MAR-24

SINGH, MARVIN, MD

Provider ID: N/A
781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-JUN-23

SINGH, MARVIN, MD†

Provider ID: N/A
700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-APR-18

GENERAL DENTISTRY

MEHROTRA, SACHI, DDS

Provider ID: N/A
4403 MANCHESTER AVE
STE 101
ENCINITAS, CA 92024
Effective as of 01-OCT-21

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ, MD†

Provider ID: N/A
1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUL-21

HEMATOLOGY / ONCOLOGY

BESSUDO, ALBERTO, MD†

Provider ID: N/A
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-APR-21

BESSUDO, ALBERTO, MD†

Provider ID: N/A
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-21

SULLIVAN, JESSICA, DO†

Provider ID: N/A
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

HOSPICE AND PALLIATIVE

C1. 网络提供者名单 专科护理医生

MEDICINE

RUBENSIK, TAMARA, MD†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 100
ENCINITAS, CA 92024
Effective as of 01-FEB-21

RUBENSIK, TAMARA, MD†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUL-21

INTERNAL MEDICINE

BAUTISTA, JENNIFER, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-DEC-20

BAUTISTA, JENNIFER, MD†

Provider ID: N/A

📍 320 SANTA FE DR STE
107-C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

DELANEY, CODY, DO†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Teleservice
Effective as of 01-OCT-22

EISMAN, SCOTT, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-FEB-22

ELHOFY, ASHRAF, MD†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Effective as of 01-JAN-21

ELLIS, ADAM, MD†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Effective as of 01-JAN-21

KHAYYAT, OMAR, MD†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Effective as of 01-AUG-21

LIU, STEVEN, MD†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Effective as of 01-JAN-21

LIU, ANDREW, MD

Provider ID: N/A

📍 320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Effective as of 01-SEP-23

MCMURRAY, SARAH, DO†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Effective as of 01-JAN-21

MOOLANI, UJJALA, MD

Provider ID: N/A

📍 320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Effective as of 01-MAY-23

NARDI, MELISSA, DO†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Effective as of 01-JAN-21

NELKIN, CORY, DO†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Teleservice

Effective as of 01-OCT-21

NGUYEN, ANDY, DO†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Effective as of 01-JAN-21

NGUYEN, ALEXIE, MD†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024
Effective as of 01-JAN-21

PHAM, STEVEN, MD†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Teleservice
Effective as of 01-NOV-21

RUMMANI, BENNY, DO†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Effective as of 01-JUL-21

C1. 网络提供者名单

专科护理医生

STEADMAN, MICHAEL, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024*
Effective as of 01-JAN-21

TRAN, AMY, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024*
Effective as of 01-JAN-21

TRAN, SHERI, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-APR-21

TRING, ELEANOR, DO†

Provider ID: N/A

662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024*
Effective as of 01-JUL-21

INTERNAL MEDICINE CRITICAL CARE MEDICINE

FUSSELL, KEVIN, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-JUL-21

PINO, ALEJANDRO, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-JUL-21

SHIN, STEPHANIE, MD†

Provider ID: N/A

320 SANTA FE DR STE 107-C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

TRAN, SHERI, MD†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

ZHANG, MICHELLE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAY-22

INTERVENTIONAL CARDIOLOGY

BHATIA, PRERANA, MD

Provider ID: N/A

477 N EL CAMINO REAL
ENCINITAS, CA 92024
Effective as of 01-AUG-23

JACOBY, RICHARD, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE 204
ENCINITAS, CA 92024
Effective as of 01-SEP-21

MEHBOOB, SALMAN, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE 204
ENCINITAS, CA 92024
Teleservice
Effective as of 01-SEP-21

WHITWAM, WAYNE, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-NOV-20

LICENSED CLINICAL SOCIAL WORKER

REBELO, MARCIA, LCSW

Provider ID: N/A

187 CALLE MAGDALENA
STE 212
ENCINITAS, CA 92024
Effective as of 01-OCT-23

MEDICAL ONCOLOGY

FLORES, EDNA, MD†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Effective as of 01-JAN-21

FRAKES, LAURIE, MD†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-21

FRAKES, LAURIE, MD†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

MCCLAY, EDWARD, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE D200
ENCINITAS, CA 92024
Effective as of 01-JAN-21

MCCLAY, EDWARD, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Effective as of 01-FEB-21

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Effective as of 01-MAY-23

LAKHERA, YOGITA, MD†

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAR-17

LAKHERA, YOGITA, MD†

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUL-22

LAKHERA, YOGITA, MD†

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-21

LAKHERA, YOGITA, MD†

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

LAKHERA, YOGITA, MD†

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Teleservice

Effective as of 01-AUG-24

STEER, DYLAN, MD†

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Effective as of 01-JAN-21

NEUROLOGY

BAKER, DAVID, DO

Provider ID: N/A

354 SANTA FE DR
ENCINITAS, CA 92024
Effective as of 01-JAN-24

SCHORR, EMILY, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-MAR-24

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUL-21

DELCORE, LAURA, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Effective as of 01-SEP-22

DRIEBE, AMY, MD†

Provider ID: N/A

781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024
Effective as of 01-SEP-22

MACKAY, GILLIAN, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

SPRING-ROBINSON, CHANDRA, DO

Provider ID: N/A

477 N EL CAMINO REAL
STE C208
ENCINITAS, CA 92024
Effective as of 01-JAN-23

OPHTHALMOLOGY

CULOTTA, ANTHONY, MD†

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Teleservice
Effective as of 01-SEP-24

FISH, STEVEN, MD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-APR-23

FISH, STEVEN, MD

Provider ID: N/A

C1. 网络提供者名单

专科护理医生

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-APR-23

FISH, STEVEN, MD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-APR-23

FISH, STEVEN, MD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-APR-23

HUDSON, HENRY, MD†

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-APR-22

JOHNSTON, ERIC, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE C202
ENCINITAS, CA 92024
Effective as of 01-MAY-21

MCGRAW, JOSEPH, MD†

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-NOV-21

SAMUEL, MICHAEL, MD†

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-FEB-21

SAMUEL, MICHAEL, MD†

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Effective as of 01-MAR-21

VIECHNICKI, TARA, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE C202
ENCINITAS, CA 92024
Effective as of 01-DEC-11

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-JAN-21

ZHAO, TAILUN, MD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-SEP-24

ZHAO, TAILUN, MD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-JAN-24

ZHAO, TAILUN, MD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-JUL-23

ZHAO, TAILUN, MD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-NOV-23

OPTOMETRIST

CAO-NGUYEN, TIEN, OD

Provider ID: N/A

477 N EL CAMINO REAL
STE C202

ENCINITAS, CA 92024
Effective as of 01-JUL-23

DEAN, MOENA, OD†

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-JUL-21

DEAN, MOENA, OD†

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-SEP-22

MARR, RYAN, OD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-MAY-24

MARR, RYAN, OD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-JUL-24

MARR, RYAN, OD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-DEC-22

SOLIS, KEVIN, OD

Provider ID: N/A

477 N EL CAMINO REAL
STE C202
ENCINITAS, CA 92024
Effective as of 01-JUN-23

TAN, CONNIE, OD

Provider ID: N/A

477 N EL CAMINO REAL
STE C202
ENCINITAS, CA 92024

C1. 网络提供者名单 专科护理医生

Effective as of 01-JUN-21

ZAIDI, NOORINA, OD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024*

Effective as of 01-OCT-24

ORAL MAXILLOFACIAL SURGEON

ELI, BRADLEY, DMD

Provider ID: N/A

4403 MANCHESTER AVE
STE 101
ENCINITAS, CA 92024

Teleservice

Effective as of 01-SEP-20

OTOLARYNGOLOGY

REUTHER, MARSHA, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024

Effective as of 01-JAN-21

PEDIATRICS

KOOROS, KOOROSH, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024

Effective as of 01-FEB-22

PHYSICIANS ASSISTANT

DAS, GOURAB, PA

Provider ID: N/A

477 N EL CAMINO REAL
STE A200
ENCINITAS, CA 92024

Effective as of 01-JAN-21

GILLAN, JAMES, PA

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-SEP-24

GILLAN, JAMES, PA†

Provider ID: N/A

320 SANTA FE DR STE
107-C
ENCINITAS, CA 92024

Effective as of 01-JAN-21

HIGGINS, JOSHUA, PA†

Provider ID: N/A

1505 ENCINITAS BLVD
ENCINITAS, CA 92024

Effective as of 01-JAN-22

JOHNSON, RYAN, PA

Provider ID: N/A

351 SANTA FE DR STE 100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-24

MORENO, SYDNIE, PA

Provider ID: N/A

477 N EL CAMINO REAL
STE A200
ENCINITAS, CA 92024

Effective as of 01-APR-24

PELIO, DARREN, PA†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-SEP-22

SMITH, ALLISON, PA

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-MAY-24

SMITH, ALLISON, PA

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-JUN-24

VANETSKY, GARY, PA†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-JAN-21

VANETSKY, GARY, PA†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-JAN-21

PODIATRIST

BERENTER, JAY, DPM†

Provider ID: N/A

501 N EL CAMINO REAL
STE 510
ENCINITAS, CA 92024

Effective as of 01-DEC-21

BERGER, COLBY, DPM

Provider ID: N/A

501 N EL CAMINO REAL
STE 201
ENCINITAS, CA 92024

Effective as of 01-APR-23

BERGER, COLBY, DPM

Provider ID: N/A

501 N EL CAMINO REAL
STE 201
ENCINITAS, CA 92024

Effective as of 01-JUN-23

C1. 网络提供者名单

专科护理医生

DUSTIN, ADAM, DPM[†]

Provider ID: N/A

📍 326 ENCINITAS BLVD STE 100
ENCINITAS, CA 92024
Effective as of 01-FEB-21

GILLES, LOUIS, DPM

Provider ID: N/A

📍 320 SANTA FE DR STE 305
ENCINITAS, CA 92024
Effective as of 01-AUG-23

KREPS, CHRISTOPHER, DPM

Provider ID: N/A

📍 501 N EL CAMINO REAL STE 201
ENCINITAS, CA 92024
Effective as of 01-DEC-23

KREPS, CHRISTOPHER, DPM

Provider ID: N/A

📍 501 N EL CAMINO REAL STE 201
ENCINITAS, CA 92024
Effective as of 01-JUN-23

LIEBERMAN, RONALD, DPM

Provider ID: N/A

📍 501 N EL CAMINO REAL STE 201
ENCINITAS, CA 92024
Effective as of 01-MAY-24

LIEBERMAN, RONALD, DPM

Provider ID: N/A

📍 501 N EL CAMINO REAL STE 201
ENCINITAS, CA 92024
Effective as of 01-DEC-23

RUETENIK, BRAD, DPM

Provider ID: N/A

📍 501 N EL CAMINO REAL STE 201

ENCINITAS, CA 92024
Effective as of 01-MAY-24

RUETENIK, BRAD, DPM

Provider ID: N/A

📍 501 N EL CAMINO REAL STE 201
ENCINITAS, CA 92024
Effective as of 01-DEC-23

PSYCHOLOGIST

GOMEZ, JUANITA, PhD[†]

Provider ID: N/A

📍 1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Effective as of 01-AUG-22

GOMEZ, JUANITA, PhD[†]

Provider ID: N/A

📍 1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Effective as of 01-AUG-22

PULMONARY DISEASES

BAUTISTA, JENNIFER, MD[†]

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

BAUTISTA, JENNIFER, MD[†]

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-24

EISMAN, SCOTT, MD[†]

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-NOV-20

EISMAN, SCOTT, MD[†]

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

EISMAN, SCOTT, MD[†]

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-24

FUSSELL, KEVIN, MD[†]

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-24

FUSSELL, KEVIN, MD[†]

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-22

FUSSELL, KEVIN, MD[†]

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

GADRE, ABHISHEK, MD[†]

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

GADRE, ABHISHEK, MD[†]

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-JUL-21

GADRE, ABHISHEK, MD[†]

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024

C1. 网络提供者名单 专科护理医生

Effective as of 01-SEP-22

GADRE, ABHISHEK, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-SEP-24

HSING, ANDREW, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-SEP-24

HSING, ANDREW, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-MAY-24

HSING, ANDREW, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-JAN-24

HSING, ANDREW, MD†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024

Effective as of 01-JAN-21

KABADI, ALISHA, MD

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-MAY-24

KABADI, ALISHA, MD

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-SEP-24

KABADI, ALISHA, MD

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-SEP-24

LIANG, NI-CHENG, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-SEP-24

LIANG, NI-CHENG, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-MAY-24

LIANG, NI-CHENG, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-NOV-20

LIANG, NI-CHENG, MD†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024

Effective as of 01-JAN-21

MAGANA, MARISA, MD†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024

Effective as of 01-JAN-21

MAGANA, MARISA, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-APR-23

MAKANI, SAMIR, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-APR-23

MAKANI, SAMIR, MD†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024

Effective as of 01-JAN-21

MAKANI, SAMIR, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-NOV-20

MAKANI, SAMIR, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-SEP-24

PINO, ALEJANDRO, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-SEP-22

PINO, ALEJANDRO, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-MAY-24

PINO, ALEJANDRO, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-SEP-24

SARNOFF, ROBERT, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-SEP-24

SARNOFF, ROBERT, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

SARNOFF, ROBERT, MD†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

SARNOFF, ROBERT, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-APR-21

SHIN, STEPHANIE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-DEC-20

SHIN, STEPHANIE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-24

TRAN, SHERI, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-23

TRAN, SHERI, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

TRAN, SHERI, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-SEP-24

ZHANG, MICHELLE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice

Effective as of 01-SEP-24

ZHANG, MICHELLE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice

Effective as of 01-JAN-24

ZHANG, MICHELLE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice

Effective as of 01-MAY-24

ZHANG, MICHELLE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice

Effective as of 01-SEP-23

ZHANG, MICHELLE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice

Effective as of 01-APR-23

RADIATION ONCOLOGY

BEAR, JONATHAN, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-JUN-23

HATTANGADI-GLUTH, JONA, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024
Effective as of 01-DEC-23

HORN, ADAM, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-JUN-23

MACEWAN, IAIN, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024
Effective as of 01-DEC-23

MANSY, GINA, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

MAYADEV, JYOTI, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024
Effective as of 01-DEC-23

MELL, LOREN, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

MURPHY, JAMES, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024

C1. 网络提供者名单 专科护理医生

Effective as of 01-DEC-23

RAHN, DOUGLAS, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-23

ROSE, BRENT, MD†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024

Effective as of 01-DEC-23

SANDHU, AJAY PAL, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-23

SEIBERT, TYLER, MD†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024

Effective as of 01-DEC-23

SHARABI, ANDREW, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-23

SIMPSON, DANIEL, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024

Effective as of 01-DEC-23

STRAKA, CHRISTOPHER, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-23

TYE, KAREN, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-JUN-23

WHITE, EVAN, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-23

YASHAR, CATHERYN, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-23

REGISTERED DIETITIAN / NUTRITIONIST

SALCEDO, ALEXANDRA, RD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-JAN-24

REGISTERED PHYSICAL THERAPIST

DOULL, MATTHEW, PT

Provider ID: N/A

📍 351 SANTA FE DR STE 100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-23

TAMAYO, SYDNIE, PT

Provider ID: N/A

📍 351 SANTA FE DR STE 100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-OCT-23

SLEEP MEDICINE

MENN, STUART, MD

Provider ID: N/A

📍 4403 MANCHESTER AVE
STE 101
ENCINITAS, CA 92024

Effective as of 01-MAR-23

SURGERY COLON SURGERY

PARRY, LISA, MD†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024

Effective as of 01-APR-21

SCHULTZEL, MATTHEW, DO†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024

Effective as of 01-JAN-21

SURGERY GENERAL

ARMANI, AVA, MD†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024

Effective as of 01-JUL-21

BURGESS, DANIEL, DO†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-21

C1. 网络提供者名单 专科护理医生

BURGESS, DANIEL, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE C204
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-21

BURGESS, DANIEL, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024

Teleservice

Effective as of 01-OCT-23

BURGESS, DANIEL, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE C204
ENCINITAS, CA 92024

Teleservice

Effective as of 01-OCT-23

JACOBSEN, GARTH, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-21

RAYAN, SUNIL, MD†

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Teleservice

Effective as of 01-AUG-15

SCHULTZEL, MATTHEW, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE C204
ENCINITAS, CA 92024

Effective as of 01-JUL-20

TOOSIE, KATAYOUN, MD

Provider ID: N/A

351 SANTA FE DR STE 250
ENCINITAS, CA 92024

Effective as of 01-AUG-24

TOOSIE, KATAYOUN, MD

Provider ID: N/A

351 SANTA FE DR STE 250
ENCINITAS, CA 92024

Effective as of 01-JUL-24

WAKILY, HUSSNA, MD

Provider ID: N/A

351 SANTA FE DR STE 250
ENCINITAS, CA 92024

Effective as of 01-JUL-24

SURGERY GENERAL VASCULAR

RAYAN, SUNIL, MD†

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-21

SURGERY ORTHOPEDIC

AFRA, ROBERT, MD†

Provider ID: N/A

317 N EL CAMINO REAL STE
405
ENCINITAS, CA 92024

Effective as of 01-JAN-16

BREMNER, LUKE, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Effective as of 01-DEC-19

BREMNER, LUKE, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Effective as of 01-MAR-23

CHAN, JUSTIN, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-23

CHAN, JUSTIN, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-AUG-20

GROTING, JOHN, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE B301
ENCINITAS, CA 92024

Effective as of 01-NOV-23

HAJNIK, CHRISTOPHER, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-DEC-19

HAJNIK, CHRISTOPHER, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-23

HAMMEL, NATHAN, MD†

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

C1. 网络提供者名单 专科护理医生

Teleservice

Effective as of 01-MAR-23

HAMMEL, NATHAN, MD†

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-DEC-19

KIM, PAUL, MD†

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Effective as of 01-SEP-22

MEINEKE, RYAN, MD†

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAY-22

MEINEKE, RYAN, MD†

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-23

RAISZADEH, RAMIN, MD†

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Effective as of 01-JAN-23

SCHULTZEL, MARK, MD†

Provider ID: N/A

519 ENCINITAS BLVD STE
106
ENCINITAS, CA 92024

Teleservice

Effective as of 01-OCT-22

SURGERY PLASTIC

CHAO, JAMES, MD†

Provider ID: N/A

499 N EL CAMINO REAL
STE C200
ENCINITAS, CA 92024

Effective as of 01-JUL-15

CHEN, STEVEN, MD†

Provider ID: N/A

499 N EL CAMINO REAL
STE C200
ENCINITAS, CA 92024

Effective as of 01-JUL-15

GOSMAN, AMANDA, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-NOV-21

GUPTA, ANSHU, MD

Provider ID: N/A

700 GARDEN VIEW CT STE
208
ENCINITAS, CA 92024

Effective as of 01-MAY-23

GUPTA, ABHAY, MD

Provider ID: N/A

351 SANTA FE DR STE 250
ENCINITAS, CA 92024

Effective as of 01-MAY-23

UROLOGY

COHEN, EDWARD, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-APR-16

COHEN, EDWARD, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-JAN-21

COHEN, EDWARD, MD†

Provider ID: N/A

320 SANTA FE DR STE 305
ENCINITAS, CA 92024

Effective as of 01-SEP-21

COHEN, EDWARD, MD†

Provider ID: N/A

320 SANTA FE DR STE 305
ENCINITAS, CA 92024

Effective as of 01-SEP-22

COHEN, EDWARD, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-JUL-22

DATO, PAUL, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-JAN-24

DICKS, BRIAN, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-JAN-24

KEILLER, DANNY, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-FEB-24

NAITOH, JOHN, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-NOV-21

C1. 网络提供者名单 专科护理医生

NAITOH, JOHN, MD†

Provider ID: N/A

320 SANTA FE DR STE 305
ENCINITAS, CA 92024

Effective as of 01-SEP-22

NEUSTEIN, PAUL, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-FEB-24

NGUYEN, HUNG, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-21

NGUYEN, HUNG, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Teleservice

Effective as of 01-SEP-21

NGUYEN, HUNG, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-24

PE, MARK-RALLY, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-FEB-24

ROBERTS, JAMES, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-FEB-24

VAPNEK, EVAN, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-JAN-24

ADDICTIVE MEDICINE

AGEZE, DANIEL, MD

Provider ID: N/A

550 W WASHINGTON AVE
ESCONDIDO, CA 92025

Effective as of 01-JUL-24

AGEZE, DANIEL, MD

Provider ID: N/A

550 W WASHINGTON AVE
ESCONDIDO, CA 92025*

Effective as of 01-OCT-24

GILL, MANPREET, MD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-JUN-24

ANESTHESIOLOGY

FARUQUE, TANIA, MD†

Provider ID: N/A

255 N ELM ST STE 101
ESCONDIDO, CA 92025

Effective as of 01-SEP-24

FARUQUE, TANIA, MD†

Provider ID: N/A

255 N ELM ST STE 101
ESCONDIDO, CA 92025

Effective as of 01-JAN-21

KHATIBI, NIKAN, DO†

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-JAN-21

KHATIBI, NIKAN, DO†

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-JAN-21

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY, MD

Provider ID: N/A

637 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-JUL-24

COHEN, ZACHARY, MD

Provider ID: N/A

940 E VALLEY PKWY STE K
ESCONDIDO, CA 92025

Effective as of 01-JAN-23

DAIRO, BRANDON, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029

Teleservice

Effective as of 01-NOV-22

GUPTA, PRAGYA, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029

Effective as of 01-AUG-24

KHATIBI, NIKAN, DO†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

KHATIBI, NIKAN, DO[†]

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

KHATIBI, NIKAN, DO[†]

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

KHATIBI, NIKAN, DO[†]

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

PRASAD, RUPA, MD[†]

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-NOV-23

ROBINSON, COLE, MD

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUN-23

CARDIAC ELECTROPHYSIOLOGY

LERNER, JONATHAN, MD

Provider ID: N/A

488 E VALLEY PKWY STE

107

ESCONDIDO, CA 92025

Effective as of 01-JUL-23

SAWHNEY, NAVINDER, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 320
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

SHAH, ABHISHEK, MD[†]

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JAN-23

CARDIOVASCULAR DISEASE

ABELHAD, NADIA, MD

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

CARLSON, STEVEN, MD[†]

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAY-21

DO, HULBERT, MD

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-OCT-23

MALEK, MIKHAIL, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

MOUSSAVIAN, MEHRAN, DO[†]

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-MAY-21

NARAYANAN, MEENA, MD[†]

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-MAY-21

ORR, ROBERT, MD

Provider ID: N/A

225 E 2ND AVE
ESCONDIDO, CA 92025
Effective as of 01-AUG-24

PARIKH, MILIND, DO[†]

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-MAY-21

SARSAM, LUAY, MD

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

C1. 网络提供者名单 专科护理医生

SHAH, ABHISHEK, MD†

Provider ID: N/A

📍 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

SHAH, KULIN, MD†

Provider ID: N/A

📍 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JAN-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

📍 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JAN-23

CERTIFIED

ACUPUNCTURIST

CHEN, SISI, LAC†

Provider ID: N/A

📍 240 W MISSION AVE STE C
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

KIM, MIN JOO, LAC†

Provider ID: N/A

📍 425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-NOV-22

CERTIFIED NURSE

PRACTITIONER

BISHOP, LESLIE, NP†

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029

Teleservice

Effective as of 01-MAR-21

CARNEY, AMY, NP

Provider ID: N/A

📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-23

GARVIN, JOSEPH, NP†

Provider ID: N/A

📍 2125 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-JAN-22

KESHAVARZI, SARA, NPF

Provider ID: N/A

📍 488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025
Effective as of 01-SEP-24

KONYN, CATHERINE, NPF

Provider ID: N/A

📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-APR-23

LEE, SHULAMI, NPF

Provider ID: N/A

📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-SEP-24

LEE, SHULAMI, NPF

Provider ID: N/A

📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

MANCHESTER, KAREN, NP

Provider ID: N/A

📍 2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-FEB-24

MANCHESTER, KAREN, NP

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 302
ESCONDIDO, CA 92029
Effective as of 01-AUG-24

MEYERS, JUDITH, NP†

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 300
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

MILLER, JEAN, NP

Provider ID: N/A

📍 460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

PHELAN, ELISHA, NP

Provider ID: N/A

📍 460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

RICE, ELIZABETH, NP

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

SPAULDING, ENJOLI, NP†

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

WOLF, ELI, NP

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025*
Effective as of 01-OCT-24

WOLF, ELI, NP

Provider ID: N/A

488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025*
Effective as of 01-OCT-24

CERTIFIED REGISTERED NURSE ANESTHETIST

BARBA, ARNEL, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

BROWN, SHENISE, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

FIEDLER, DEREK, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

HASE, KATHLEEN, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

ORTEGA, JOSEPH, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

SEILNACHT-BERNARD, KAREN, CRNA†

Provider ID: N/A

488 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

CERTIFIED REGISTERED NURSE MIDWIFE

ALLEN, ANNE, CRNM†

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

HAMMOND, HEATHER, CRNM

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

ONEILL, THERESE, CRNM†

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

ONEILL, THERESE, CRNM†

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

CHIROPRACTOR

BARTZ, PAUL, DC†

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

FONSECA, ROSANNA, DC

Provider ID: N/A

2065 S ESCONDIDO BLVD
STE 105
ESCONDIDO, CA 92025
Effective as of 01-MAY-21

KAZEM, AHMAD, DC

Provider ID: N/A

701 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-SEP-24

PATEL, BRIJESH, DC

Provider ID: N/A

426 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

ZECHA, RONALD, DC

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

ZECHA, RONALD, DC

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-22

ZECHA, RONALD, DC

Provider ID: N/A

488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025
Effective as of 01-AUG-22

DERMATOLOGY

C1. 网络提供者名单 专科护理医生

ARMSTRONG, PATRICK, MD

Provider ID: N/A

2125 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

VENKAT, ARUN, MD†

Provider ID: N/A

488 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-OCT-13

EMERGENCY MEDICINE

HARE, MARC, MD

Provider ID: N/A

1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025
Effective as of 01-APR-23

ENDOCRINOLOGY

METABOLISM DIABETES

BAILEY, TIMOTHY, MD

Provider ID: N/A

625 CITRACADO PKWY STE
108
ESCONDIDO, CA 92025
Effective as of 01-OCT-23

FAMILY PRACTICE

COBIAN, VANESSA, MD

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025*
Effective as of 01-FEB-24

PATEL, JITENBHAI, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025*

Effective as of 01-AUG-24

PATEL, RAKESH, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-24

PATEL, JITENBHAI, MD

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025*
Effective as of 01-AUG-24

PATEL, RAKESH, MD

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-AUG-24

PATEL, RAKESH, MD

Provider ID: N/A

426 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-24

PATEL, RAKESH, MD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-24

PATEL, RAKESH, MD

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-AUG-24

SCHULTZ, JAMES, MD

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-AUG-24

SCHULTZ, JAMES, MD†

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-24

SHAFT, ALEXANDER, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-FEB-23

SHAFT, ALEXANDER, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-22

GASTROENTEROLOGY

CHELIMILLA, HARITHA, MD

Provider ID: N/A

735 E OHIO AVE STE 204
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

CHELIMILLA, HARITHA, MD

Provider ID: N/A

488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025
Effective as of 01-OCT-20

CHELIMILLA, HARITHA, MD


Provider ID: N/A

735 E OHIO AVE STE 204
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

GARA, NAVEEN, MD†


Provider ID: N/A

C1. 网络提供者名单 专科护理医生

 935 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Effective as of 01-SEP-22


GARA, NAVEEN, MD†

Provider ID: N/A

 661 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21


HASSANEIN, TAREK, MD†

Provider ID: N/A

 488 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-21


HASSANEIN, TAREK, MD†

Provider ID: N/A

 488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-22

HASSANEIN, TAREK, MD†


Provider ID: N/A

 488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAY-22

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE, MA†


Provider ID: N/A

 330 W FELICITA AVE STE
A4
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

HEPATOLOGY

HASSANEIN, TAREK, MD†


Provider ID: N/A

 488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-SEP-24

INTERNAL MEDICINE


CHEN, ANDREW, MD

Provider ID: N/A

 2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-23


EDE, KEKOA, MD

Provider ID: N/A

 460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

EDE, KEKOA, MD

Provider ID: N/A

 425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22


LIU, ANDREW, MD

Provider ID: N/A

 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-SEP-23


LY, SOPHEAP, MD

Provider ID: N/A

 728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-NOV-23

OLIVER, DEANNA, MD†


Provider ID: N/A

 488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025

Effective as of 01-MAR-22

PEARCE, DANIEL, DO


Provider ID: N/A

 460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-OCT-23

INTERVENTIONAL CARDIOLOGY


BAYAT, HAMED, MD

Provider ID: N/A

 2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-23


GORWIT, JEFFREY, MD

Provider ID: N/A

 2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029*
Effective as of 01-MAR-23


RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-DEC-22


RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

SHAH, KULIN, MD†

Provider ID: N/A

 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-APR-23

C1. 网络提供者名单 专科护理医生

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-APR-23

VANICHSARN, CHRISTOPHER, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

LICENSED CLINICAL SOCIAL WORKER

BECERRA, GABRIEL, LCSW

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

BECKMAN, KARI, LCSW

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-SEP-24

CHRISTENSEN, PATTI, LCSW

Provider ID: N/A

1002 E GRAND AVE
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

GUZZO, RICHARD, LCSW

Provider ID: N/A

1002 E GRAND AVE
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

HARRIS, LAURA, LCSW

Provider ID: N/A

1002 E GRAND AVE
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

HARRIS, LAURA, LCSW

Provider ID: N/A

1002 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

MAGOS, DANIEL, LCSW

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

MARTINEZ, NORAYMA, LCSW†

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-NOV-22

ROBLEDO, DAMIAN, LCSW

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-APR-23

ROBLEDO, DAMIAN, LCSW

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

THOMAS, PAULA, LCSW

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

THOMAS, PAULA, LCSW

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-APR-23

VERCHER, ROSHON, LCSW

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-SEP-24

MARRIAGE FAMILY THERAPIST

CABRERA, JOANNE, MFT

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-MAR-24

HOLLEMAN, KEVIN, DO

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-APR-23

HOLLEMAN, KEVIN, DO

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

PETROSIAN, MELISSA, MFT

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

PRATHER, ALLYSON, MFT

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-APR-24

PRATHER, ALLYSON, MFT

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-MAR-24

C1. 网络提供者名单

专科护理医生

TIZNADO, MONICA, MFT

Provider ID: N/A

📍 425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

NEPHROLOGY

AL-DAHHAN, ZAID, MD

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

AL-DAHHAN, ZAID, MD

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

AL-DAHHAN, ZAID, MD

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

AL-DAHHAN, ZAID, MD

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-AUG-23

CHOUDRY, QASIM, MD

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

CHOUDRY, QASIM, MD

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

CHOUDRY, QASIM, MD

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

CHOUDRY, QASIM, MD

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-NOV-23

CHOUDRY, QASIM, MD

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

CHOUDRY, QASIM, MD

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-OCT-23

CHOUDRY, QASIM, MD

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-OCT-23

GREENSTEIN, JOSHUA, MD†

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

GREENSTEIN, JOSHUA, MD†

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

GREENSTEIN, JOSHUA, MD†

Provider ID: N/A

📍 631 E GRAND AVE

ESCONDIDO, CA 92025
Effective as of 01-JAN-21

GREENSTEIN, JOSHUA, MD

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 301
ESCONDIDO, CA 92029
Effective as of 01-AUG-24

HEBREO, JOSEPH, MD†

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

HEBREO, JOSEPH, MD†

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

HEBREO, JOSEPH, MD†

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

HEBREO, JOSEPH, MD†

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-MAR-17

KHAWAR, OSMAN, MD†

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

KHAWAR, OSMAN, MD†

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

C1. 网络提供者名单 专科护理医生

KHAWAR, OSMAN, MD[†]

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

NEYAZ, MOHAMMED, DO[†]

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JAN-21

NEYAZ, MOHAMMED, DO[†]

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JAN-21

NEYAZ, MOHAMMED, DO[†]

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUL-22

NEUROLOGY

DELANEY, MICHAEL, MD[†]

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

DELANEY, MICHAEL, MD[†]

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

DELANEY, MICHAEL, MD[†]

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-FEB-19

DROKER, BRIAN, MD

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-MAR-24

FARNSWORTH, WILLIAM, MD[†]

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-NOV-21

FARNSWORTH, WILLIAM, MD[†]

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JUN-24

FARNSWORTH, WILLIAM, MD[†]

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-FEB-22

FRISHBERG, BENJAMIN, MD[†]

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

FRISHBERG, BENJAMIN, MD[†]

Provider ID: N/A

📍 1955 CITRACADO PKWY

STE 102

ESCONDIDO, CA 92029
Effective as of 01-SEP-22

HAMILTON, ROSS, MD

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029*
Effective as of 01-OCT-24

HUOTT, PATRICK, MD

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JUN-24

HUOTT, PATRICK, MD

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JUN-24

OH, IRENE, MD[†]

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

OH, IRENE, MD[†]

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

PADUGA, REMIA, MD[†]

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-SEP-22

C1. 网络提供者名单 专科护理医生

QUESNELL, TARA, DO†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice

Effective as of 01-JAN-24

SAVANI, AMAN, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JUL-24

SAVANI, AMAN, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JUN-24

SAVANI, AMAN, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-NOV-23

WANG, CHUNYANG, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-MAY-24

WANG, ANCHI, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice

Effective as of 01-JAN-21

WANG, CHUNYANG, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-FEB-24

NEUROPHYSIOLOGY CLINICAL

QUESNELL, TARA, DO†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice

Effective as of 01-NOV-23

OBSTETRICS / GYNECOLOGY

BABKINA, NATALIA, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 302
ESCONDIDO, CA 92029
Effective as of 01-MAY-24

BABKINA, NATALIA, MD

Provider ID: N/A

488 E VALLEY PKWY STE
308
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

BABKINA, NATALIA, MD

Provider ID: N/A

488 E VALLEY PKWY STE
310
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

BULLOCH, EDGAR, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

BULLOCH, EDGAR, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

BULLOCH, EDGAR, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

CIZMAR, BRANISLAV, MD

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

CIZMAR, BRANISLAV, MD

Provider ID: N/A

488 E VALLEY PKWY STE
311
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

CIZMAR, BRANISLAV, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-FEB-24

CIZMAR, BRANISLAV, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 302
ESCONDIDO, CA 92029
Effective as of 01-MAY-24

HINSHAW, PAUL, DO†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

1955 CITRACADO PKWY
STE 302
ESCONDIDO, CA 92029
Effective as of 01-SEP-22

HINSHAW, PAUL, DO[†]

Provider ID: N/A

488 E VALLEY PKWY STE
400
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

HUSKEY, DANA, MD

Provider ID: N/A

488 E VALLEY PKWY STE
310
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

OPHTHALMOLOGY

ABDALLAH, WALID, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-AUG-24

AVALLONE, THOMAS, MD[†]

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-AUG-24

BINDER, NICHOLAS, MD[†]

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-21

BINDER, NICHOLAS, MD[†]

Provider ID: N/A

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026
Effective as of 01-APR-22

BINDER, NICHOLAS, MD[†]

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-23

BINDER, NICHOLAS, MD[†]

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-NOV-23

BINDER, NICHOLAS, MD[†]

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

BINDER, NICHOLAS, MD[†]

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

CARRABY, ARNETT, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

CHOPLIN, NEIL, MD[†]

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-SEP-15

CHOPLIN, NEIL, MD[†]

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-JUL-21

DELENGOCKY, TAYSON, DO

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

GOMEZ, JESSICA, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

HUDSON, HENRY, MD[†]

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-21

HUDSON, HENRY, MD[†]

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

HUDSON, HENRY, MD[†]

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

IP, COLIN, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

KYTASTY, CHRISTINA, DO

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-MAY-24

MANI, MAJID, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

MANI, MAJID, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-AUG-24

MCDONNELL, EMMA, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

MCGRAW, JOSEPH, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-MAY-24

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

MORTON, ASA, MD†

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-NOV-21

MORTON, ASA, MD†

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-AUG-23

PAPASTERGIU, GEORGIOS, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

PATEL, GITANE, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

PATEL, SARJAN, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

PEAIRS, JAMES, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

PONS, MAURICIO, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

PONS, MAURICIO, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

PRABHU, SUJATA, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

PRABHU, SUJATA, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

PRABHU, SUJATA, MD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-21

PRABHU, SUJATA, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-23

RAJSBAUM, MARTIN, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

RAJSBAUM, MARTIN, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

ROESKE, RICHMOND, MD

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-MAR-24

SASSANI, PATRICK, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-MAY-24

SASSANI, PATRICK, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

SHEILS, CATHERINE, MD

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

700 W EL NORTE PKWY

ESCONDIDO, CA 92026
Effective as of 01-JAN-24

SKAF, AYHAM, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

SKAF, AYHAM, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

ZHAO, TAILUN, MD

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-JAN-24

ZHAO, TAILUN, MD

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-JUL-23

ZHAO, TAILUN, MD

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-NOV-23

ZHAO, TAILUN, MD

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-SEP-24

OPTOMETRIST

AOTO, KIM, OD[†]

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

AOTO, KIM, OD[†]

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

AOTO, KIM, OD[†]

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

AOTO, KIM, OD[†]

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-21

AOTO, KIM, OD[†]

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-SEP-22

DYER, SHARON, OD[†]

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

EL-MOGHRABI, ROULA, OD

Provider ID: N/A


1118 W VALLEY PKWY

C1. 网络提供者名单 专科护理医生

ESCONDIDO, CA 92025
Effective as of 01-JUL-24


JULAZADEH, SARA, OD

Provider ID: N/A

 700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-SEP-23


KHALIL, VADY, OD†

Provider ID: N/A

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-NOV-22


KHALIL, VADY, OD†

Provider ID: N/A

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-NOV-22


KHIEU, TINA, OD

Provider ID: N/A

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-NOV-23


KHIEU, TINA, OD

Provider ID: N/A

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-23


KOO, ANITA, OD

Provider ID: N/A

 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

KOO, ANITA, OD

Provider ID: N/A

 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUN-24


KOO, ANITA, OD

Provider ID: N/A

 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24


MARR, RYAN, OD

Provider ID: N/A

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-JUL-24


SCOTT, JEFFREY, OD†

Provider ID: N/A

 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-JAN-22


TAUNTON, PHILIP, OD†

Provider ID: N/A

 700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-SEP-23


TAUNTON, PHILIP, OD†

Provider ID: N/A

 700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-SEP-21

THACH, QUEEN, OD

Provider ID: N/A

 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-SEP-24

TONNU, ANH, OD†


Provider ID: N/A

 700 W EL NORTE PKWY

STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-21


ZAIDI, NOORINA, OD

Provider ID: N/A

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026*
Effective as of 01-OCT-24

ZVANUT, DONALD, OD


Provider ID: N/A

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-AUG-24

OTOLARYNGOLOGY

SHAH, SAURABH, MD


Provider ID: N/A

 225 E 2ND AVE STE 101
ESCONDIDO, CA 92025
Effective as of 01-AUG-24

PEDIATRICS


FIGUEROA RODRIGUEZ, BRENDA, MD

Provider ID: N/A

 425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-MAY-24

FIGUEROA RODRIGUEZ, BRENDA, MD

Provider ID: N/A

 426 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-AUG-24

PHYS MED/ REHAB PAIN MEDICINE

C1. 网络提供者名单 专科护理医生

RICHARDSON, HENRY, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

PHYSICAL MEDICINE / REHABILITATION

TAHAEI, SEYED, MD†

Provider ID: N/A

215 S HICKORY ST STE 116
ESCONDIDO, CA 92025
Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

ABSI, CHRISTIAN, PA

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025*
Effective as of 01-OCT-24

BALDWIN, DONNA, PA†

Provider ID: N/A

1035 E GRAND AVE STE 101
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

CHATFIELD, ALEXANDRA, PA†

Provider ID: N/A

1955 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-FEB-21

COLESON, PAMELA, PA

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

DANESHVAR, ABRAHAM, PA

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-AUG-23

GANGJI, SHAZMIN, PA

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

GANGJI, SHAZMIN, PA

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

HUANG, STEPHANIE, PA†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

MEGALI, NICOLE, PA

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-APR-24

MEHTA, NOOPUR, PA

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

MEHTA, NOOPUR, PA

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

NIAKAMAL, EVAN, PA†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

WANG, GEORGE, PA

Provider ID: N/A

488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025
Effective as of 01-MAY-24

WICKWARE, TRACY, PA

Provider ID: N/A

488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

WICKWARE, TRACY, PA†

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-APR-24

WICKWARE, TRACY, PA†

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-APR-24

WICKWARE, TRACY, PA†

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

WICKWARE, TRACY, PA†

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

WICKWARE, TRACY, PA

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

426 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

WRIGHT, DEREK, PA

Provider ID: N/A

1955 CITRACADO PKWY
ESCONDIDO, CA 92029
Effective as of 01-NOV-23

WRIGHT, DEREK, PA

Provider ID: N/A

1955 CITRACADO PKWY
ESCONDIDO, CA 92029
Effective as of 01-AUG-23

PODIATRIST

CHU, ANDREW, DPM†

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

FARMER, STEVEN, DPM†

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025*
Effective as of 01-SEP-22

HAN, KYOUNG, DPM

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-JAN-22

LARKINS, PHILIP, DPM

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

MEYER, JOAN, DPM

Provider ID: N/A

1147 E GRAND AVE

ESCONDIDO, CA 92025
Effective as of 01-APR-24

MORRIS, JASON, DPM

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUN-21

MORRIS, JASON, DPM

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JAN-23

MORRIS, JASON, DPM

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-SEP-22

NEGRON, RICARDO, DPM

Provider ID: N/A

1001 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

NEGRON, RICARDO, DPM

Provider ID: N/A

1001 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

NEGRON, RICARDO, DPM

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

READ, TRENTON, DPM

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-APR-23

REDKAR, AVANTI, DPM

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

REDKAR, AVANTI, DPM

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-MAY-22

SMITH, COLLIN, DPM†

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-DEC-21

SMITH, COLLIN, DPM†

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

SMITH, COLLIN, DPM†

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-FEB-21

TOUMA, ELIE, DPM†

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-FEB-23

TOUMA, ELIE, DPM

Provider ID: N/A

1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025

C1. 网络提供者名单 专科护理医生

Teleservice

Effective as of 01-APR-23

PSYCHIATRY

BECKER, OLGA, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-JUN-24

BECKER, OLGA, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-JUN-24

CASTILLO, TIFFANY, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-NOV-22

CASTILLO, TIFFANY, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-NOV-22

CHAND, RAVINDRA, MD†

Provider ID: N/A

2185 CITRACADO PKWY
ESCONDIDO, CA 92029

Effective as of 01-JUL-21

CHAND, RAVINDRA, MD†

Provider ID: N/A

2185 CITRACADO PKWY
ESCONDIDO, CA 92029

Effective as of 01-JUL-21

EDE, KEKOA, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025

Effective as of 01-AUG-20

EDE, KEKOA, MD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

EDE, KEKOA, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

EDE, KEKOA, MD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-AUG-20

EDE, KEKOA, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

EDE, KEKOA, MD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-AUG-20

EDE, KEKOA, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025

Effective as of 01-AUG-20

EDE, KEKOA, MD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

FANOUS, ASHRAF, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-JUN-24

FANOUS, ASHRAF, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-MAY-23

FANOUS, ASHRAF, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-JUN-24

FANOUS, ASHRAF, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-MAY-23

FU, KATHERINE, MD

Provider ID: N/A

704 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-FEB-24

FU, KATHERINE, MD

Provider ID: N/A

704 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-FEB-24

HOLLEMAN, KEVIN, DO

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-APR-23

HOLLEMAN, KEVIN, DO

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

C1. 网络提供者名单

专科护理医生

Effective as of 01-JUN-24

HOLLEMAN, KEVIN, DO

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-APR-23

HOLLEMAN, KEVIN, DO

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-JUN-24

KARRIS, BIANCA, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-JUN-24

KARRIS, BIANCA, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-JUN-24

PARASHAR, ANUSHREE, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-JUN-24

PARASHAR, ANUSHREE, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-JUN-24

PARASHAR, ANUSHREE, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-MAR-23

RODARTE, GABRIEL, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-JUL-22

RODARTE, GABRIEL, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-JUL-22

PSYCHOLOGIST

CALOCA, LAURA, PSYD

Provider ID: N/A

488 E VALLEY PKWY STE
411

ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

CALOCA, LAURA, PSYD

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Effective as of 01-AUG-20

CALOCA, LAURA, PSYD

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Effective as of 01-AUG-20

CALOCA, LAURA, PSYD

Provider ID: N/A

488 E VALLEY PKWY STE
411

ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

CARLTON-PENN, CORNELIA, PhD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

CARLTON-PENN, CORNELIA, PhD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-NOV-22

CARLTON-PENN, CORNELIA, PhD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-NOV-22

C1. 网络提供者名单 专科护理医生

**CARLTON-PENN, CORNELIA,
PhD**

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

CHAO, BRIAN, PhD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

CHAO, BRIAN, PhD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

**ESTRADA PATINO, ANGELA,
PSYD**

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

**ESTRADA PATINO, ANGELA,
PSYD**

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

GREENE, ERIC, PSYD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

GREENE, ERIC, PSYD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

**GUARDADO-SOTO, RAQUEL,
PhD**

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-FEB-24

**GUARDADO-SOTO, RAQUEL,
PhD**

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-FEB-24

MEJIAS, JUAN, PhD

Provider ID: N/A

426 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-FEB-24

MEJIAS, JUAN, PhD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

MEJIAS, JUAN, PhD

Provider ID: N/A

426 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-FEB-24

MEJIAS, JUAN, PhD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

SUOZZO, JOSEPH, PhD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

SUOZZO, JOSEPH, PhD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

**VALLEZ-BARLAM, ANDREA,
PhD**

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

**VALLEZ-BARLAM, ANDREA,
PhD**

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

**VALLEZ-BARLAM, ANDREA,
PhD**

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

**VALLEZ-BARLAM, ANDREA,
PhD**

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

**WOODWORTH, JENNIFER,
PSYD**

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

C1. 网络提供者名单 专科护理医生

WOODWORTH, JENNIFER, PSYD

Provider ID: N/A

📍 425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

PULMONARY DISEASES

BENDER, FRANK, MD

Provider ID: N/A

📍 2125 CITRACADO PKWY
STE 230
ESCONDIDO, CA 92029
Effective as of 01-FEB-24

POPPER, STEVEN, MD

Provider ID: N/A

📍 2125 CITRACADO PKWY
STE 230
ESCONDIDO, CA 92029
Effective as of 01-JAN-24

QUAN, MICHELE GRACE, MD†

Provider ID: N/A

📍 2125 CITRACADO PKWY
STE 230
ESCONDIDO, CA 92029
Effective as of 01-SEP-22

RADIATION ONCOLOGY

COLEMAN, LORI, MD†

Provider ID: N/A

📍 2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

FULLER, DONALD, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-MAY-24

FULLER, DONALD, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

FULLER, DONALD, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

FULLER, DONALD, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

FULLER, DONALD, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

IJAZ, TAHIR, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

IJAZ, TAHIR, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

IJAZ, TAHIR, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

IJAZ, TAHIR, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200

ESCONDIDO, CA 92025
Effective as of 01-MAY-24

JABBARI, SIAVASH, MD†

Provider ID: N/A

📍 2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029
Effective as of 01-OCT-22

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-MAY-24

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Teleservice

C1. 网络提供者名单 专科护理医生

Effective as of 01-SEP-22

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-JUL-21

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-MAY-21

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-MAY-24

VOLPP, PAUL, MD†

Provider ID: N/A

2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029

Effective as of 01-JAN-21

RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-SEP-22

REGISTERED PHYSICAL THERAPIST

BOUTELLE, DAVID, PT

Provider ID: N/A

1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027

Effective as of 01-FEB-24

BOUTELLE, BARBARA, PT

Provider ID: N/A

1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027

Effective as of 01-FEB-24

FARRAR, COURTNEY, PT†

Provider ID: N/A

1340 W VALLEY PKWY STE
201

ESCONDIDO, CA 92029

Effective as of 01-JAN-21

FARRAR, COURTNEY, PT

Provider ID: N/A

1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029

Teleservice

Effective as of 01-JUL-23

MCGEE, JACQUELINE, PT

Provider ID: N/A

1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027

Effective as of 01-JAN-21

SPEECH PATHOLOGIST

CALDERON MORALES,

ASTRID, SP

Provider ID: N/A

500 LA TERRAZA BLVD STE
150

ESCONDIDO, CA 92025

Effective as of 01-APR-24

DURNAN, CASSANDRA, SP

Provider ID: N/A

500 LA TERRAZA BLVD STE
150

ESCONDIDO, CA 92025

Effective as of 01-JUL-24

KOUKEYAN, KARIN, SP

Provider ID: N/A

500 LA TERRAZA BLVD STE
150

ESCONDIDO, CA 92025

Effective as of 01-JAN-23

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO, MD

Provider ID: N/A

1045 E PENNSYLVANIA
AVE

ESCONDIDO, CA 92025

Effective as of 01-JUL-24

CASILLAS BERUMEN, SERGIO, MD

Provider ID: N/A

1045 E PENNSYLVANIA
AVE

ESCONDIDO, CA 92025

Effective as of 01-FEB-24

GROVE, JAY, MD†

Provider ID: N/A

2185 CITRACADO PKWY
ESCONDIDO, CA 92029

Teleservice

Effective as of 01-JAN-21

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

1045 E PENNSYLVANIA
AVE

ESCONDIDO, CA 92025

Teleservice

Effective as of 01-AUG-24

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-24

MOLDOVAN, STEFAN, MD[†]
Provider ID: N/A

1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-24

SURGERY GENERAL VASCULAR

CHAMMAS, JOSEPH, MD[†]
Provider ID: N/A

1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

CHANG, ALEXANDER, MD[†]
Provider ID: N/A

625 CITRACADO PKWY STE
203
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

**MORENO MARTINEZ,
ENRIQUE, MD[†]**

Provider ID: N/A

1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-24

NEMCEFF, DENNIS, MD[†]
Provider ID: N/A

625 CITRACADO PKWY STE
203

ESCONDIDO, CA 92025
Effective as of 01-JAN-21

SALLOUM, ALEXANDER, MD[†]

Provider ID: N/A

1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD[†]

Provider ID: N/A

1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-24

SURGERY NEUROLOGICAL

HATEFI, DUSTIN, MD

Provider ID: N/A

2185 CITRACADO PKWY
ESCONDIDO, CA 92029
Effective as of 01-SEP-24

STERN, MARK, MD[†]

Provider ID: N/A

705 E OHIO AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

STERN, MARK, MD[†]

Provider ID: N/A

705 E OHIO AVE
ESCONDIDO, CA 92025
Effective as of 01-SEP-23

SURGERY ORTHOPEDIC

BARBA, DANIEL, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

KNUTSON, THOMAS, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

PALANCA, ARIEL, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-JAN-24

RAISZADEH, RAMIN, MD[†]

Provider ID: N/A

2125 CITRACADO PKWY
STE 310
ESCONDIDO, CA 92029
Effective as of 01-JAN-23

RAISZADEH, RAMIN, MD[†]

Provider ID: N/A

488 E VALLEY PKWY STE
316
ESCONDIDO, CA 92025
Effective as of 01-JAN-23

SHARP, LORRA, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

SURGERY THORACIC

LIN, YUAN, MD

Provider ID: N/A

2130 CITRACADO PKWY

C1. 网络提供者名单 专科护理医生

STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

UROLOGY

ANTHONY, JULIAN, MD

Provider ID: N/A
2130 CITRACADO PKWY
STE 210
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

CARDIOVASCULAR DISEASE

SANGODKAR, SANDEEP, DO†

Provider ID: N/A
591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-MAR-20

SANGODKAR, SANDEEP, DO†

Provider ID: N/A
591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-MAR-20

CERTIFIED ACUPUNCTURIST

WACHNER, KRISTELYN, LAC†

Provider ID: N/A
1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-OCT-22

WACHNER, KRISTELYN, LAC†

Provider ID: N/A
1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-OCT-22

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET, NP

Provider ID: N/A
321 E ALVARADO ST
FALLBROOK, CA 92028
Effective as of 01-APR-24

STARICKA, MELISSA, NPF

Provider ID: N/A
1328 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-FEB-23

CHIROPRACTOR

BARTZ, PAUL, DC†

Provider ID: N/A
1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-22

FARSHLER, ANTHONY, DC†

Provider ID: N/A
1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-22

SHERIDAN, SHANE, DC

Provider ID: N/A
1309 S MISSION RD
FALLBROOK, CA 92028†
Effective as of 01-FEB-24

DERMATOLOGY

GILBOA, RUTH, MD†

Provider ID: N/A
1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JUN-21

ROSS, ANDREW, MD†

Provider ID: N/A
1309 S MISSION RD STE A

FALLBROOK, CA 92028
Effective as of 01-JUL-22

ROSS, ANDREW, MD†

Provider ID: N/A
1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-AUG-20

SAMADY, JOSEPH, MD†

Provider ID: N/A
1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-AUG-20

SAMADY, JOSEPH, MD†

Provider ID: N/A
1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JUL-22

SIRICHOTIRATANA, MELISSA, MD†

Provider ID: N/A
1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JAN-23

VENKAT, ARUN, MD†

Provider ID: N/A
1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JUN-21

WONG, DARRYL, MD†

Provider ID: N/A
1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JUN-21

GASTROENTEROLOGY

HONG, JOHN, MD†

Provider ID: N/A
521 E ELDER ST STE 104

C1. 网络提供者名单 专科护理医生

FALLBROOK, CA 92028
Effective as of 01-JAN-21

INTERNAL MEDICINE

COX, JEREMY, DO

Provider ID: N/A

☒ 591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-NOV-23

MOOLANI, UJJALA, MD

Provider ID: N/A

☒ 591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-MAY-23

INTERVENTIONAL CARDIOLOGY

BISWAS, MIMI, MD

Provider ID: N/A

☒ 591 E ELDER ST STE C
FALLBROOK, CA 92028
Teleservice
Effective as of 01-NOV-23

MESSENGER, BRADLEY, MD†

Provider ID: N/A

☒ 591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-JAN-19

PAREKH, NIRAJ, MD†

Provider ID: N/A

☒ 591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-SEP-24

SANGODKAR, SANDEEP, DO†

Provider ID: N/A

☒ 591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-JAN-19

NEPHROLOGY

AL-DAHHAN, ZAID, MD

Provider ID: N/A

☒ 591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-MAY-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

☒ 591 E ELDER ST STE C
FALLBROOK, CA 92028
Teleservice
Effective as of 01-OCT-23

NEUROLOGY

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

☒ 577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-JUL-19

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

☒ 577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-OCT-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

☒ 577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-OCT-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

☒ 577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-SEP-17

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

☒ 577 E ELDER ST STE E
FALLBROOK, CA 92028

Effective as of 01-OCT-15

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

☒ 577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-APR-22

OBSTETRICS / GYNECOLOGY

STIGEN, THERESA, MD†

Provider ID: N/A

☒ 577 E ELDER ST STE K
FALLBROOK, CA 92028
Effective as of 01-SEP-17

OPHTHALMOLOGY

DONALDSON, JARED, MD†

Provider ID: N/A

☒ 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-JAN-23

DONALDSON, JARED, MD†

Provider ID: N/A

☒ 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-DEC-22

DONALDSON, JARED, MD†

Provider ID: N/A

☒ 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-SEP-22

JOHNSON, ROGER, MD†


Provider ID: N/A

☒ 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-FEB-22

JOHNSON, ROGER, MD†


Provider ID: N/A

C1. 网络提供者名单 专科护理医生

 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-JAN-22

ZHOU, SIWEI, MD[†]


Provider ID: N/A

 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-JUL-23

OPTOMETRIST


ARCHIBALD, JOHN, OD[†]

Provider ID: N/A

 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-DEC-23


ARCHIBALD, JOHN, OD[†]

Provider ID: N/A

 521 E ELDER ST STE 102
FALLBROOK, CA 92028*
Effective as of 01-JUL-23


BULLUM, ANTHONY, OD[†]

Provider ID: N/A

 1328 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-22


COLEMAN, BROOKE, OD[†]

Provider ID: N/A

 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-FEB-22

COOPER, MICHAEL, OD[†]

Provider ID: N/A

 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-FEB-22

COOPER, MICHAEL, OD[†]

Provider ID: N/A


 521 E ELDER ST STE 102

FALLBROOK, CA 92028
Effective as of 01-SEP-22

PEDIATRICS


ROBINSON, DAISY, MD

Provider ID: N/A

 321 E ALVARADO ST
FALLBROOK, CA 92028
Effective as of 01-MAR-23


RONAN, KEVIN, MD

Provider ID: N/A

 321 E ALVARADO ST
FALLBROOK, CA 92028*
Effective as of 01-JUL-24

SMITH, LINDA, MD


Provider ID: N/A

 1328 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-24

PODIATRIST


NEGRON, RICARDO, DPM

Provider ID: N/A

 1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-21


NEGRON, RICARDO, DPM

Provider ID: N/A

 1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-21

NEGRON, RICARDO, DPM

Provider ID: N/A

 1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-22

ALLERGY IMMUNOLOGY

PANGANIBAN, CHRISTINE, MD[†]

Provider ID: N/A

 26672 PORTOLA PKWY STE 110
FOOTHILL RANCH, CA 92610

Effective as of 01-NOV-22

PANGANIBAN, CHRISTINE, MD[†]


Provider ID: N/A

 26672 PORTOLA PKWY STE 110
FOOTHILL RANCH, CA 92610

Effective as of 01-NOV-22

YOSHII, DENIS, DO[†]


Provider ID: N/A

 26750 TOWNE CENTRE DR STE D
FOOTHILL RANCH, CA 92610

Effective as of 01-APR-23

YOSHII, DENIS, DO[†]


Provider ID: N/A

 26750 TOWNE CENTRE DR STE D
FOOTHILL RANCH, CA 92610

Effective as of 01-JAN-18

YOSHII, DENIS, DO[†]

Provider ID: N/A

 26750 TOWNE CENTRE DR STE D
FOOTHILL RANCH, CA 92610

Effective as of 01-APR-23

CERTIFIED NURSE PRACTITIONER

C1. 网络提供者名单 专科护理医生

KHAN, AHAD, NP

Provider ID: N/A

26672 PORTOLA PKWY
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-23

LIU, GRACE, NP

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-23

LIU, GRACE, NP

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-23

VISHEH, PARYA, NP

Provider ID: N/A

26730 TOWNE CENTRE DR
STE 102
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-24

CERTIFIED REGISTERED NURSE MIDWIFE

MCDANIEL-DAVIS, SHAYNA, CRNM

Provider ID: N/A

26672 PORTOLA PKWY STE
108
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-24

MCDANIEL-DAVIS, SHAYNA, CRNM

Provider ID: N/A

26672 PORTOLA PKWY STE
108
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-24

CHIROPRACTOR

TUREK, PAUL, DC

Provider ID: N/A

27462 PORTOLA PKWY STE
201
FOOTHILL RANCH, CA
92610

Effective as of 01-JUL-21

DERMATOLOGY

AHADIAT, OMEED, MD

Provider ID: N/A

26700 TOWNE CENTRE DR
STE 170
FOOTHILL RANCH, CA
92610

Effective as of 01-DEC-23

ENDOCRINOLOGY

METABOLISM DIABETES

AHL, SCOTT, DO†

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-22

GASTROENTEROLOGY

ASHBY, KEVIN, MD

Provider ID: N/A

26700 TOWNE CENTRE DR
STE 100
FOOTHILL RANCH, CA

92610

Effective as of 01-MAR-20

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-NOV-22

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-23

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-NOV-22

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-23

BEMANIAN, SHAHROOZ, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-23

BEMANIAN, SHAHROOZ, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-JAN-23

LEE, PAUL, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-23

OMAN, MATTHEW, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-23

YU, VICTOR, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-23

YU, VICTOR, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-JAN-23

OBSTETRICS / GYNECOLOGY

DAVIS, STEPHANIE, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 108
FOOTHILL RANCH, CA 92610
Effective as of 01-FEB-23

DEJBAKHS, SHEILA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 180
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-22

MILLER, JAMIE, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 108
FOOTHILL RANCH, CA 92610
Effective as of 01-NOV-23

PETERS, AMY, DO†

Provider ID: N/A

26672 PORTOLA PKWY STE 180
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-22

PETERS, AMY, DO

Provider ID: N/A

26672 PORTOLA PKWY STE 108
FOOTHILL RANCH, CA 92610
Effective as of 01-NOV-23

PRICE, KERRY, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 180
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

VU, BAO-KHOI, PA†

Provider ID: N/A

26781 PORTOLA PKWY STE 4E
FOOTHILL RANCH, CA 92610
Effective as of 01-SEP-20

WU, VANNA, PA

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA

C1. 网络提供者名单 专科护理医生

92610
Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

📍 26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

📍 26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAR-24

PULMONARY DISEASES

FRANKLIN RUTLAND, CEDRIC, MD†

Provider ID: N/A

📍 26672 PORTOLA PKWY
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-21

RHEUMATOLOGY

MAHMOOD, FARAH, MD†

Provider ID: N/A

📍 26700 TOWNE CENTRE DR
STE 165
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-19

SURGERY GENERAL

SALEM, YASSER, MD†

Provider ID: N/A

📍 26781 PORTOLA PKWY STE
4E

FOOTHILL RANCH, CA
92610

Effective as of 01-AUG-20

SALEM, YASSER, MD†

Provider ID: N/A

📍 26781 PORTOLA PKWY STE
4E
FOOTHILL RANCH, CA
92610

Effective as of 01-AUG-13

SALEM, YASSER, MD†

Provider ID: N/A

📍 26781 PORTOLA PKWY STE
4E
FOOTHILL RANCH, CA
92610

Effective as of 01-AUG-17

SURGERY PLASTIC

DANESHMAND, HOOTAN, MD

Provider ID: N/A

📍 27462 PORTOLA PKWY STE
100
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-12

DANESHMAND, HOOTAN, MD

Provider ID: N/A

📍 27462 PORTOLA PKWY STE
100
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-18

DANESHMAND, HOOTAN, MD

Provider ID: N/A

📍 27462 PORTOLA PKWY STE
100
FOOTHILL RANCH, CA
92610

Effective as of 01-APR-11

DANESHMAND, HOOTAN, MD

Provider ID: N/A

📍 27462 PORTOLA PKWY STE
100
FOOTHILL RANCH, CA
92610

Effective as of 01-JUN-24

ADDICTIVE MEDICINE

PENT, MICHELLE, MD

Provider ID: N/A

📍 1030 E FLORIDA AVE
HEMET, CA 92543

Effective as of 01-SEP-24

ALLERGY IMMUNOLOGY

BROWN, HOSEA, MD†

Provider ID: N/A

📍 1000 E LATHAM AVE STE B
HEMET, CA 92543

Effective as of 01-FEB-22

BROWN, HOSEA, MD†

Provider ID: N/A

📍 1000 E LATHAM AVE STE B
HEMET, CA 92543

Effective as of 01-MAY-15

BROWN, HOSEA, MD†

Provider ID: N/A

📍 1000 E LATHAM AVE STE B
HEMET, CA 92543

Effective as of 01-JUL-23

SALEH, HANA, MD†

Provider ID: N/A

📍 391 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-SEP-15

ANESTHESIOLOGY

DORAISWAMY, ARUL, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

☐ 1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-MAY-15

DORAISWAMY, ARUL, MD†

Provider ID: N/A

☐ 1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-MAY-15

HYUN, SUZANNE, MD

Provider ID: N/A

☐ 3989 W STETSON AVE STE
102
HEMET, CA 92545
Effective as of 01-MAR-24

JEDAMSKI, WALDTRAUT, MD

Provider ID: N/A

☐ 1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-OCT-19

PANG, GARY, MD†

Provider ID: N/A

☐ 3989 W STETSON AVE STE
102
HEMET, CA 92545
Effective as of 01-MAR-24

ANESTHESIOLOGY PAIN MANAGEMENT

CHEN, HAMILTON, MD†

Provider ID: N/A

☐ 3989 W STETSON AVE STE
102
HEMET, CA 92545
Effective as of 01-MAY-21

DORAISWAMY, ARUL, MD†

Provider ID: N/A

☐ 1264 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-NOV-14

DORAISWAMY, ARUL, MD†

Provider ID: N/A

☐ 1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-NOV-17

GUIANG, RAINIER, MD†

Provider ID: N/A

☐ 3989 W STETSON AVE STE
102
HEMET, CA 92545
Effective as of 01-MAY-21

GUIANG, RAINIER, MD†

Provider ID: N/A

☐ 3989 W STETSON AVE STE
102
HEMET, CA 92545
Effective as of 01-MAR-24

GUIANG, RAINIER, MD†

Provider ID: N/A

☐ 3989 W STETSON AVE STE
102
HEMET, CA 92545
Effective as of 01-JUL-24

HYUN, SUZANNE, MD

Provider ID: N/A

☐ 3989 W STETSON AVE STE
102
HEMET, CA 92545
Effective as of 01-JUL-24

KANU, ABDUL, MD

Provider ID: N/A

☐ 1011 E DEVONSHIRE AVE
HEMET, CA 92543
Teleservice

Effective as of 01-JUN-21

LEIER, TIM, MD

Provider ID: N/A

☐ 1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-SEP-19

PANG, GARY, MD†

Provider ID: N/A

☐ 3989 W STETSON AVE STE
102
HEMET, CA 92545
Effective as of 01-JUL-24

PANG, GARY, MD†

Provider ID: N/A

☐ 3989 W STETSON AVE STE
102
HEMET, CA 92545
Effective as of 01-MAY-21

CARDIOVASCULAR DISEASE

AGARWAL, ASHOK, MD

Provider ID: N/A

☐ 136 S SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-JUL-23

AGGARWAL, SAURABH, MD†

Provider ID: N/A

☐ 949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-AUG-22

AGGARWAL, SAURABH, MD†

Provider ID: N/A

☐ 949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-DEC-21

AGGARWAL, SAURABH, MD†

Provider ID: N/A

☐ 949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-AUG-22

C1. 网络提供者名单 专科护理医生

AGGARWAL, SAURABH, MD†

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543

Effective as of 01-JUL-24

AMIN, JATIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545

Teleservice

Effective as of 01-JUL-24

AMIN, JATIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545

Teleservice

Effective as of 01-MAY-21

ATTIA, NADER, DO†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545

Teleservice

Effective as of 01-MAY-21

ATTIA, NADER, DO†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545

Teleservice

Effective as of 01-AUG-24

ATTIA, NADER, DO†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545

Teleservice

Effective as of 01-SEP-18

ATTIA, NADER, DO†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545

Teleservice

Effective as of 01-JUL-22

ATTIA, NADER, DO†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545

Teleservice

Effective as of 01-MAR-20

BISWAS, MIMI, MD†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545

Teleservice

Effective as of 01-SEP-18

COX, JEREMY, DO†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545

Effective as of 01-SEP-18

GOKHROO, RAHUL, MD†

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543

Effective as of 01-JUL-24

GRANT ANDERSON, BETTY, MD†

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543

Effective as of 01-JUL-24

GRANT ANDERSON, BETTY, MD†

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543

Effective as of 01-AUG-23

MAPLETON, SHARINA, DO

Provider ID: N/A

1030 E FLORIDA AVE
HEMET, CA 92543*

Effective as of 01-NOV-24

PAREKH, NIRAJ, MD†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545

Teleservice

Effective as of 01-SEP-24

PAREKH, NIRAJ, MD†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545

Teleservice

Effective as of 01-SEP-24

PAREKH, NIRAJ, MD†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545

Teleservice

Effective as of 01-SEP-24

RASTOGI, ANIL, MD†

Provider ID: N/A

1275 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-MAY-15

C1. 网络提供者名单 专科护理医生

RASTOGI, ANISHA, MD[†]

Provider ID: N/A

📍 1275 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-AUG-20

RASTOGI, ANISHA, MD[†]

Provider ID: N/A

📍 1275 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-FEB-21

RASTOGI, ANIL, MD[†]

Provider ID: N/A

📍 1275 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-SEP-09

RASTOGI, ANIL, MD[†]

Provider ID: N/A

📍 1275 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-SEP-00

RIVA, GREGORY, MD[†]

Provider ID: N/A

📍 1275 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-MAY-15

CERTIFIED NURSE PRACTITIONER

ABAYA, HONEYLYNN, NP

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-OCT-23

ADEDAYO, TOLULOPE, NP

Provider ID: N/A

📍 1030 E FLORIDA AVE
HEMET, CA 92543

Effective as of 01-FEB-24

ADEDAYO, TOLULOPE, NP[†]

Provider ID: N/A

📍 422 N SAN JACINTO ST STE
A
HEMET, CA 92543

Effective as of 01-APR-21

ADEGBITE, ADEKUNLE, NP[†]

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

ADEGBITE, ADEKUNLE, NP[†]

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

ADEGBITE, ADEKUNLE, NP[†]

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

ADEGBITE, ADEKUNLE, NP[†]

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-SEP-22

ADEGBITE, ADEKUNLE, NP[†]

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-SEP-22

AGUILAR, MICHELLE, NP[†]

Provider ID: N/A

📍 1000 E LATHAM AVE STE G
HEMET, CA 92543

Effective as of 01-MAY-21

AMJAD WARYAM, ASHEE

AMJAD, NP[†]

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-AUG-21

AMJAD WARYAM, ASHEE

AMJAD, NP[†]

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-AUG-21

AMJAD WARYAM, ASHEE

AMJAD, NP[†]

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-DEC-22

AMJAD WARYAM, ASHEE

AMJAD, NP[†]

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-DEC-22

ANEKWE, CHINWE, NP

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-MAY-23

ANEKWE, CHINWE, NP

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-MAY-23

BAKER, SERENA, NP

Provider ID: N/A

📍 3989 W STETSON AVE STE
202

C1. 网络提供者名单 专科护理医生

HEMET, CA 92545
Effective as of 01-JUL-23

BAKER, SERENA, NP

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUL-23

BASA, GRACIOUS, NPF

Provider ID: N/A

📍 901 S STATE ST STE 600
HEMET, CA 92543
Effective as of 01-JUN-24

BEDFORD, RONALD, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-SEP-22

BEDFORD, RONALD, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-SEP-22

BRAR, SUKHDEEP, NP

Provider ID: N/A

📍 255 N GILBERT ST BLDG B4
HEMET, CA 92543
Effective as of 01-SEP-21

BRASKET, ADAM, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-NOV-21

BRASKET, ADAM, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

BRASKET, ADAM, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

EDEM, MARY, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAR-21

HUERTA, CARMEN, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-OCT-22

HUERTA, CARMEN, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-AUG-22

HUERTA, CARMEN, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-AUG-22

HUERTA, CARMEN, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-AUG-22

HUERTA, CARMEN, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-AUG-22

HUERTA, CARMEN, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-DEC-22

IGWE, CHINWENDU, NP†

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-AUG-19

IGWE, CHINWENDU, NP†

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JAN-20

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

IHEMEDU, AMARACHI, NPF

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

IHEMEDU, AMARACHI, NPF

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

IHEMEDU, AMARACHI, NPF

Provider ID: N/A


📍 162 N SANTA FE ST

C1. 网络提供者名单 专科护理医生

HEMET, CA 92543
Effective as of 01-APR-23


IHEMEDU, MAGNUS, NPF

Provider ID: N/A

 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23


IHEMEDU, MAGNUS, NPF

Provider ID: N/A

 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22


IHEMEDU, MAGNUS, NPF

Provider ID: N/A

 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22


JOHNSON, KIMBERLY, NP†

Provider ID: N/A

 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-22


JOHNSON, KIMBERLY, NP†

Provider ID: N/A

 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JAN-23

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUL-23

JOHNSON, KIMBERLY, NP†


Provider ID: N/A

 3989 W STETSON AVE STE

202
HEMET, CA 92545
Effective as of 01-JUL-23


JOHNSON, KIMBERLY, NP†

Provider ID: N/A

 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUL-23


JOHNSON, KIMBERLY, NP†

Provider ID: N/A

 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUL-23


JOHNSON, KIMBERLY, NP†

Provider ID: N/A

 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-22


JOHNSON, KIMBERLY, NP†

Provider ID: N/A

 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-22


JOHNSON, KIMBERLY, NP†

Provider ID: N/A

 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-22


JOHNSON, KIMBERLY, NP†

Provider ID: N/A

 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-MAY-23


JOHNSON, KIMBERLY, NP†

Provider ID: N/A

 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-MAY-23


JONES, LAKESHA, NP†

Provider ID: N/A

 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

JONES, LAKESHA, NP†

Provider ID: N/A

 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22


KUMAR, NINA, NP

Provider ID: N/A

 1030 E FLORIDA AVE
HEMET, CA 92543
Effective as of 01-FEB-24


KUMAR, NINA, NP†

Provider ID: N/A

 422 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-APR-21


LAWHORN, CHRISTA, NPF

Provider ID: N/A

 1701 E FLORIDA AVE
HEMET, CA 92544
Effective as of 01-JAN-24

LE, NGUYEN, NP

Provider ID: N/A

 1030 E FLORIDA AVE
HEMET, CA 92543
Effective as of 01-FEB-24

LEANO, ANYLOU, NP†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-JUL-17

LOWRY, DAVID, NP

Provider ID: N/A

2390 E FLORIDA AVE STE
101
HEMET, CA 92544
Effective as of 01-AUG-24

MELOT, KAREN, NP

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-20

MELOT, KAREN, NP

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-20

MELOT, KAREN, NP

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-20

MILLON, TINA, NPF

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-SEP-23

MILLON, TINA, NPF

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-SEP-23

MILLON, TINA, NPF

Provider ID: N/A

1225 E LATHAM AVE STE A

HEMET, CA 92543

Effective as of 01-SEP-23

NGUYEN, ANDY, NP†

Provider ID: N/A

2390 E FLORIDA AVE STE
104
HEMET, CA 92544
Effective as of 01-JUL-21

NGUYEN, ANDY, NP†

Provider ID: N/A

2390 E FLORIDA AVE STE
104
HEMET, CA 92544
Effective as of 01-JUL-21

O'NEIL, NICOLE, NP†

Provider ID: N/A

1701 E FLORIDA AVE
HEMET, CA 92544
Effective as of 01-MAR-22

ONUOHA, NOJA, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543*
Effective as of 01-NOV-22

ONUOHA, NOJA, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAR-23

ONUOHA, NOJA, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAR-23

ONUOHA, NOJA, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543*

Effective as of 01-NOV-22

PAULHUS, PATRICIA, NP†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-MAR-20

PAULHUS, PATRICIA, NP†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-MAR-20

PAULHUS, PATRICIA, NP†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-MAR-20

RATAJCZAK, CELESTE, NP

Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-FEB-24

SANCHEZ, YAHAIRA, NP†

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-DEC-22

SANCHEZ, YAHAIRA, NP†

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-MAR-22

SANCHEZ, YAHAIRA, NP†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-OCT-22

SANCHEZ, YAHAIRA, NP†
Provider ID: N/A

1003 E FLORIDA AVE STE
104
HEMET, CA 92543
Effective as of 01-OCT-22

**SHARTZER, ANNA KARENINA,
NP†**

Provider ID: N/A

422 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-SEP-22

SHEIKH, SARAH, NP

Provider ID: N/A

901 S STATE ST STE 600
HEMET, CA 92543
Effective as of 01-OCT-16

SHEIKH, SARAH, NP

Provider ID: N/A

901 S STATE ST STE 600
HEMET, CA 92543
Effective as of 01-MAY-23

SHIH, LU-HSUN, NP

Provider ID: N/A

225 LAURSEN ST
HEMET, CA 92543
Effective as of 01-APR-24

SINGH, JOGENDRA, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-22

SINGH, JOGENDRA, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-20

SINGH, JOGENDRA, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-22

SINGH, JOGENDRA, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-20

VALDEVERONA, KATHY, NP†

Provider ID: N/A

4020 W FLORIDA AVE
HEMET, CA 92545
Effective as of 01-NOV-19

VENTURA, ALEXIS, NP

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

VENTURA, ALEXIS, NP

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

VENTURA, ALEXIS, NP

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JAN-23

VENTURA, ALEXIS, NP

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JAN-23

VIDAL, ALYSSA, NPF

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-23

VIDAL, ALYSSA, NPF

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-23

VIDAL, ALYSSA, NPF

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-23

VIDAL, ALYSSA, NPF

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-23

WILLIAM, PHEBEE, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAY-21

WILLIAM, PHEBEE, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAY-21

ZELEDON, JAIME, NP

Provider ID: N/A

422 N SAN JACINTO ST STE
B

C1. 网络提供者名单 专科护理医生

HEMET, CA 92543
Effective as of 01-MAY-18

CHIROPRACTOR

BROWN, KEVIN, DC

Provider ID: N/A
☒ 3012 W FLORIDA AVE
HEMET, CA 92545
Effective as of 01-AUG-23

BROWN, KEVIN, DC†

Provider ID: N/A
☒ 2940 W FLORIDA AVE STE
B
HEMET, CA 92545
Effective as of 01-MAR-22

BROWN, KEVIN, DC

Provider ID: N/A
☒ 3012 W FLORIDA AVE
HEMET, CA 92545
Effective as of 01-AUG-23

BROWN, KEVIN, DC†

Provider ID: N/A
☒ 2940 W FLORIDA AVE STE
B
HEMET, CA 92545
Effective as of 01-MAR-22

HINES, TAYTE, DC

Provider ID: N/A
☒ 903 E DEVONSHIRE AVE
STE D
HEMET, CA 92543
Effective as of 01-JAN-24

ROBINSON, DEAN, DC

Provider ID: N/A
☒ 903 E DEVONSHIRE AVE
STE D
HEMET, CA 92543
Effective as of 01-JUL-22

WACHHOLZ, PAMELA, DC

Provider ID: N/A
☒ 760 W ACACIA AVE STE 113
HEMET, CA 92543
Effective as of 01-SEP-09

WACHHOLZ, PAMELA, DC

Provider ID: N/A
☒ 760 W ACACIA AVE STE 113
HEMET, CA 92543
Effective as of 01-FEB-11

WACHHOLZ, PAMELA, DC

Provider ID: N/A
☒ 760 W ACACIA AVE STE 113
HEMET, CA 92543
Effective as of 01-JUL-23

DERMATOLOGY

HARFORD, ROBERT, MD†

Provider ID: N/A
☒ 750 E LATHAM AVE STE 3
HEMET, CA 92543
Effective as of 01-DEC-20

KOUPAIE, JAFAR, MD

Provider ID: N/A
☒ 3853 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-JUL-24

MITCHELL, JESSE, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-JUL-21

MITCHELL, JESSE, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-JUL-21

MITCHELL, JESSE, MD

Provider ID: N/A
☒ 3989 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-DEC-23

MITCHELL, JESSE, MD

Provider ID: N/A
☒ 3989 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-DEC-23

MITCHELL, JESSE, MD

Provider ID: N/A
☒ 3989 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-DEC-23

MITCHELL, JESSE, MD

Provider ID: N/A
☒ 3989 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-DEC-23

MUDGE, BRADLEY, MD†

Provider ID: N/A
☒ 850 E LATHAM AVE STE 201
HEMET, CA 92543
Teleservice
Effective as of 01-OCT-21

OBBEREMOK, STEVE, MD

Provider ID: N/A
☒ 720 E LATHAM AVE STE 1
HEMET, CA 92543*
Effective as of 01-JUL-23

OBBEREMOK, STEVE, MD

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

901 S STATE ST STE 100
HEMET, CA 92543
Effective as of 01-AUG-23

SAIED, NAGI, MD†

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543
Teleservice
Effective as of 01-NOV-21

SAIED, NAGI, MD†

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543
Teleservice
Effective as of 01-OCT-21

SEYFZADEH, MANOUCHEHR, MD†

Provider ID: N/A

1280 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-JUL-14

EMERGENCY MEDICINE

MATHUR, ARVIND, MD†

Provider ID: N/A

975 SAINT JOHN PL
HEMET, CA 92543
Effective as of 01-APR-23

ENDOCRINOLOGY

METABOLISM DIABETES

HAIDER, SHANZAY, MD

Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-MAR-24

HAIDER, SHANZAY, MD

Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-MAR-24

HAIDER, SHANZAY, MD

Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-MAR-24

HAIDER, UZMA, MD†

Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-DEC-20

HAIDER, UZMA, MD†

Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-NOV-23

HAIDER, UZMA, MD†

Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-DEC-20

HAIDER, UZMA, MD†

Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-APR-24

HAIDER, UZMA, MD†

Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-JUL-21

HAIDER, SHANZAY, MD

Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-MAR-24

SEYED, KAZEM, MD†

Provider ID: N/A

750 E LATHAM AVE STE 1
HEMET, CA 92543
Effective as of 01-AUG-20

FAMILY PRACTICE

CHAMBI-HERNANDEZ, RUTH, MD

Provider ID: N/A

1035 SAINT JOHN PL
HEMET, CA 92543
Effective as of 01-MAY-23

GASTROENTEROLOGY

CHAKRABARTY, MILANKUMAR, MD†

Provider ID: N/A

1003 E FLORIDA AVE STE 101
HEMET, CA 92543
Effective as of 01-AUG-20

CHAKRABARTY, MILANKUMAR, MD†

Provider ID: N/A

1003 E FLORIDA AVE STE 101
HEMET, CA 92543
Effective as of 01-JUL-23

CHAKRABARTY, MILANKUMAR, MD†

Provider ID: N/A

1003 E FLORIDA AVE STE 101
HEMET, CA 92543
Effective as of 01-MAY-15

CHAKRABARTY, MILANKUMAR, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-MAY-15

CHAKRABARTY, MILANKUMAR, MD†

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-SEP-09

NAKKA, SREENIVASA, MD†

Provider ID: N/A

949 CALHOUN PL STE A
HEMET, CA 92543
Teleservice
Effective as of 01-JUL-23

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-JUL-23

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-MAY-22

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-MAY-22

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101

HEMET, CA 92543
Effective as of 01-DEC-22

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
104
HEMET, CA 92543
Effective as of 01-DEC-22

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-APR-22

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-JAN-22

SINGHVI, AJEET, MD†

Provider ID: N/A

397 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-DEC-17

HEMATOLOGY / ONCOLOGY

AGAJANIAN, RICHY, MD

Provider ID: N/A

1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-JUL-23

BANTA, WARREN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-AUG-22

BANTA, WARREN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-AUG-22

BANTA, WARREN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-AUG-22

BANTA, WARREN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-AUG-22

BANTA, WARREN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-AUG-22

BASERI, BABAK, MD

Provider ID: N/A

1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-23

BELLO, OSAGIE, MD

Provider ID: N/A

2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-OCT-23

BELLO, OSAGIE, MD

Provider ID: N/A

2390 E FLORIDA AVE STE

C1. 网络提供者名单 专科护理医生

105
HEMET, CA 92544
Effective as of 01-OCT-23

BELLO, OSAGIE, MD

Provider ID: N/A
2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-OCT-23

LEE, BYUNG, DO†

Provider ID: N/A
2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-JUL-21

LEE, BYUNG, DO†

Provider ID: N/A
2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-JUL-21

LEE, BYUNG, DO†

Provider ID: N/A
2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-JUL-21

MARJON, PHILIP, MD

Provider ID: N/A
1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-23

MOST, CAROLE, MD†

Provider ID: N/A
2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-SEP-18

MOST, CAROLE, MD†

Provider ID: N/A
2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-SEP-18

MOST, CAROLE, MD†

Provider ID: N/A
2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-SEP-18

MOST, CAROLE, MD†

Provider ID: N/A
2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-MAR-21

SARWARI, NAWID, MD

Provider ID: N/A
1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-23

SAUNDERS, PHILLIP, DO

Provider ID: N/A
1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-23

SAUNDERS, PHILLIP, DO

Provider ID: N/A
1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-JUL-24

SAUNDERS, PHILLIP, DO†

Provider ID: N/A
1011 E DEVONSHIRE AVE
STE 201
HEMET, CA 92543
Effective as of 01-DEC-20

SCHWERKOSKE, JOHN, MD

Provider ID: N/A
1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-JUL-23

SHUM, MERRILL, MD

Provider ID: N/A
1011 E DEVONSHIRE AVE
STE 201
HEMET, CA 92543
Effective as of 01-JUL-23

TSAI, JAMES, MD†

Provider ID: N/A
201 LAURSEN ST
HEMET, CA 92543
Effective as of 01-SEP-09

TSANG, WALTER, MD†

Provider ID: N/A
2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-FEB-20

TSANG, WALTER, MD†

Provider ID: N/A
2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-FEB-20

TSANG, WALTER, MD†

Provider ID: N/A
2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-FEB-20

HOSPICE AND PALLIATIVE MEDICINE

TAECHARVONGPHAIROJ,

C1. 网络提供者名单 专科护理医生

VEERAVAT, MD

Provider ID: N/A

☒ 850 E LATHAM AVE STE
205
HEMET, CA 92543

Effective as of 01-MAR-24

INTERNAL MEDICINE

DHIMAN, DARSHAN, MD†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-DEC-23

DHIMAN, DARSHAN, MD†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-DEC-23

GRANT ANDERSON, BETTY, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE D
HEMET, CA 92543

Effective as of 01-JUN-17

MATHIAS, HERMAN, MD†

Provider ID: N/A

☒ 391 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-DEC-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Teleservice

Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Teleservice

Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Teleservice

Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Teleservice

Effective as of 01-SEP-23

PEARCE, DANIEL, DO

Provider ID: N/A

☒ 1030 E FLORIDA AVE
HEMET, CA 92543

Effective as of 01-OCT-23

RIVA, GREGORY, MD†

Provider ID: N/A

☒ 1275 E LATHAM AVE STE C
HEMET, CA 92543

Effective as of 01-APR-21

INTERNAL MEDICINE

GERIATRIC MEDICINE

MATHIAS, HERMAN, MD†

Provider ID: N/A

☒ 391 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-AUG-95

INTERVENTIONAL CARDIOLOGY

AGARWAL, ASHOK, MD

Provider ID: N/A

☒ 136 S SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-JAN-17

AGARWAL, ASHOK, MD

Provider ID: N/A

☒ 136 S SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-JAN-17

AGARWAL, ASHOK, MD

Provider ID: N/A

☒ 136 S SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-JAN-17

AMIN, JATIN, MD†

Provider ID: N/A

☒ 3853 W STETSON AVE STE
104
HEMET, CA 92545

Teleservice

Effective as of 01-JAN-19

ATTIA, NADER, DO†

Provider ID: N/A

☒ 3853 W STETSON AVE STE
104
HEMET, CA 92545

Teleservice

Effective as of 01-JAN-19

BISWAS, MIMI, MD†

Provider ID: N/A

☒ 3853 W STETSON AVE STE
104
HEMET, CA 92545

Teleservice

Effective as of 01-JAN-19

C1. 网络提供者名单 专科护理医生

COX, JEREMY, DO†

Provider ID: N/A

☒ 3853 W STETSON AVE STE
104
HEMET, CA 92543
Effective as of 01-JAN-19

GOKHROO, RAHUL, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-DEC-22

GOKHROO, RAHUL, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-DEC-22

GOKHROO, RAHUL, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-DEC-22

GRANT ANDERSON, BETTY, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-JUL-14

MESSENGER, BRADLEY, MD†

Provider ID: N/A

☒ 3853 W STETSON AVE STE
104
HEMET, CA 92543
Effective as of 01-JAN-19

PAREKH, NIRAJ, MD†

Provider ID: N/A

☒ 3853 W STETSON AVE STE
104
HEMET, CA 92543

Teleservice

Effective as of 01-SEP-24

PAREKH, NIRAJ, MD†

Provider ID: N/A

☒ 3853 W STETSON AVE STE
104
HEMET, CA 92543

Teleservice

Effective as of 01-SEP-24

RASTOGI, ANISHA, MD†

Provider ID: N/A

☒ 1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-AUG-20

RIVA, GREGORY, MD†

Provider ID: N/A

☒ 1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-MAR-14

RIVA, GREGORY, MD†

Provider ID: N/A

☒ 1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-13

SANGODKAR, SANDEEP, DO

Provider ID: N/A

☒ 3853 W STETSON AVE STE
104
HEMET, CA 92543
Effective as of 01-NOV-23

LICENSED CLINICAL SOCIAL WORKER

ARIAS ALISHAHI, ELIZABETH, LCSW

Provider ID: N/A

☒ 903 E DEVONSHIRE AVE
STE D

HEMET, CA 92543

Effective as of 01-JAN-21

BRINSON, CIRSTEN, LCSW†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-22

BRINSON, CIRSTEN, LCSW†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-22

GRANDISON, BROOKE, LCSW

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-FEB-24

GRANDISON, BROOKE, LCSW

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-FEB-24

HARRIS, JACQUELLIN, LCSW

Provider ID: N/A

☒ 1030 E FLORIDA AVE
HEMET, CA 92543
Effective as of 01-SEP-24

HERSH, LINDSEY, LCSW†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23

HERSH, LINDSEY, LCSW†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23

C1. 网络提供者名单 专科护理医生

HERSH, LINDSEY, LCSW†
Provider ID: N/A
☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-AUG-22

JONES, VALORIA, LCSW†
Provider ID: N/A
☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JAN-23

JONES, VALORIA, LCSW†
Provider ID: N/A
☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23

JONES, VALORIA, LCSW†
Provider ID: N/A
☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23

JONES, VALORIA, LCSW†
Provider ID: N/A
☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23

**PIDDINGTON, CHRISTINE,
LCSW†**
Provider ID: N/A
☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAR-21

**PIDDINGTON, CHRISTINE,
LCSW†**
Provider ID: N/A
☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

PIDDINGTON, CHRISTINE,

LCSW†
Provider ID: N/A
☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

**TABIL-GALAPON, BERNICE,
LCSW**
Provider ID: N/A
☒ 1030 E FLORIDA AVE
HEMET, CA 92543
Effective as of 01-JUL-23

**VALDEZ-HERNANDEZ, ISRAEL,
LCSW†**
Provider ID: N/A
☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JAN-23

**VALDEZ-HERNANDEZ, ISRAEL,
LCSW†**
Provider ID: N/A
☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

**VALDEZ-HERNANDEZ, ISRAEL,
LCSW†**
Provider ID: N/A
☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JAN-23

**VALDEZ-HERNANDEZ, ISRAEL,
LCSW†**
Provider ID: N/A
☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

**MARRIAGE FAMILY
THERAPIST**

POOR, PATRICK, MFT†
Provider ID: N/A
☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

POOR, PATRICK, MFT†
Provider ID: N/A
☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

MEDICAL ONCOLOGY

PARSI, HOOMAN, MD
Provider ID: N/A
☒ 1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-23

SHAIKH, ANWER, MD
Provider ID: N/A
☒ 1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-JUL-24

SHAIKH, ANWER, MD
Provider ID: N/A
☒ 1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-23

NEPHROLOGY

CHANG, DAVID, MD†
Provider ID: N/A
☒ 850 E LATHAM AVE STE D
HEMET, CA 92543
Effective as of 01-NOV-06

CHANG, DAVID, MD†
Provider ID: N/A
☒ 1011 E DEVONSHIRE AVE
STE 201
HEMET, CA 92543

C1. 网络提供者名单 专科护理医生

Effective as of 01-SEP-09

CHANG, DAVID, MD†

Provider ID: N/A

📍 1011 E DEVONSHIRE AVE
STE 201
HEMET, CA 92543

Effective as of 01-SEP-09

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-SEP-17

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-MAR-18

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-SEP-17

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

📍 3989 W STETSON AVE
HEMET, CA 92545

Effective as of 01-AUG-17

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

📍 3989 W STETSON AVE

HEMET, CA 92545

Effective as of 01-AUG-17

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-AUG-17

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-OCT-20

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-OCT-17

DHIMAN, DARSHAN, MD†

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-APR-18

DHIMAN, DARSHAN, MD†

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-DEC-15

DHIMAN, DARSHAN, MD†

Provider ID: N/A

📍 3989 W STETSON AVE STE
202

HEMET, CA 92545

Effective as of 01-DEC-15

DHIMAN, DARSHAN, MD†

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-DEC-15

DHIMAN, DARSHAN, MD†

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-DEC-15

DHIMAN, DARSHAN, MD†

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-MAR-21

ISHAK, SALAM, MD†

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-AUG-20

NAGASUNDER, ARABHI, DO

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545

Teleservice

Effective as of 01-NOV-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545

Teleservice

C1. 网络提供者名单 专科护理医生

Effective as of 01-OCT-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Teleservice

Effective as of 01-OCT-23

NATH, ASHOK, MD†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-APR-20

YAN, ERIC, MD

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-JUN-23

YAN, ERIC, MD

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-JUN-23

YAN, ERIC, MD

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-JUN-23

YOUSSEF, AMR, DO†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-JUN-22

YOUSSEF, AMR, DO†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-SEP-22

YOUSSEF, AMR, DO†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-SEP-22

OBSTETRICS / GYNECOLOGY

NIHIRA, MIKIO, MD†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-NOV-20

NIHIRA, MIKIO, MD†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-NOV-20

NIHIRA, MIKIO, MD†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-NOV-20

RIZVI, SYED, MD†

Provider ID: N/A

☒ 1600 E FLORIDA AVE STE
315
HEMET, CA 92544

Effective as of 01-MAR-22

RIZVI, SYED, MD†

Provider ID: N/A

☒ 1600 E FLORIDA AVE STE
315

HEMET, CA 92544

Effective as of 01-FEB-17

URSO, MARY JO, DO†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-DEC-20

URSO, MARY JO, DO†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-DEC-20

URSO, MARY JO, DO†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-DEC-20

URSO, MARY JO, DO†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-DEC-20

URSO, MARY JO, DO†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-DEC-20

URSO, MARY JO, DO†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-DEC-20

URSO, MARY JO, DO†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

C1. 网络提供者名单 专科护理医生

Effective as of 01-JUL-23

OCCUPATIONAL THERAPIST

BONILLA, EDWARD, OT

Provider ID: N/A

☐ 3989 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-DEC-23

BONILLA, EDWARD, OT

Provider ID: N/A

☐ 3989 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-DEC-23

JENSEN, BROOKE, OT†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
150
HEMET, CA 92545

Effective as of 01-JAN-20

OPHTHALMOLOGY

CHOW, JASON, MD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-FEB-24

CHOW, JASON, MD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JUL-23

CHOW, JASON, MD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-OCT-22

CHOW, JASON, MD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-SEP-22

JACOBS, JEFFREY, MD†

Provider ID: N/A

☐ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-SEP-09

JACOBS, JEFFREY, MD†

Provider ID: N/A

☐ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-NOV-08

JACOBS, JEFFREY, MD†

Provider ID: N/A

☐ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-JUL-18

JACOBS, JEFFREY, MD†

Provider ID: N/A

☐ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-JUL-23

JACOBSON, ARTHUR, MD†

Provider ID: N/A

☐ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-JUL-23

JACOBSON, ARTHUR, MD†

Provider ID: N/A

☐ 2390 E FLORIDA AVE STE

207

HEMET, CA 92544

Effective as of 01-SEP-09

JACOBSON, ARTHUR, MD†

Provider ID: N/A

☐ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-MAR-98

JOHNSON, ROGER, MD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JUL-23

JOSEPH, JEFFREY, MD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-AUG-19

JOSEPH, JEFFREY, MD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-DEC-21

JOSEPH, JEFFREY, MD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-AUG-20

LEE, JOHN, MD†

Provider ID: N/A

☐ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-JUL-23

LEE, JOHN, MD†

Provider ID: N/A


☐ 2390 E FLORIDA AVE STE

C1. 网络提供者名单 专科护理医生

207
HEMET, CA 92544
Effective as of 01-FEB-11


LEE, JOHN, MD†

Provider ID: N/A

 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-MAR-14


LEE, JOHN, MD†

Provider ID: N/A

 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-JAN-11


NAMBIAR, MARGARET, MD†

Provider ID: N/A

 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-FEB-20


PHILLIPS, BARRATT, MD†

Provider ID: N/A

 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-MAY-14


PHILLIPS, BARRATT, MD†

Provider ID: N/A

 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JAN-22


PHILLIPS, BARRATT, MD†

Provider ID: N/A

 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-SEP-09


PHILLIPS, BARRATT, MD†

Provider ID: N/A

 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JAN-22


SKINNER, ANTHONY, MD

Provider ID: N/A

 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-APR-24


SKINNER, ANTHONY, MD

Provider ID: N/A

 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-APR-24


SKINNER, ANTHONY, MD

Provider ID: N/A

 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-APR-24


SORENSEN, ROBERT, MD†

Provider ID: N/A

 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JAN-22


SORENSEN, ROBERT, MD†

Provider ID: N/A

 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-23


SORENSEN, ROBERT, MD†

Provider ID: N/A

 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-SEP-09


SORENSEN, ROBERT, MD†

Provider ID: N/A

 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-DEC-21


VIDOR, IRA, MD†

Provider ID: N/A

 361 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-JUL-19


WARNER, MICHAEL, MD†

Provider ID: N/A

 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Teleservice
Effective as of 01-SEP-09


WARNER, MICHAEL, MD†

Provider ID: N/A

 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Teleservice
Effective as of 01-MAR-14


WARNER, MICHAEL, MD†

Provider ID: N/A

 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Teleservice
Effective as of 01-JUL-23

WARNER, MICHAEL, MD†

Provider ID: N/A

 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Teleservice
Effective as of 01-MAR-14

OPTOMETRIST

ARCHIBALD, JOHN, OD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-DEC-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-23

BARR, AUSTIN, OD

Provider ID: N/A

☐ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

☐ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-MAR-23

BARR, AUSTIN, OD

Provider ID: N/A

☐ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

☐ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-NOV-22

COLEMAN, BROOKE, OD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-AUG-20

COLEMAN, BROOKE, OD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-23

COLEMAN, BROOKE, OD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-11

FENNEMA, ERIC, OD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-FEB-22

FENNEMA, ERIC, OD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-SEP-22

LANE, KEVIN, OD†

Provider ID: N/A

☐ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-JUL-23

LANE, KEVIN, OD†

Provider ID: N/A

☐ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-FEB-11

LANE, KEVIN, OD†

Provider ID: N/A

☐ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-SEP-09

LARSON, BRETT, OD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-FEB-22

LARSON, BRETT, OD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-23

LARSON, BRETT, OD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-AUG-20

LARSON, BRETT, OD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-SEP-10

MC CLEARY, DAVID, OD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-23

MC CLEARY, DAVID, OD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-AUG-18

MC CLEARY, DAVID, OD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-DEC-21

TADROS, JESSICA, OD†

Provider ID: N/A

☐ 2390 E FLORIDA AVE STE

C1. 网络提供者名单 专科护理医生

207
HEMET, CA 92544
Effective as of 01-JUL-23

ULIBARRI, MATTHEW, OD†

Provider ID: N/A
☑ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-JUL-23

PEDIATRIC ENDOCRINOLOGY

SEYED, KAZEM, MD†

Provider ID: N/A
☑ 750 E LATHAM AVE STE 1
HEMET, CA 92543
Effective as of 01-MAY-15

SEYED, KAZEM, MD†

Provider ID: N/A
☑ 750 E LATHAM AVE STE 1
HEMET, CA 92543
Effective as of 01-MAY-15

SEYED, KAZEM, MD†

Provider ID: N/A
☑ 750 E LATHAM AVE STE 1
HEMET, CA 92543
Effective as of 01-OCT-10

PHYS MED/ REHAB PAIN MEDICINE

CHEN, HAMILTON, MD†

Provider ID: N/A
☑ 3989 W STETSON AVE STE
102
HEMET, CA 92545
Effective as of 01-JUL-24

PHYSICAL MEDICINE / REHABILITATION

AILINANI, HARY, MD

Provider ID: N/A
☑ 1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-MAY-21

CHEN, HAMILTON, MD†

Provider ID: N/A
☑ 3989 W STETSON AVE STE
102
HEMET, CA 92545
Effective as of 01-MAR-24

LEE, JONATHAN KWANG, MD†

Provider ID: N/A
☑ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-JUL-15

PHYSICIANS ASSISTANT

ANDERSON, MATTHEW, PA†

Provider ID: N/A
☑ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-AUG-21

BAKER, ROBERT, PA

Provider ID: N/A
☑ 1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A
☑ 1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

☑ 1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A
☑ 1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A
☑ 1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

CAGATAY, HARRIER, PA†

Provider ID: N/A
☑ 422 N SAN JACINTO ST STE
B-C
HEMET, CA 92543
Effective as of 01-AUG-20

CAGATAY, HARRIER, PA†

Provider ID: N/A
☑ 1011 E DEVONSHIRE AVE
HEMET, CA 92543
Effective as of 01-AUG-20

CERALDE, ALAN, PA†

Provider ID: N/A
☑ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-AUG-16

CERALDE, ALAN, PA†

Provider ID: N/A
☑ 3889 W STETSON AVE STE
100
HEMET, CA 92545

C1. 网络提供者名单 专科护理医生

Effective as of 01-AUG-16

CERALDE, ALAN, PA†

Provider ID: N/A

☞ 3889 W STETSON AVE STE
100
HEMET, CA 92545

Effective as of 01-AUG-16

CERALDE, ALAN, PA†

Provider ID: N/A

☞ 3889 W STETSON AVE STE
100
HEMET, CA 92545

Effective as of 01-NOV-16

CURTIS, DANIEL, PA†

Provider ID: N/A

☞ 949 CALHOUN PL STE D
HEMET, CA 92543

Effective as of 01-MAY-23

CURTIS, DANIEL, PA†

Provider ID: N/A

☞ 949 CALHOUN PL STE D
HEMET, CA 92543

Effective as of 01-DEC-22

CURTIS, DANIEL, PA†

Provider ID: N/A

☞ 949 CALHOUN PL STE D
HEMET, CA 92543

Effective as of 01-DEC-22

CURTIS, DANIEL, PA†

Provider ID: N/A

☞ 949 CALHOUN PL STE D
HEMET, CA 92543

Effective as of 01-JUL-24

DE CARO, ROBERT, PA†

Provider ID: N/A

☞ 1264 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-OCT-19

DIETZLER, MARQUE, PA†

Provider ID: N/A

☞ 4020 W FLORIDA AVE
HEMET, CA 92545

Effective as of 01-JUL-19

GONZALEZ, KEVIN, PA

Provider ID: N/A

☞ 3989 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-DEC-23

GONZALEZ, KEVIN, PA

Provider ID: N/A

☞ 3989 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-DEC-23

GONZALEZ, KEVIN, PA

Provider ID: N/A

☞ 3989 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-DEC-23

GONZALEZ, KEVIN, PA

Provider ID: N/A

☞ 3989 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-DEC-23

HUNSAKER, NALANI, PA†

Provider ID: N/A

☞ 1515 W FLORIDA AVE
HEMET, CA 92543

Effective as of 01-NOV-23

HUNSAKER, NALANI, PA†

Provider ID: N/A

☞ 1515 W FLORIDA AVE
HEMET, CA 92543

Effective as of 01-DEC-20

HUNSAKER, NALANI, PA†

Provider ID: N/A

☞ 1515 W FLORIDA AVE
HEMET, CA 92543

Effective as of 01-DEC-20

LANIER, JAME, PA†

Provider ID: N/A

☞ 1264 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-OCT-19

LANIER, JAME, PA†

Provider ID: N/A

☞ 1264 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-JUL-17

MACHO, DANIELLA, PA†

Provider ID: N/A

☞ 1701 E FLORIDA AVE
HEMET, CA 92544

Effective as of 01-FEB-17

MITCHELL, PAUL, PA

Provider ID: N/A

☞ 422 N SAN JACINTO ST STE
B
HEMET, CA 92543

Effective as of 01-JUN-18

MITCHELL, PAUL, PA

Provider ID: N/A

☞ 1011 E DEVONSHIRE AVE
STE 101
HEMET, CA 92543

Effective as of 01-FEB-24

MOORE, PAMELA, PA†

Provider ID: N/A

☞ 3889 W STETSON AVE STE
120
HEMET, CA 92545

C1. 网络提供者名单 专科护理医生

Effective as of 01-DEC-17

QUEROL, CYRUS, PA

Provider ID: N/A

☒ 901 S STATE ST STE 100
HEMET, CA 92543

Effective as of 01-APR-24

RODDICK, JASON, PA

Provider ID: N/A

☒ 3989 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-DEC-23

RODDICK, JASON, PA

Provider ID: N/A

☒ 3989 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-DEC-23

RODDICK, JASON, PA†

Provider ID: N/A

☒ 3853 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-JUL-23

RODDICK, JASON, PA

Provider ID: N/A

☒ 3989 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-DEC-23

RODDICK, JASON, PA

Provider ID: N/A

☒ 3989 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-DEC-23

SHORES, CLORINDA, PA†

Provider ID: N/A

☒ 255 N GILBERT ST BLDG B4
HEMET, CA 92543

Effective as of 01-OCT-17

SMITH, ANTHONY, PA†

Provider ID: N/A

☒ 3889 W STETSON AVE STE
200
HEMET, CA 92545

Effective as of 01-JUN-18

SMITH, ANTHONY, PA†

Provider ID: N/A

☒ 3889 W STETSON AVE STE
200
HEMET, CA 92545

Effective as of 01-JUN-18

SZCZESIK, KRYSTIAN, PA†

Provider ID: N/A

☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545

Effective as of 01-MAY-18

SZCZESIK, KRYSTIAN, PA†

Provider ID: N/A

☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545

Effective as of 01-MAY-18

SZCZESIK, KRYSTIAN, PA†

Provider ID: N/A

☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545

Effective as of 01-MAY-18

PODIATRIST

DRAKE, ROBERT, DPM

Provider ID: N/A

☒ 255 N GILBERT ST STE B1
HEMET, CA 92543

Effective as of 01-APR-15

DRAKE, ROBERT, DPM

Provider ID: N/A

☒ 255 N GILBERT ST STE B1
HEMET, CA 92543

Effective as of 01-APR-15

DRAKE, ROBERT, DPM

Provider ID: N/A

☒ 255 N GILBERT ST STE B1
HEMET, CA 92543*

Effective as of 01-JUL-23

DRAKE, ROBERT, DPM

Provider ID: N/A

☒ 255 N GILBERT ST STE B1
HEMET, CA 92543

Effective as of 01-APR-15

HAAS, RICHARD, DPM†

Provider ID: N/A

☒ 760 W ACACIA AVE STE 117
HEMET, CA 92543

Effective as of 01-JUL-23

PAOLERCIO, NANCY, DPM

Provider ID: N/A

☒ 255 N GILBERT ST STE B1
HEMET, CA 92543

Effective as of 01-MAR-17

PAOLERCIO, NANCY, DPM

Provider ID: N/A

☒ 255 N GILBERT ST STE B1
HEMET, CA 92543

Effective as of 01-MAR-17

PAOLERCIO, NANCY, DPM

Provider ID: N/A

☒ 255 N GILBERT ST STE B1
HEMET, CA 92543

Effective as of 01-MAR-17

PSYCHIATRY

C1. 网络提供者名单

专科护理医生

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-SEP-17

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-MAR-15

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-JUL-24

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-JUN-17

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-SEP-17

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-JUL-24

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-JUN-17

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-MAR-15

JAKKULA, JAGAN, MD†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-NOV-23

JAKKULA, JAGAN, MD†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-OCT-20

JAKKULA, JAGAN, MD†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-AUG-22

JAKKULA, JAGAN, MD†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-AUG-22

JAKKULA, JAGAN, MD†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-NOV-23

JAKKULA, JAGAN, MD†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-OCT-20

JAKKULA, JAGAN, MD†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-AUG-22

JAKKULA, JAGAN, MD†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-AUG-22

PENT, MICHELLE, MD

Provider ID: N/A

1030 E FLORIDA AVE
HEMET, CA 92543

Effective as of 01-SEP-24

PENT, MICHELLE, MD

Provider ID: N/A

1030 E FLORIDA AVE
HEMET, CA 92543

Effective as of 01-SEP-24

PERSAUD, PRIA, MD

Provider ID: N/A

903 E DEVONSHIRE AVE
STE D
HEMET, CA 92543

Effective as of 01-AUG-20

PERSAUD, PRIA, MD

Provider ID: N/A

903 E DEVONSHIRE AVE
STE D
HEMET, CA 92543

Effective as of 01-AUG-20

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-JUN-21

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

C1. 网络提供者名单 专科护理医生

Effective as of 01-SEP-23

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-JUN-21

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-SEP-23

PSYCHOLOGIST

DUNN, JOSEPH, PhD

Provider ID: N/A

☒ 1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543

Effective as of 01-JUN-23

DUNN, JOSEPH, PhD

Provider ID: N/A

☒ 1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543

Effective as of 01-JUN-23

PULMONARY DISEASES

LU, CHONG PING, MD†

Provider ID: N/A

☒ 1000 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-SEP-00

LU, CHONG PING, MD†

Provider ID: N/A

☒ 1000 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-JUL-23

LU, CHONG PING, MD†

Provider ID: N/A

☒ 1000 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-SEP-09

LU, CHONG PING, MD†

Provider ID: N/A

☒ 1000 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-SEP-09

RADIATION ONCOLOGY

RHA, JANICE, MD†

Provider ID: N/A

☒ 430 W STETSON AVE
HEMET, CA 92543

Effective as of 01-DEC-21

RADIOLOGY DIAGNOSTIC

BURROUGHS, GLORIA, MD†

Provider ID: N/A

☒ 850 E LATHAM AVE STE 101
HEMET, CA 92543

Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD†

Provider ID: N/A

☒ 850 E LATHAM AVE STE 101
HEMET, CA 92543

Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD†

Provider ID: N/A

☒ 850 E LATHAM AVE STE 101
HEMET, CA 92543

Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD†

Provider ID: N/A

☒ 540 N JACINTO ST
HEMET, CA 92543

Effective as of 01-MAR-07

REGISTERED PHYSICAL THERAPIST

MONTERO, MARIA, PT

Provider ID: N/A

☒ 1515 W FLORIDA AVE STE E
HEMET, CA 92543

Effective as of 01-APR-23

MONTERO, MARIA, PT

Provider ID: N/A

☒ 1515 W FLORIDA AVE STE E
HEMET, CA 92543

Effective as of 01-APR-23

SMITH, DIANNE, PT†

Provider ID: N/A

☒ 1515 W FLORIDA AVE STE E
HEMET, CA 92543

Effective as of 01-JUN-17

RHEUMATOLOGY

COLBURN, KEITH, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE F
HEMET, CA 92543

Effective as of 01-MAR-21

MEHTA, AMAL, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE F
HEMET, CA 92543

Effective as of 01-SEP-18

MEHTA, AMAL, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE F
HEMET, CA 92543

Effective as of 01-JUL-23

RAMASWAMY, DHARMARAJAN, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

949 CALHOUN PL STE F
HEMET, CA 92543
Effective as of 01-JUL-23

RAMASWAMY, DHARMARAJAN, MD†

Provider ID: N/A

949 CALHOUN PL STE F
HEMET, CA 92543
Effective as of 01-SEP-18

SURGERY COLON SURGERY

GORSKI, TITO, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

GORSKI, TITO, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

SURGERY GENERAL

ATCHISON, MARVIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

ATCHISON, MARVIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-SEP-22

ATCHISON, MARVIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-JUL-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-JUL-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

ATCHISON, MARVIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-DEC-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-DEC-21

BARRERA, KAYLENE, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

3853 W STETSON AVE STE

105

HEMET, CA 92545

Effective as of 01-MAY-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-SEP-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-APR-22

GORSKI, TITO, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-APR-22

GORSKI, TITO, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-SEP-22

GORSKI, YARA, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-SEP-22

GORSKI, TITO, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-FEB-24

C1. 网络提供者名单 专科护理医生

IGWE, DANIEL, MD[†]

Provider ID: N/A

📄 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-JUL-18

IGWE, DANIEL, MD[†]

Provider ID: N/A

📄 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-JUL-18

IGWE, DANIEL, MD[†]

Provider ID: N/A

📄 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-JUL-18

JOHNSEN, HEGE, MD[†]

Provider ID: N/A

📄 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

JOHNSEN, HEGE, MD[†]

Provider ID: N/A

📄 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

JOHNSEN, HEGE, MD[†]

Provider ID: N/A

📄 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-SEP-22

JOHNSEN, HEGE, MD[†]

Provider ID: N/A

📄 3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-APR-22

MAC, OLIVIA, MD[†]

Provider ID: N/A

📄 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-DEC-22

NAFIU, BOLAJI, MD[†]

Provider ID: N/A

📄 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-APR-20

NAFIU, BOLAJI, MD[†]

Provider ID: N/A

📄 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-SEP-22

NOURI, SARVENAZ, MD[†]

Provider ID: N/A

📄 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-NOV-22

SHARMA, SURENDRA, MD[†]

Provider ID: N/A

📄 4020 W FLORIDA AVE
HEMET, CA 92545
Effective as of 01-SEP-09

SHARMA, SURENDRA, MD[†]

Provider ID: N/A

📄 4020 W FLORIDA AVE
HEMET, CA 92545
Effective as of 01-SEP-00

SHARMA, SURENDRA, MD[†]

Provider ID: N/A

📄 4020 W FLORIDA AVE

HEMET, CA 92545

Effective as of 01-SEP-09

TIU, BRIAN, MD[†]

Provider ID: N/A

📄 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-SEP-22

WANG, XIUJIE, MD[†]

Provider ID: N/A

📄 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-SEP-19

WANG, XIUJIE, MD[†]

Provider ID: N/A

📄 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-DEC-21

SURGERY GENERAL VASCULAR

GORSKI, YARA, MD[†]

Provider ID: N/A

📄 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

GORSKI, YARA, MD[†]

Provider ID: N/A

📄 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

KARMUR, AMIT, DO[†]

Provider ID: N/A

📄 3853 W STETSON AVE STE
105

C1. 网络提供者名单 专科护理医生

HEMET, CA 92545
Effective as of 01-JAN-22

NAFIU, BOLAJI, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-DEC-21

NAFIU, BOLAJI, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

TIU, BRIAN, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-APR-22

WANG, XIUJIE, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-OCT-20

WANG, XIUJIE, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-OCT-20

WANG, XIUJIE, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

WANG, XIUJIE, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

SURGERY HEAD

LE, SANG, MD†

Provider ID: N/A
☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-JUL-15

SURGERY ORTHOPEDIC

ALLEN, JONATHAN, MD†

Provider ID: N/A
☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Teleservice
Effective as of 01-DEC-21

ALLEN, JONATHAN, MD†

Provider ID: N/A
☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Teleservice
Effective as of 01-DEC-21

ALLEN, JONATHAN, MD†

Provider ID: N/A
☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Teleservice
Effective as of 01-APR-24

ALLEN, JONATHAN, MD†

Provider ID: N/A

☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Teleservice
Effective as of 01-JUL-15

BURTON, PAUL, DO†

Provider ID: N/A
☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-JUL-15

BURTON, PAUL, DO†

Provider ID: N/A
☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-MAR-21

BURTON, PAUL, DO†

Provider ID: N/A
☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-APR-24

BURTON, PAUL, DO†

Provider ID: N/A
☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-DEC-21

BURTON, PAUL, DO†

Provider ID: N/A
☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-DEC-21

CAPUTO, ROY, MD

Provider ID: N/A
☒ 3889 W STETSON AVE STE
100

C1. 网络提供者名单 专科护理医生

HEMET, CA 92545
Effective as of 01-APR-24

CHAN, JASON, MD

Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-JUL-24

ELSISSY, PETER, MD†

Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-JUL-24

ELSISSY, PETER, MD†

Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-AUG-21

ELSISSY, PETER, MD†

Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-AUG-21

ELSISSY, PETER, MD†

Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAY-16

ELSISSY, PETER, MD†

Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAR-24

GHAZAL, RONNY, MD

Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAR-24

GRAMES, BARRY, MD†

Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAY-16

GRAMES, BARRY, MD†

Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAR-24

GRAMES, BARRY, MD†

Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-JUL-24

GRAMES, BARRY, MD†

Provider ID: N/A
3889 W STETSON AVE STE 200
HEMET, CA 92545
Effective as of 01-MAR-21

GUSTAFSON, GEORGE, MD†

Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-JUL-24

GUSTAFSON, GEORGE, MD†

Provider ID: N/A
3889 W STETSON AVE STE

100
HEMET, CA 92545
Effective as of 01-AUG-15

HADLEY, ZACHARY, MD

Provider ID: N/A
3889 W STETSON AVE
HEMET, CA 92545
Effective as of 01-MAY-24

HADLEY, ZACHARY, MD†

Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-JUL-24

HUSAIN, ASGHAR, MD

Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAR-24

LAROSE, CONNOR, MD†

Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAR-21

LE, SANG, MD†

Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAR-21

LE, SANG, MD†

Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-JUL-15

C1. 网络提供者名单 专科护理医生

LE, SANG, MD†

Provider ID: N/A

📍 3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-JUL-15

LE, SANG, MD†

Provider ID: N/A

📍 3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-NOV-16

MATIKO, JAMES, MD†

Provider ID: N/A

📍 3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAR-24

PANSE, MILIND, MD†

Provider ID: N/A

📍 1225 E LATHAM AVE STE A
HEMET, CA 92543*
Effective as of 01-JUL-23

POWERS, BRET, DO

Provider ID: N/A

📍 3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-SEP-24

WONG, ANDREW, MD†

Provider ID: N/A

📍 1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-NOV-09

UROLOGY

NIHIRA, MIKIO, MD†

Provider ID: N/A

📍 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-OCT-21

NIHIRA, MIKIO, MD†

Provider ID: N/A

📍 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-OCT-21

FAMILY PRACTICE

CHISUM, FAITH, MD

Provider ID: N/A

📍 949 PALM AVE
IMPERIAL BEACH, CA 91932
Effective as of 01-FEB-23

SUMMERS-DAY, COURTNEY, MD†

Provider ID: N/A

📍 949 PALM AVE
IMPERIAL BEACH, CA 91932*
Effective as of 01-JUL-22

INTERNAL MEDICINE

RYAN, DANA, MD

Provider ID: N/A

📍 949 PALM AVE
IMPERIAL BEACH, CA 91932
Effective as of 01-APR-23

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON, PT

Provider ID: N/A

📍 600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-FEB-24

DORSEY, KYLE, PT

Provider ID: N/A

📍 600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-FEB-24

HERMAN, RACHEL, PT

Provider ID: N/A

📍 600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-FEB-24

KARANDE, PRACHI, PT†

Provider ID: N/A

📍 600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-JAN-22

NGUYEN, TIA, PT

Provider ID: N/A

📍 600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-MAR-24

NOVENCIDO, ANDREW, PT†

Provider ID: N/A

📍 600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-SEP-22

SUGGS, SARAH, PT

Provider ID: N/A

📍 600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-MAY-23

VILLANUEVA, GIOVANNI, PT†

Provider ID: N/A

📍 600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-JAN-21

ALLERGY IMMUNOLOGY

CARR, WARNER, MD

Provider ID: N/A

📍 15785 LAGUNA CANYON

C1. 网络提供者名单 专科护理医生

RD STE 100
IRVINE, CA 92618
Effective as of 01-JUL-23

FRIEDMAN, BRUCE, MD†
Provider ID: N/A

☞ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-JUL-23

FRIEDMAN, BRUCE, MD†
Provider ID: N/A

☞ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23

FRIEDMAN, BRUCE, MD†
Provider ID: N/A

☞ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23

FRIEDMAN, BRUCE, MD†
Provider ID: N/A

☞ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23

FRIEDMAN, BRUCE, MD†
Provider ID: N/A

☞ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23

FRIEDMAN, BRUCE, MD†
Provider ID: N/A

☞ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23

FRIEDMAN, BRUCE, MD†
Provider ID: N/A

☞ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-DEC-21

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-DEC-21

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-DEC-21

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-DEC-21

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-JUL-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-DEC-21

LEE-KIM, CHRISTINE, DO

Provider ID: N/A

☞ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-FEB-23

LEE-KIM, CHRISTINE, DO

Provider ID: N/A

☞ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-FEB-23

MEHTA, VINAY, MD

Provider ID: N/A

☞ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☞ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☞ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☞ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☞ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23

VENKAT, GEETA, MD†

Provider ID: N/A

☞ 18 ENDEAVOR STE 208
IRVINE, CA 92618

C1. 网络提供者名单 专科护理医生

Effective as of 01-OCT-17

VENKAT, GEETA, MD[†]

Provider ID: N/A

☐ 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-OCT-17

ANESTHESIOLOGY

HO, LARRY, MD

Provider ID: N/A

☐ 15701 ROCKFIELD BLVD
IRVINE, CA 92618

Effective as of 01-SEP-10

PERERA-THANGARATNAM, D, MD[†]

Provider ID: N/A

☐ 5 HOLLAND STE 101
IRVINE, CA 92618

Effective as of 01-SEP-19

ANESTHESIOLOGY PAIN MANAGEMENT

BESHAI, ALFRED, MD

Provider ID: N/A

☐ 16405 SAND CANYON AVE
STE 210
IRVINE, CA 92618

Effective as of 01-MAR-24

BESHAI, ALFRED, MD

Provider ID: N/A

☐ 16405 SAND CANYON AVE
STE 210
IRVINE, CA 92618

Effective as of 01-JUN-22

BESHAI, ALFRED, MD

Provider ID: N/A

☐ 16405 SAND CANYON AVE
STE 210
IRVINE, CA 92618

Effective as of 01-DEC-23

HO, LARRY, MD

Provider ID: N/A

☐ 15701 ROCKFIELD BLVD
IRVINE, CA 92618

Effective as of 01-OCT-01

HO, LARRY, MD

Provider ID: N/A

☐ 15701 ROCKFIELD BLVD
IRVINE, CA 92618

Effective as of 01-APR-11

JILLANI, ASIF, MD

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-NOV-17

JILLANI, ASIF, MD

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-NOV-17

MAHROU, REZA, MD[†]

Provider ID: N/A

☐ 113 WATERWORKS WAY
STE 345
IRVINE, CA 92618

Effective as of 01-JAN-15

MAHROU, REZA, MD[†]

Provider ID: N/A

☐ 113 WATERWORKS WAY
STE 345
IRVINE, CA 92618

Effective as of 01-JAN-15

RAFIZAD, AMIR, MD[†]

Provider ID: N/A

☐ 113 WATERWORKS WAY

STE 345

IRVINE, CA 92618

Effective as of 01-JAN-15

RAFIZAD, AMIR, MD[†]

Provider ID: N/A

☐ 113 WATERWORKS WAY
STE 345
IRVINE, CA 92618

Effective as of 01-JAN-15

AUDIOLOGIST

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

☐ 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-NOV-22

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

☐ 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-NOV-22

CARDIAC

ELECTROPHYSIOLOGY

BURRIS, RYAN, MD

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-NOV-22

BURRIS, RYAN, MD

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-NOV-22

MITIKU, TEFERI, MD[†]

Provider ID: N/A

☐ 16305 SAND CANYON AVE

C1. 网络提供者名单 专科护理医生

STE 255
IRVINE, CA 92618
Effective as of 01-FEB-22

MITIKU, TEFERI, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-FEB-22

WARRIER, NIKHIL, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-OCT-23

CARDIOVASCULAR DISEASE

ASHTIANI, ALI, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-MAY-22

ASHTIANI, ALI, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-FEB-22

ASHTIANI, ALI, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-FEB-22

ASHTIANI, ALI, MD

Provider ID: N/A

16300 SAND CANYON AVE

STE 201
IRVINE, CA 92618
Effective as of 01-OCT-23

COHEN, STEPHEN, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-OCT-23

COHEN, STEPHEN, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

COHEN, STEPHEN, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

COHEN, STEPHEN, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

COHEN, STEPHEN, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-MAY-22

DOAN VAN, NICOLAS, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-DEC-21

DOAN VAN, NICOLAS, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-OCT-23

ELSAYED, SARAH SABRY, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-OCT-23

ELSAYED, SARAH SABRY, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-JAN-22

ESLAMI, BAHRAM, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-OCT-23

ESLAMI, BAHRAM, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

ESLAMI, BAHRAM, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

ESLAMI, BAHRAM, MD[†]

Provider ID: N/A

C1. 网络提供者名单
专科护理医生

16300 SAND CANYON AVE
 STE 201
 IRVINE, CA 92618
 Effective as of 01-APR-18

ESLAMI, BAHRAM, MD†
 Provider ID: N/A

16300 SAND CANYON AVE
 STE 201
 IRVINE, CA 92618
 Effective as of 01-APR-18

ESLAMI-FARSANI, MAHMOUD, MD†
 Provider ID: N/A

16300 SAND CANYON AVE
 STE 201
 IRVINE, CA 92618
 Effective as of 01-APR-18

ESLAMI-FARSANI, MAHMOUD, MD†
 Provider ID: N/A

16300 SAND CANYON AVE
 STE 201
 IRVINE, CA 92618
 Effective as of 01-OCT-23

MELTZER, PAUL, MD†
 Provider ID: N/A

16300 SAND CANYON AVE
 STE 201
 IRVINE, CA 92618
 Effective as of 01-OCT-23

MELTZER, PAUL, MD†
 Provider ID: N/A

16300 SAND CANYON AVE
 STE 201
 IRVINE, CA 92618
 Effective as of 01-JAN-20

MELTZER, PAUL, MD†
 Provider ID: N/A

16300 SAND CANYON AVE

STE 201
 IRVINE, CA 92618
 Effective as of 01-APR-18

MELTZER, PAUL, MD†
 Provider ID: N/A

16300 SAND CANYON AVE
 STE 201
 IRVINE, CA 92618
 Effective as of 01-APR-18

MELTZER, PAUL, MD†
 Provider ID: N/A

16300 SAND CANYON AVE
 STE 201
 IRVINE, CA 92618
 Effective as of 01-APR-18

MELTZER, PAUL, MD†
 Provider ID: N/A

16300 SAND CANYON AVE
 STE 201
 IRVINE, CA 92618
 Effective as of 01-MAY-22

NGUYEN, HOANG, MD†
 Provider ID: N/A

16300 SAND CANYON AVE
 STE 708
 IRVINE, CA 92618
 Effective as of 01-DEC-21

NGUYEN, HUY, MD†
 Provider ID: N/A

16305 SAND CANYON AVE
 STE 255
 IRVINE, CA 92618
 Effective as of 01-JAN-20

NGUYEN, HOANG, MD†
 Provider ID: N/A

16300 SAND CANYON AVE
 STE 708
 IRVINE, CA 92618
 Effective as of 01-OCT-23

NI, YU-MING, MD†
 Provider ID: N/A

16300 SAND CANYON AVE
 STE 708
 IRVINE, CA 92618
 Effective as of 01-OCT-23

NI, YU-MING, MD†
 Provider ID: N/A

16300 SAND CANYON AVE
 STE 708
 IRVINE, CA 92618
 Effective as of 01-AUG-22

PATEL, SANJIV, MD†
 Provider ID: N/A

16300 SAND CANYON AVE
 STE 708
 IRVINE, CA 92618
 Effective as of 01-OCT-23

PATEL, SANJIV, MD†
 Provider ID: N/A

16300 SAND CANYON AVE
 STE 708
 IRVINE, CA 92618
 Effective as of 01-JAN-22

WARRIER, NIKHIL, MD†
 Provider ID: N/A

16300 SAND CANYON AVE
 STE 708
 IRVINE, CA 92618
 Effective as of 01-DEC-21

WERTMAN, BRETT, MD
 Provider ID: N/A

16305 SAND CANYON AVE
 STE 255
 IRVINE, CA 92618
 Effective as of 01-JAN-20

WONG, JENNIFER, MD†
 Provider ID: N/A

C1. 网络提供者名单 专科护理医生

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-OCT-23

WONG, JENNIFER, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-JAN-22

YALVAC, ETHAN, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-JAN-20

YALVAC, ETHAN, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-OCT-23

YALVAC, ETHAN, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-MAY-22

YANG, TAE, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-OCT-23

YANG, TAE, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-JAN-22

CERTIFIED ACUPUNCTURIST

CHOI, JI EI, LAC[†]

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-MAR-22

CHOI, JI EI, LAC[†]

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-FEB-23

CHOI, JI EI, LAC[†]

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-OCT-22

CHOI, JI EI, LAC[†]

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-OCT-22

CHOI, JI EI, LAC[†]

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-OCT-22

CHOI, JI EI, LAC[†]

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-OCT-22

HONG, HEE KYUNG, LAC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-AUG-22

HONG, HEE KYUNG, LAC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-AUG-22

KIM, LAUREN SOOJIN, LAC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-MAY-21

KIM, CHEL, LAC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-MAY-21

KIM, LAUREN SOOJIN, LAC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-MAY-21

LEE, BRIAN, LAC[†]

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-MAY-21

LEE, BRIAN, LAC[†]

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-MAY-21

LEE, BRIAN, LAC[†]

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-MAY-21

LEE, BRIAN, LAC[†]

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-MAY-21

LEE, BRIAN, LAC[†]

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-MAY-21

LEE, BRIAN, LAC[†]

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-AUG-22

LEE, SEMI, LAC

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-JUN-23

LEE, BRIAN, LAC[†]

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 330

IRVINE, CA 92618

Effective as of 01-FEB-23

LEE, SEMI, LAC

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-JUL-23

LEE, SEMI, LAC

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-JUL-23

LEE, SEMI, LAC

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-JUL-23

LEE, SEMI, LAC

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-JUL-23

PARSI KANEMOTO, MARYAM, LAC[†]

Provider ID: N/A

☐ 22 ODYSSEY STE 165
IRVINE, CA 92618
Effective as of 01-SEP-21

CERTIFIED NURSE PRACTITIONER

CARR, CHERYL, NP

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 100

IRVINE, CA 92618

Effective as of 01-APR-23

CARR, CHERYL, NP

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-APR-23

CARR, CHERYL, NP

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-JUN-24

CARR, CHERYL, NP

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAY-23

CARR, CHERYL, NP

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAY-23

CHOI, RANA, NP[†]

Provider ID: N/A

☐ 15775 LAGUNA CANYON
RD STE 210
IRVINE, CA 92618
Effective as of 01-SEP-19

DESAI, SONAM, NPF[†]

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618*
Effective as of 01-OCT-22

C1. 网络提供者名单 专科护理医生

FERRANTE, JADE, NP

Provider ID: N/A

8607 IRVINE CENTER DR
IRVINE, CA 92618
Effective as of 01-NOV-23

LIU, GRACE, NP

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-23

LIU, GRACE, NP

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-23

PARK, SE, NP

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-24

PARK, SE, NP

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

16305 SAND CANYON AVE
STE 200

IRVINE, CA 92618
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUL-23

REED, BRENDYN, NP

Provider ID: N/A

8607 IRVINE CENTER DR
IRVINE, CA 92618
Effective as of 01-JUL-24

REED, BRENDYN, NP

Provider ID: N/A

8607 IRVINE CENTER DR
IRVINE, CA 92618
Effective as of 01-JUL-24

WU, JENNY, NP

Provider ID: N/A

16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618
Effective as of 01-DEC-23

CERTIFIED REGISTERED NURSE MIDWIFE

MCDANIEL-DAVIS, SHAYNA, CRNM

Provider ID: N/A

16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618
Effective as of 01-MAY-24

MCDANIEL-DAVIS, SHAYNA, CRNM

Provider ID: N/A

16305 SAND CANYON AVE

STE 275
IRVINE, CA 92618
Effective as of 01-MAY-24

SAJADI, ALISA, CRNM

Provider ID: N/A

16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618
Effective as of 01-DEC-23

CHIROPRACTOR

KANG, KYUNG, DC

Provider ID: N/A

14875 JEFFREY RD STE 210
IRVINE, CA 92618
Effective as of 01-OCT-23

KIM, SEON-HOON SEAN, DC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-OCT-23

KIM, SEON-HOON SEAN, DC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-MAR-22

KIM, SEON-HOON SEAN, DC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-MAR-22

KIM, SEON-HOON SEAN, DC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618

C1. 网络提供者名单 专科护理医生

Effective as of 01-JAN-23

WEDDLE, DIRK, DC

Provider ID: N/A

☐ 15375 BARRANCA PKWY
STE J104
IRVINE, CA 92618

Effective as of 01-JAN-18

CLINICAL NEUROPSYCHOLOGIST

BENNETT, LAUREN, PhD

Provider ID: N/A

☐ 16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618*

Effective as of 01-OCT-22

BENNETT, LAUREN, PhD

Provider ID: N/A

☐ 16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-SEP-24

BENNETT, LAUREN, PhD

Provider ID: N/A

☐ 16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-SEP-24

BENNETT, LAUREN, PhD

Provider ID: N/A

☐ 16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618*

Effective as of 01-OCT-22

SCHENEMAN, KELLY, PSYD

Provider ID: N/A

☐ 16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-SEP-24

SCHENEMAN, KELLY, PSYD

Provider ID: N/A

☐ 16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-SEP-24

DERMATOLOGY

BAGHERI, BITA, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-21

WANG, STEVEN, MD

Provider ID: N/A

☐ 16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-JUL-22

WANG, STEVEN, MD

Provider ID: N/A

☐ 16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-JUL-22

EMERGENCY MEDICINE

KADAKIA, AMAR, MD†

Provider ID: N/A

☐ 11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

ENDOCRINOLOGY METABOLISM DIABETES

CHAVEZ, BRIAN, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 115
IRVINE, CA 92618

Teleservice

Effective as of 01-OCT-23

CHAVEZ, BRIAN, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 115
IRVINE, CA 92618

Teleservice

Effective as of 01-AUG-21

FARJOUDI, FARHAD, MD†

Provider ID: N/A

☐ 113 WATERWORKS WAY
STE 250
IRVINE, CA 92618

Effective as of 01-JUN-22

FARJOUDI, FARHAD, MD†

Provider ID: N/A

☐ 113 WATERWORKS WAY
STE 108
IRVINE, CA 92618

Effective as of 01-MAY-22

FARJOUDI, FARHAD, MD†

Provider ID: N/A

☐ 113 WATERWORKS WAY
STE 108
IRVINE, CA 92618

Effective as of 01-MAY-22

FARJOUDI, FARHAD, MD†

Provider ID: N/A

☐ 113 WATERWORKS WAY
STE 250
IRVINE, CA 92618

Effective as of 01-JUN-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

C1. 网络提供者名单 专科护理医生

Effective as of 01-JUL-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JUL-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JUL-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAY-24

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAR-22

MARKMAN, LISA, MD

Provider ID: N/A

☞ 22 ODYSSEY STE 115
IRVINE, CA 92618

Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A

☞ 22 ODYSSEY STE 115
IRVINE, CA 92618

Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A

☞ 22 ODYSSEY STE 115
IRVINE, CA 92618

Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A

☞ 22 ODYSSEY STE 115
IRVINE, CA 92618

Effective as of 01-MAR-23

MEHTA, SHILPA, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 115
IRVINE, CA 92618

Teleservice

Effective as of 01-JAN-23

MEHTA, SHILPA, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 115
IRVINE, CA 92618

Teleservice

Effective as of 01-JUN-19

MEHTA, SHILPA, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 115
IRVINE, CA 92618

Teleservice

Effective as of 01-JUN-19

MEHTA, SHILPA, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 115
IRVINE, CA 92618

Teleservice

Effective as of 01-OCT-23

VYAS, URVI, MD

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618

Effective as of 01-JUN-24

VYAS, URVI, MD

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618

Effective as of 01-JUN-24

FAMILY PRACTICE

BURRIS, RYAN, MD

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-FEB-23

BURRIS, RYAN, MD

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-FEB-23

FAMILY PRACTICE

C1. 网络提供者名单 专科护理医生

SPORTS MEDICINE

RIVADENEYRA, ADAM, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-JAN-19

RIVADENEYRA, ADAM, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-NOV-17

FEMALE PELVIC MED AND RECONSTRUCTIVE SURG

MWESIGWA, PATRICIA, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-MAR-22

SHOURESHI, POONE, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-SEP-23

SHOURESHI, POONE, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-SEP-23

GASTROENTEROLOGY

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY

STE 155

IRVINE, CA 92618

Effective as of 01-NOV-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-OCT-23

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-NOV-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-23

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-MAY-23

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-SEP-22

BABAKNIA, ARDALAN, MD[†]

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 240
IRVINE, CA 92618

Effective as of 01-MAY-12

BABAKNIA, ARDALAN, MD[†]

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 240
IRVINE, CA 92618

Effective as of 01-APR-11

BEMANIAN, SHAHROOZ, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JUN-24

BEMANIAN, SHAHROOZ, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-MAY-16

BEMANIAN, SHAHROOZ, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-21

BEMANIAN, SHAHROOZ, MD[†]

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-OCT-23

BEMANIAN, SHAHROOZ, MD†
Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-16

BEMANIAN, SHAHROOZ, MD†
Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-18

BEMANIAN, SHAHROOZ, MD†
Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-20

CHOI, DAVID, DO†
Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JUL-22

CHOI, DAVID, DO†
Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JUL-22

CHOI, DAVID, DO†
Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-AUG-22

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-OCT-23

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-23

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-22

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-22

HWANG, CAROLINE, MD

Provider ID: N/A

500 SUPERIOR AVE
STE 100
IRVINE, CA 92618
Effective as of 01-AUG-23

HWANG, CAROLINE, MD

Provider ID: N/A

500 SUPERIOR AVE
STE 100
IRVINE, CA 92618
Effective as of 01-AUG-23

HWANG, CAROLINE, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618
Effective as of 01-JUN-23

HWANG, CAROLINE, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618
Effective as of 01-JUN-23

KAUFMAN, DAVID, DO

Provider ID: N/A

18 ENDEAVOR STE 204
IRVINE, CA 92618
Effective as of 01-JUL-12

KUMAR, RASHMI, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618
Effective as of 01-OCT-23

KUMAR, RASHMI, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618

C1. 网络提供者名单 专科护理医生

Effective as of 01-OCT-23

LEE, JAMES, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JUN-23

LEE, JAMES, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JUN-23

LEE, PAUL, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-OCT-23

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-OCT-23

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-MAY-16

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JUN-24

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-23

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-21

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-20

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-18

LEE, BRIAN, MD

Provider ID: N/A

16405 SAND CANYON AVE
IRVINE, CA 92618

Effective as of 01-AUG-24

LEE, PAUL, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-JAN-23

OHARA, JUN ICHI, MD

Provider ID: N/A

22 ODYSSEY STE 170A
IRVINE, CA 92618

Effective as of 01-JUN-19

OMAN, MATTHEW, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-JAN-23

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-18

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-20

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-AUG-18

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-AUG-18

OMAN, MATTHEW, MD†

Provider ID: N/A





















113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-FEB-18

OMAN, MATTHEW, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

 113 WATERWORKS WAY STE 155 IRVINE, CA 92618 Effective as of 01-JAN-21	Effective as of 01-JUN-23	Provider ID: N/A
OMAN, MATTHEW, MD[†] Provider ID: N/A	SINGH, HARDEEP, MD[†] Provider ID: N/A	 113 WATERWORKS WAY STE 155 IRVINE, CA 92618 Effective as of 01-OCT-23
 113 WATERWORKS WAY STE 155 IRVINE, CA 92618 Effective as of 01-JUN-24	 16305 SAND CANYON AVE STE 220 IRVINE, CA 92618 Effective as of 01-MAY-17	YU, FANG, MD[†] Provider ID: N/A
OMAN, MATTHEW, MD[†] Provider ID: N/A	SINGH, HARDEEP, MD[†] Provider ID: N/A	 15825 LAGUNA CANYON RD STE 106 IRVINE, CA 92618 Effective as of 01-OCT-23
 113 WATERWORKS WAY STE 155 IRVINE, CA 92618 Effective as of 01-OCT-23	 16305 SAND CANYON AVE STE 220 IRVINE, CA 92618 Effective as of 01-MAY-17	YU, VICTOR, MD[†] Provider ID: N/A
OMAN, MATTHEW, MD Provider ID: N/A	YAP, KONG PENG, MD[†] Provider ID: N/A	 113 WATERWORKS WAY STE 155 IRVINE, CA 92618 Effective as of 01-JUN-24
 16105 SAND CANYON AVE STE 230 IRVINE, CA 92618 Effective as of 01-OCT-23	 15825 LAGUNA CANYON RD STE 106 IRVINE, CA 92618 Effective as of 01-JAN-14	YU, VICTOR, MD[†] Provider ID: N/A
SINGH, HARDEEP, MD[†] Provider ID: N/A	YU, VICTOR, MD[†] Provider ID: N/A	 113 WATERWORKS WAY STE 155 IRVINE, CA 92618 Effective as of 01-MAY-16
 16305 SAND CANYON AVE STE 220 IRVINE, CA 92618 Effective as of 01-OCT-20	 113 WATERWORKS WAY STE 155 IRVINE, CA 92618 Effective as of 01-JAN-18	YU, VICTOR, MD[†] Provider ID: N/A
SINGH, HARDEEP, MD[†] Provider ID: N/A	YU, VICTOR, MD[†] Provider ID: N/A	 113 WATERWORKS WAY STE 155 IRVINE, CA 92618 Effective as of 01-JAN-21
 16305 SAND CANYON AVE STE 220 IRVINE, CA 92618 Effective as of 01-JUN-23	 113 WATERWORKS WAY STE 155 IRVINE, CA 92618 Effective as of 01-JAN-20	YU, VICTOR, MD[†] Provider ID: N/A
SINGH, HARDEEP, MD[†] Provider ID: N/A	YU, FANG, MD[†] Provider ID: N/A	 113 WATERWORKS WAY STE 155 IRVINE, CA 92618 Effective as of 01-JAN-23
 16305 SAND CANYON AVE STE 220 IRVINE, CA 92618	 15825 LAGUNA CANYON RD STE 106 IRVINE, CA 92618 Effective as of 01-JAN-18	YU, FANG, MD[†] Provider ID: N/A
	YU, VICTOR, MD[†]	 15825 LAGUNA CANYON RD STE 106

C1. 网络提供者名单 专科护理医生

IRVINE, CA 92618
Effective as of 01-JAN-23

GYNECOLOGIC ONCOLOGY

ABAID, LISA, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-NOV-18

BECK, TIFFANY, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-AUG-22

BECK, TIFFANY, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-AUG-22

LEVINE, MONICA, MD

Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-OCT-23

LEVINE, MONICA, MD

Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-OCT-23

MENDIVIL, ALBERTO, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 260

IRVINE, CA 92618
Effective as of 01-AUG-22

MENDIVIL, ALBERTO, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-FEB-23

MENDIVIL, ALBERTO, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-FEB-23

MENDIVIL, ALBERTO, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-AUG-22

MENDIVIL, ALBERTO, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-FEB-23

HEMATOLOGY / ONCOLOGY

GOLDENSON, BENJAMIN, MD

Provider ID: N/A
16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-AUG-23

HOMSI, YASER, MD

Provider ID: N/A
16105 SAND CANYON AVE
STE 230

IRVINE, CA 92618
Effective as of 01-MAY-24

NANGIA, CHAITALI, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618*
Effective as of 01-OCT-22

NANGIA, CHAITALI, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618*
Effective as of 01-OCT-22

PANDIT, LALITA, MD†

Provider ID: N/A
16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618
Teleservice
Effective as of 01-OCT-19

PANDIT, LALITA, MD†

Provider ID: N/A
16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618
Teleservice
Effective as of 01-OCT-21

SEERY, TARA, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JAN-21

SEERY, TARA, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

C1. 网络提供者名单 专科护理医生

Effective as of 01-JAN-21

HEPATOLOGY

FONG, TSE LING, MD

Provider ID: N/A

☐ 16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618

Effective as of 01-JAN-24

FONG, TSE LING, MD

Provider ID: N/A

☐ 16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618

Effective as of 01-JAN-24

INFECTIOUS DISEASE

SARAFIAN, FARJAD, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-APR-23

SARAFIAN, FARJAD, MD

Provider ID: N/A

☐ 16100 SAND CANYON AVE
STE 240
IRVINE, CA 92618

Effective as of 01-AUG-20

SARAFIAN, FARJAD, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAY-23

SARAFIAN, FARJAD, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618

Effective as of 01-APR-23

INTERNAL MEDICINE

AHDOOT, JACOB, MD†

Provider ID: N/A

☐ 15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618

Effective as of 01-JAN-20

APPEL, RICHARD, MD†

Provider ID: N/A

☐ 11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

BRAVO, ARLENE, MD

Provider ID: N/A

☐ 16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618

Effective as of 01-JUL-24

BRAVO, ARLENE, MD

Provider ID: N/A

☐ 16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618

Effective as of 01-JUL-24

CABRERA, JUAN, MD

Provider ID: N/A

☐ 11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

CHENG, CATHY, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Teleservice

Effective as of 01-JUL-23

CHENG, CATHY, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Teleservice

Effective as of 01-JUL-23

CHIEN, JOHN, MD†

Provider ID: N/A

☐ 16200 SAND CANYON AVE
IRVINE, CA 92618

Effective as of 01-JAN-18

DANESH, HOUMAN, MD†

Provider ID: N/A

☐ 11 TECHNOLOGY DR
IRVINE, CA 92618*

Effective as of 01-JAN-18

DAVIS, BARBARA, DO†

Provider ID: N/A

☐ 11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

EL-BERSHAWI, AHMED, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 225
IRVINE, CA 92618

Effective as of 01-MAR-21

GEIGER, ERIK, MD†

Provider ID: N/A

☐ 11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

GHOSH, SUBRATO, MD†

Provider ID: N/A

☐ 11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

C1. 网络提供者名单 专科护理医生

HUNG, JENNIFER, DO[†]

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

LEE, RONALD, MD[†]

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

LU, CHRISTIAN, MD[†]

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

MIRSAEIDGHAZI, POURYA, MD[†]

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

NGUYEN, THUY, DO[†]

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

NGUYEN, VIET, DO[†]

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

PEREZ, FRANCISCO, MD[†]

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

SHAHAMIRI, SEAN, MD[†]

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

SHUNE, HONG, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618

Effective as of 01-JAN-20

SYCHANGCO, PAUL, MD[†]

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

TAHERI, NIMA, MD[†]

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

YAP, MICHAEL, MD[†]

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

ZAHED, SHAHAB, MD[†]

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

INTERVENTIONAL CARDIOLOGY

BERG, CHRISTOPHER, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

BERG, CHRISTOPHER, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

BERG, CHRISTOPHER, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-JUN-24

BERG, CHRISTOPHER, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

BERG, CHRISTOPHER, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

ESLAMI-FARSANI, MAHMOUD, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

ESLAMI-FARSANI, MAHMOUD, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

C1. 网络提供者名单 专科护理医生

HOWELL, STACEY, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

HOWELL, STACEY, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

HOWELL, STACEY, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-JUN-24

HOWELL, STACEY, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

HOWELL, STACEY, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

KAZEMI, SEPIDEH, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 601
IRVINE, CA 92618

Effective as of 01-JAN-21

NGUYEN, HUY, MD†

Provider ID: N/A

16305 SAND CANYON AVE

STE 255

IRVINE, CA 92618

Effective as of 01-SEP-17

NGUYEN, HUY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-SEP-17

NGUYEN, HUY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-JAN-21

SCHACHTER, JESSICA, DO

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

SCHACHTER, JESSICA, DO

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

SCHACHTER, JESSICA, DO

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-JUN-24

SCHACHTER, JESSICA, DO

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

SCHACHTER, JESSICA, DO

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

WERTMAN, BRETT, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-JAN-21

WERTMAN, BRETT, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-SEP-17

WERTMAN, BRETT, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-SEP-17

YALVAC, ETHAN, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-JAN-21

YALVAC, ETHAN, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

YALVAC, ETHAN, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-APR-18

LICENSED CLINICAL SOCIAL WORKER

ARZATE, VANESSA, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

ARZATE, VANESSA, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

BOODMAN, SANDRA, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUL-24

BOODMAN, SANDRA, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUL-24

BOODMAN, SANDRA, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

BOWNES, MARISA, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-AUG-24

BOWNES, MARISA, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-AUG-24

HUMPHRIES, CORINNE, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

HUMPHRIES, CORINNE, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

MARQUEZ, ANTONIO, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUN-24

PASTERNAK, RACHEL, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUL-24

PASTERNAK, RACHEL, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-JUL-24

PYUN, JEONG, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

PYUN, JEONG, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

LICENSED PROFESSIONAL CLINICAL COUNSELOR

KURPIUS-BROCK, MARINDA, LPCC

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

KURPIUS-BROCK, MARINDA, LPCC

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

MARRIAGE FAMILY THERAPIST

BLAKEMORE, JASON, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

C1. 网络提供者名单

专科护理医生

BLAKEMORE, JASON, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

CASEY, CARLEE, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

CASEY, CARLEE, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

FATEMI, SEPIDEH, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUN-24

FATEMI, SEPIDEH, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUN-24

HAYDIS, MARIA, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUL-24

HAYDIS, MARIA, MFT

Provider ID: N/A

15635 ALTON PKWY STE

350

IRVINE, CA 92618

Effective as of 01-JUL-24

JOHNSTON, KARLY, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

JOHNSTON, KARLY, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

LIU, CHIA CHI, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUL-23

LIU, CHIA CHI, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUL-23

MAJDALANI, KAREN, MFT

Provider ID: N/A

60 STEPPING STONE
IRVINE, CA 92603
Effective as of 01-JUN-23

MAJDALANI, KAREN, MFT

Provider ID: N/A

60 STEPPING STONE
IRVINE, CA 92603
Effective as of 01-JUN-23

MCCURRY, LISA, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

MCCURRY, LISA, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

MCGUCKIN, RICHARD, MFT

Provider ID: N/A

31 MORNING GLORY
IRVINE, CA 92603
Effective as of 01-OCT-21

MCINTYRE, SUSAN, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

MCINTYRE, SUSAN, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

ONEILL, SEAN, MFT

Provider ID: N/A

60 STEPPING STONE
IRVINE, CA 92603
Effective as of 01-JUN-23

ONEILL, SEAN, MFT

Provider ID: N/A

60 STEPPING STONE
IRVINE, CA 92603
Effective as of 01-JUN-23

C1. 网络提供者名单 专科护理医生

ROMERO, DIANA, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-MAY-24

ROMERO, DIANA, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-MAY-24

SHAH, SALMA, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

SHAH, SALMA, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

SHARMA, POOJA, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-MAY-24

SHARMA, POOJA, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-MAY-24

MATERNAL AND FETAL MEDICINE

BUSH, MELISSA, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-FEB-21

BUSH, MELISSA, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-SEP-16

CHAU, CINDY, MD

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-MAY-24

DAY, ROBERT, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-MAY-22

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-JUN-19

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-SEP-16

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON

RD STE 360

IRVINE, CA 92618

Effective as of 01-FEB-23

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-JAN-23

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-JAN-23

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-JAN-23

MASAKI, DAMON, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-DEC-19

MASAKI, DAMON, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-MAY-19

SHRIVASTAVA, VINEET, MD

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-MAR-23

C1. 网络提供者名单 专科护理医生

MEDICAL ONCOLOGY

BECERRA, CARLOS, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-MAR-23

BECERRA, CARLOS, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-MAR-23

HAMOUI, NAHID, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-SEP-13

KHAGI, SIMON, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-OCT-23

KHAGI, SIMON, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-OCT-23

MITA, MONICA, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-MAY-24

MITA, MONICA, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-MAY-24

PANDIT, LALITA, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618
Teleservice
Effective as of 01-JAN-21

NEPHROLOGY

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618
Effective as of 01-JAN-14

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618
Effective as of 01-APR-11

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618
Effective as of 01-JAN-18

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618
Effective as of 01-OCT-23

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618
Effective as of 01-MAY-12

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618
Effective as of 01-JUN-18

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618
Effective as of 01-JAN-21

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618
Effective as of 01-JAN-20

JAMES, JOJI, MD

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618
Effective as of 01-AUG-23

MANSOURY, HADI, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

MESBAH, AZITA, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Teleservice

C1. 网络提供者名单 专科护理医生

Effective as of 01-MAY-23

SAWHNEY, SAJEET, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-APR-21

SAWHNEY, SAJEET, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JUL-24

YANG, PHILIP, MD[†]

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618

Effective as of 01-MAY-20

YANG, PHILIP, MD[†]

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618

Effective as of 01-OCT-19

YANG, PHILIP, MD[†]

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618

Effective as of 01-JUN-18

YANG, PHILIP, MD[†]

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618

Effective as of 01-JUL-17

YANG, PHILIP, MD[†]

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618

Effective as of 01-OCT-23

NEUROLOGY

CLEEREMANS, BRUCE, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-21

JANKOWSKI, PAWEL, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAY-23

MAHDAD, MEHRDAD, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-APR-08

MAHDAD, MEHRDAD, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-JAN-14

MAHDAD, MEHRDAD, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-JAN-17

MAHDAD, MEHRDAD, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-JAN-17

MAHDAD, MEHRDAD, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-OCT-21

MAHDAD, MEHRDAD, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-OCT-21

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-SEP-24

PARK, JAMES, DO

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-22

PARK, JAMES, DO

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-22

PATEL, JAY, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

C1. 网络提供者名单 专科护理医生

Effective as of 01-JAN-20

THAKKAR, SANDEEP, DO[†]

Provider ID: N/A

16405 SAND CANYON AVE
STE 265
IRVINE, CA 92618

Effective as of 01-AUG-22

THAKKAR, SANDEEP, DO[†]

Provider ID: N/A

16405 SAND CANYON AVE
STE 265
IRVINE, CA 92618

Effective as of 01-AUG-22

THAKKAR, SANDEEP, DO[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAR-18

THAKKAR, SANDEEP, DO[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAR-19

WHITMAN, GREGORY, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-20

WHITMAN, GREGORY, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-21

NEUROLOGY CHILD

ELBALALESY, NASER, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-JUN-19

ELBALALESY, NASER, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-AUG-23

ELBALALESY, NASER, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-AUG-23

ELBALALESY, NASER, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-AUG-23

ELBALALESY, NASER, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-MAR-19

ELBALALESY, NASER, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-AUG-23

ELBALALESY, NASER, MD[†]

Provider ID: N/A

113 WATERWORKS WAY

STE 350

IRVINE, CA 92618

Effective as of 01-OCT-22

ELBALALESY, NASER, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-MAR-19

ELBALALESY, NASER, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-MAR-19

ELBALALESY, NASER, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-MAR-19

ELBALALESY, NASER, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-MAR-19

ELBALALESY, NASER, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-MAR-19

NUCLEAR MEDICINE

REDDY, RYAN, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 215

C1. 网络提供者名单 专科护理医生

IRVINE, CA 92618
Effective as of 01-OCT-23

REDDY, RYAN, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 215

IRVINE, CA 92618
Effective as of 01-OCT-23

OBSTETRICS / GYNECOLOGY

AHDOOT, MORRIS, MD[†]

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 200

IRVINE, CA 92618
Effective as of 01-APR-20

AHDOOT, MORRIS, MD[†]

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 200

IRVINE, CA 92618
Effective as of 01-MAY-12

AHDOOT, MORRIS, MD[†]

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 200

IRVINE, CA 92618
Effective as of 01-APR-20

AHDOOT, MORRIS, MD[†]

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 200

IRVINE, CA 92618
Effective as of 01-APR-11

AHDOOT, MORRIS, MD[†]

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 200

IRVINE, CA 92618
Effective as of 01-FEB-21

AHDOOT, MORRIS, MD[†]

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 200

IRVINE, CA 92618
Effective as of 01-FEB-21

AHDOOT, MORRIS, MD[†]

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 200

IRVINE, CA 92618
Effective as of 01-JUL-12

AHDOOT, MORRIS, MD[†]

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 200

IRVINE, CA 92618
Effective as of 01-JAN-21

AHDOOT, MORRIS, MD[†]

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 200

IRVINE, CA 92618
Effective as of 01-JAN-18

BARR, JESSICA, DO

Provider ID: N/A

22 ODYSSEY STE 200
IRVINE, CA 92618

Effective as of 01-DEC-23

BARR, JESSICA, DO

Provider ID: N/A

22 ODYSSEY STE 200
IRVINE, CA 92618

Effective as of 01-DEC-23

BUSH, MELISSA, MD[†]

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618
Effective as of 01-MAY-24

COUGH, HEIDI, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 200

IRVINE, CA 92618
Effective as of 01-OCT-22

DAVIS, STEPHANIE, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 200

IRVINE, CA 92618
Effective as of 01-OCT-22

HASHEMI, EMAD, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618
Effective as of 01-NOV-20

HASHEMI, EMAD, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618
Effective as of 01-NOV-20

KONG, GRACE, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 200

IRVINE, CA 92618
Effective as of 01-OCT-22

LEE, KATHERINE, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 275

IRVINE, CA 92618

C1. 网络提供者名单 专科护理医生

Effective as of 01-JUN-23

LEE, KATHERINE, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-23

LIN, JAMES, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 901
IRVINE, CA 92618

Effective as of 01-SEP-15

MARINESCU, CATALIN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 265
IRVINE, CA 92618

Effective as of 01-JAN-21

MARINESCU, CATALIN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 265
IRVINE, CA 92618

Effective as of 01-JAN-20

MASAKI, DAMON, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-JAN-22

MASAKI, DAMON, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-JAN-22

MENDELSON, SUSAN, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-NOV-23

MILLER, JAMIE, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-NOV-23

PETERS, AMY, DO

Provider ID: N/A

16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618

Effective as of 01-NOV-23

PETERS, AMY, DO

Provider ID: N/A

16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-NOV-23

STERNFELD, DANIEL, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618

Effective as of 01-SEP-20

STERNFELD, DANIEL, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618

Effective as of 01-JUN-24

TANAMAI, VAYA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 275

IRVINE, CA 92618

Effective as of 01-MAY-20

OPHTHALMOLOGY

GE, NENGJIE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618

Effective as of 01-OCT-23

GE, NENGJIE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618

Effective as of 01-JUL-12

GE, NENGJIE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618

Effective as of 01-JAN-18

GE, NENGJIE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618

Effective as of 01-MAR-23

GE, NENGJIE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618

Effective as of 01-MAR-23

GE, NENGJIE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618

C1. 网络提供者名单 专科护理医生

Effective as of 01-JAN-17

GHIASI, ZAHRA, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 245
IRVINE, CA 92618

Effective as of 01-JAN-17

GWYNN, DAVID, MD

Provider ID: N/A

22 ODYSSEY STE 150
IRVINE, CA 92618

Effective as of 01-MAR-23

LEE, ANDREW, MD

Provider ID: N/A

18 ENDEAVOR STE 104
IRVINE, CA 92618

Effective as of 01-OCT-23

LEE, ANDREW, MD

Provider ID: N/A

18 ENDEAVOR STE 104
IRVINE, CA 92618

Effective as of 01-MAY-23

LEE, JIMMY, MD[†]

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-JUL-22

LEE, JIMMY, MD[†]

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-OCT-23

MARVASTI, AMIR, MD

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201

IRVINE, CA 92618

Effective as of 01-OCT-23

MARVASTI, AMIR, MD

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-JAN-23

NGUYEN, BAO-THU, MD[†]

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618*

Effective as of 01-JAN-23

NGUYEN, BAO-THU, MD[†]

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618*

Effective as of 01-OCT-23

NGUYEN, BAO-THU, MD[†]

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-MAY-19

NGUYEN, BAO-THU, MD[†]

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-MAY-19

OAKEY, ZACKERY, MD

Provider ID: N/A

114 PACIFICA STE 390
IRVINE, CA 92618

Effective as of 01-JUL-24

OAKEY, ZACKERY, MD

Provider ID: N/A

114 PACIFICA STE 390
IRVINE, CA 92618
Effective as of 01-JUL-24

TAYANI, RAMIN, MD

Provider ID: N/A

22 ODYSSEY STE 150
IRVINE, CA 92618

Effective as of 01-MAR-23

VAIDYA, NADEEM, MD[†]

Provider ID: N/A

16100 SAND CANYON AVE
STE 385
IRVINE, CA 92618

Effective as of 01-OCT-23

VAIDYA, NADEEM, MD[†]

Provider ID: N/A

16100 SAND CANYON AVE
STE 385
IRVINE, CA 92618

Effective as of 01-JAN-21

VAIDYA, NADEEM, MD[†]

Provider ID: N/A

16100 SAND CANYON AVE
STE 385
IRVINE, CA 92618

Effective as of 01-MAR-16

VAIDYA, NADEEM, MD[†]

Provider ID: N/A

16100 SAND CANYON AVE
STE 385
IRVINE, CA 92618

Effective as of 01-FEB-21

VAIDYA, NADEEM, MD[†]

Provider ID: N/A

16100 SAND CANYON AVE
STE 385
IRVINE, CA 92618

Effective as of 01-FEB-21

C1. 网络提供者名单 专科护理医生

OPTOMETRIST

OWYANG, ASHLEY, OD

Provider ID: N/A

📄 15825 LAGUNA CANYON RD STE 201
IRVINE, CA 92618
Effective as of 01-JAN-23

OWYANG, ASHLEY, OD

Provider ID: N/A

📄 15825 LAGUNA CANYON RD STE 201
IRVINE, CA 92618
Effective as of 01-OCT-23

TRAN, STEPHANIE, OD

Provider ID: N/A

📄 15825 LAGUNA CANYON RD STE 201
IRVINE, CA 92618
Effective as of 01-OCT-23

TRAN, STEPHANIE, OD

Provider ID: N/A

📄 15825 LAGUNA CANYON RD STE 201
IRVINE, CA 92618
Effective as of 01-JAN-23

WANG, STEVEN, OD

Provider ID: N/A

📄 22 ODYSSEY STE 150
IRVINE, CA 92618
Effective as of 01-OCT-23

WANG, MATTHEW, OD†

Provider ID: N/A

📄 22 ODYSSEY STE 150
IRVINE, CA 92618
Effective as of 01-JAN-18

WANG, MATTHEW, OD†

Provider ID: N/A

📄 22 ODYSSEY STE 150
IRVINE, CA 92618
Effective as of 01-OCT-23

WANG, MATTHEW, OD†

Provider ID: N/A

📄 22 ODYSSEY STE 150
IRVINE, CA 92618
Effective as of 01-JAN-23

ORAL MAXILLOFACIAL SURGEON

KALANTARI, OUZHAN, DMD

Provider ID: N/A

📄 114 PACIFICA STE 420
IRVINE, CA 92618
Effective as of 01-NOV-23

OTOLARYNGOLOGY

BALAKER, ASHLEY, MD†

Provider ID: N/A

📄 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JUN-24

BALAKER, ASHLEY, MD†

Provider ID: N/A

📄 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-MAY-19

BALAKER, ASHLEY, MD†

Provider ID: N/A

📄 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-APR-23

BALAKER, ASHLEY, MD†

Provider ID: N/A

📄 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-APR-23

BALAKER, ASHLEY, MD†

Provider ID: N/A

📄 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JUN-19

BUEN, FLOYD, MD†

Provider ID: N/A

📄 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-NOV-20

BUEN, FLOYD, MD†

Provider ID: N/A

📄 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-NOV-20

BUEN, FLOYD, MD†

Provider ID: N/A

📄 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-DEC-20

BUEN, FLOYD, MD†

Provider ID: N/A

📄 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-DEC-20

BUEN, FLOYD, MD†

Provider ID: N/A

📄 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-DEC-20

CHO, MICHAEL, MD†


Provider ID: N/A

📄 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-JAN-15

CHO, MICHAEL, MD†


Provider ID: N/A

C1. 网络提供者名单 专科护理医生

 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-JAN-15


CROCKETT, DENNIS, MD†

Provider ID: N/A

 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JUL-19


CROCKETT, DENNIS, MD†

Provider ID: N/A

 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JUL-19


CROCKETT, DENNIS, MD†

Provider ID: N/A

 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JAN-18


GE, NORMAN, MD†

Provider ID: N/A

 113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-JAN-18


GE, NORMAN, MD†

Provider ID: N/A

 113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-JAN-23


GE, NORMAN, MD†

Provider ID: N/A

 113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-FEB-23


GE, NORMAN, MD†

Provider ID: N/A

 113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-OCT-12


GE, NORMAN, MD†

Provider ID: N/A

 113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-FEB-23


GE, NORMAN, MD†

Provider ID: N/A

 113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-FEB-23


LUU, QUANG, MD†

Provider ID: N/A

 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-OCT-18


LUU, QUANG, MD†

Provider ID: N/A

 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-OCT-18


MUNDI, JAGMEET, MD†

Provider ID: N/A

 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-MAY-19


MUNDI, JAGMEET, MD†

Provider ID: N/A

 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JUN-16


MUNDI, JAGMEET, MD†

Provider ID: N/A

 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JUN-16


PETTIS, ROBERT, MD†

Provider ID: N/A

 16100 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-MAY-20


SUN, JOHN, MD†

Provider ID: N/A

 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-MAR-16


SUN, PAUL, MD†

Provider ID: N/A

 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-NOV-17


SUN, JOHN, MD†

Provider ID: N/A

 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-NOV-17


SUN, PAUL, MD†

Provider ID: N/A

 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-OCT-23

SUN, JOHN, MD†

Provider ID: N/A

 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-NOV-17

SUN, PAUL, MD†

Provider ID: N/A

 22 ODYSSEY STE 100

C1. 网络提供者名单 专科护理医生

IRVINE, CA 92618
Effective as of 01-NOV-17

SUN, PAUL, MD†

Provider ID: N/A
☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-FEB-16

SUN, JOHN, MD†

Provider ID: N/A
☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-OCT-23

SUN, JOHN, MD†

Provider ID: N/A
☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-JAN-20

SUN, PAUL, MD†

Provider ID: N/A
☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-JAN-17

SUN, JOHN, MD†

Provider ID: N/A
☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-JAN-17

SUN, PAUL, MD†

Provider ID: N/A
☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-JAN-14

SUN, JOHN, MD†

Provider ID: N/A
☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-JAN-14

SUN, PAUL, MD†

Provider ID: N/A
☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-JAN-21

SUN, JOHN, MD†

Provider ID: N/A
☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-JAN-21

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A
☒ 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-AUG-16

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A
☒ 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-AUG-16

YIAN, CHRISTOPHER, MD†

Provider ID: N/A
☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-JAN-21

YIAN, CHRISTOPHER, MD†

Provider ID: N/A
☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-JAN-14

YIAN, CHRISTOPHER, MD†

Provider ID: N/A
☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-OCT-23

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-FEB-16

YIAN, CHRISTOPHER, MD†

Provider ID: N/A
☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-NOV-17

YIAN, CHRISTOPHER, MD†

Provider ID: N/A
☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-NOV-17

ZUCKERMAN, KENNETH, MD

Provider ID: N/A
☒ 16300 SAND CANYON AVE
STE 704
IRVINE, CA 92618
Effective as of 01-JUL-12

PEDIATRICS

SUN, STEVEN, MD

Provider ID: N/A
☒ 22 ODYSSEY STE 230
IRVINE, CA 92618
Effective as of 01-MAY-24

PHYS MED/ REHAB PAIN MEDICINE

PATEL, KETAN, MD

Provider ID: N/A
☒ 113 WATERWORKS WAY
STE 240
IRVINE, CA 92618
Effective as of 01-MAY-24

PHYSICAL MEDICINE / REHABILITATION

C1. 网络提供者名单 专科护理医生

LAI, KHANG, DO

Provider ID: N/A

15701 ROCKFIELD BLVD
IRVINE, CA 92618
Effective as of 01-NOV-14

LAI, KHANG, DO

Provider ID: N/A

15701 ROCKFIELD BLVD
IRVINE, CA 92618
Effective as of 01-DEC-14

LAI, KHANG, DO

Provider ID: N/A

15701 ROCKFIELD BLVD
IRVINE, CA 92618
Effective as of 01-APR-11

SEKO, KYLE, DO

Provider ID: N/A

9080 IRVINE CENTER DR
IRVINE, CA 92618
Effective as of 01-FEB-22

PHYSICIANS ASSISTANT

ALMANZA, MORENNE, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JUN-24

ALMANZA, MORENNE, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JUN-24

BOLADIAN, LANA, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-JUN-24

BOLADIAN, LANA, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JUN-24

BOW, LINDA, PA†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

CARR, OLIVIA, PA

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-APR-24

CARR, OLIVIA, PA

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-APR-24

CHRISTIE, CAMERON, PA

Provider ID: N/A

8607 IRVINE CENTER DR
IRVINE, CA 92618
Effective as of 01-DEC-23

KIM, MOSES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-APR-21

KISCADEN, LAUREN, PA

Provider ID: N/A

18 ENDEAVOR STE 208

IRVINE, CA 92618

Effective as of 01-APR-23

KISCADEN, LAUREN, PA

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-APR-23

PHILLIPS, JOSHUA, PA

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-AUG-24

PHILLIPS, JOSHUA, PA

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-AUG-24

ROUGHLEY, MATTHEW, PA

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-DEC-23

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-NOV-22

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-NOV-22

STONE, MICHELLE, PA

C1. 网络提供者名单

专科护理医生

Provider ID: N/A

16105 SAND CANYON AVE
STE 260

IRVINE, CA 92618

Effective as of 01-JAN-23

STONE, MICHELLE, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 260

IRVINE, CA 92618

Effective as of 01-FEB-23

STONE, MICHELLE, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 260

IRVINE, CA 92618

Effective as of 01-FEB-23

STONE, MICHELLE, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 260

IRVINE, CA 92618

Effective as of 01-JAN-23

STONE, MICHELLE, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 260

IRVINE, CA 92618

Effective as of 01-JAN-23

WONG, POLLYANNA, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 230

IRVINE, CA 92618

Effective as of 01-JAN-23

WONG, POLLYANNA, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 230

IRVINE, CA 92618

Effective as of 01-JAN-23

WU, VANNA, PA

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-JUL-24

WU, VANNA, PA

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-JUL-24

WU, VANNA, PA

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-MAR-24

PODIATRIST

BATHAEE, FARSHAD, DPM

Provider ID: N/A

113 WATERWORKS WAY
STE 250

IRVINE, CA 92618

Effective as of 01-DEC-21

COYER, MICHAEL, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270

IRVINE, CA 92618

Effective as of 01-JAN-20

COYER, MICHAEL, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270

IRVINE, CA 92618

Effective as of 01-JUN-24

COYER, MICHAEL, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270

IRVINE, CA 92618

Effective as of 01-JUL-18

KOLODENKER, GENNADY, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270

IRVINE, CA 92618

Effective as of 01-JUL-18

KOLODENKER, GENNADY, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270

IRVINE, CA 92618

Effective as of 01-JUN-24

C1. 网络提供者名单 专科护理医生

LIN, PARKSON, DPM

Provider ID: N/A

2 HUGHES STE 150
IRVINE, CA 92618

Effective as of 01-JAN-17

ROOHIAN, ARSHIA, DPM

Provider ID: N/A

113 WATERWORKS WAY
STE 250
IRVINE, CA 92618

Effective as of 01-DEC-21

ROOHIAN, ARSHIA, DPM

Provider ID: N/A

113 WATERWORKS WAY
STE 250
IRVINE, CA 92618

Effective as of 01-JUL-20

SOLAR, SARA, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-NOV-22

SOLAR, SARA, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-NOV-22

TIEN, AUDRIS, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-JUL-21

TIEN, AUDRIS, DPM†

Provider ID: N/A

16405 SAND CANYON AVE

STE 270

IRVINE, CA 92618

Effective as of 01-JUL-21

TIEN, AUDRIS, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-DEC-20

TIEN, AUDRIS, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-DEC-20

VINCENT, EBONIE, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-JAN-21

VINCENT, EBONIE, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-AUG-19

VINCENT, EBONIE, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-AUG-19

YANG, ANDREW, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-DEC-20

YANG, DAVID, DPM

Provider ID: N/A

18 ENDEAVOR STE 206
IRVINE, CA 92618

Effective as of 01-OCT-23

YANG, DAVID, DPM

Provider ID: N/A

18 ENDEAVOR STE 206
IRVINE, CA 92618

Effective as of 01-JAN-23

YANG, ANDREW, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-DEC-20

PSYCHIATRY

RITTER, AARON, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-NOV-22

RITTER, AARON, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-NOV-22

RITTER, AARON, MD

Provider ID: N/A


16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-NOV-22

RITTER, AARON, MD


Provider ID: N/A

C1. 网络提供者名单 专科护理医生

 16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-NOV-22


SALO, CLINT, DO†

Provider ID: N/A

 2 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-NOV-16


SALO, CLINT, DO†

Provider ID: N/A

 2 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-AUG-17


SALO, CLINT, DO†

Provider ID: N/A

 2 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-AUG-17


SALO, CLINT, DO†

Provider ID: N/A

 2 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-NOV-16


SZPUNAR, MERCEDES, MD

Provider ID: N/A

 16305 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-MAR-23


SZPUNAR, MERCEDES, MD

Provider ID: N/A

 16305 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-MAR-23


SZPUNAR, MERCEDES, MD

Provider ID: N/A

 16305 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-MAR-23

SZPUNAR, MERCEDES, MD


Provider ID: N/A

 16305 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-MAR-23

PSYCHOLOGIST


ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUL-24


ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23


ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUL-24

ALEXANDER, DEBORAH, PSYD


Provider ID: N/A

 15635 ALTON PKWY STE

350
IRVINE, CA 92618
Effective as of 01-JUL-24


ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUL-24


ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23


ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23


HUFANA, ALYSSA, PhD

Provider ID: N/A

 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-AUG-24


HUFANA, ALYSSA, PhD

Provider ID: N/A

 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-AUG-24

HUFANA, ALYSSA, PhD

Provider ID: N/A

 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-AUG-24

C1. 网络提供者名单 专科护理医生

HUFANA, ALYSSA, PhD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-AUG-24

KANG, EILEEN, PhD

Provider ID: N/A

6 VENTURE
IRVINE, CA 92618
Effective as of 01-MAR-20

KANG, EILEEN, PhD

Provider ID: N/A

6 VENTURE
IRVINE, CA 92618
Effective as of 01-MAR-20

KANG, EILEEN, PhD

Provider ID: N/A

6 VENTURE
IRVINE, CA 92618
Effective as of 01-MAR-20

KANG, EILEEN, PhD

Provider ID: N/A

6 VENTURE
IRVINE, CA 92618
Effective as of 01-MAR-20

LEHMAN, ERICA, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

LEHMAN, ERICA, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

LEHMAN, ERICA, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

LEHMAN, ERICA, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

MILLER, ASHLEY, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JUL-24

MILLER, ASHLEY, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JUL-24

MILLER, ASHLEY, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JUL-24

MILLER, ASHLEY, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JUL-24

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE

STE 220

IRVINE, CA 92618
Effective as of 01-SEP-24

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-SEP-24

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JAN-24

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JAN-24

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JAN-24

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-SEP-24

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-SEP-24

C1. 网络提供者名单 专科护理医生

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-24

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-JUL-24

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-JUL-24

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-JUL-24

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-JUL-24

PETERSON, JENYFFER, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

PETERSON, JENYFFER, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

PETERSON, JENYFFER, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

PETERSON, JENYFFER, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

PULMONARY DISEASES

EL-BERSHAWI, AHMED, MD[†]

Provider ID: N/A

4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-JUN-22

EL-BERSHAWI, AHMED, MD[†]

Provider ID: N/A

4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-JUN-22

GHAZARIAN, ZERON, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 225
IRVINE, CA 92618

Effective as of 01-MAR-21

GOZZO, YVETTE, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-JAN-21

HARIANAWALA, SALIM, MD[†]

Provider ID: N/A

4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-JUN-22

HARIANAWALA, SALIM, MD[†]

Provider ID: N/A

4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-JUN-22

RADIATION ONCOLOGY

LIN, KEVIN, MD[†]

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

16105 SAND CANYON AVE
STE 150
IRVINE, CA 92618

Effective as of 01-JAN-20

LIN, KEVIN, MD†

Provider ID: N/A

16105 SAND CANYON AVE
IRVINE, CA 92618

Effective as of 01-JAN-21

RADIOLOGY DIAGNOSTIC

ULANER, GARY, MD†

Provider ID: N/A

16105 SAND CANYON AVE
STE 215
IRVINE, CA 92618

Effective as of 01-OCT-22

ULANER, GARY, MD†

Provider ID: N/A

16105 SAND CANYON AVE
STE 215
IRVINE, CA 92618

Effective as of 01-OCT-22

SURGERY COLON

SURGERY

MILANCHI, SIAMAK, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618

Effective as of 01-APR-15

MILANCHI, SIAMAK, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618

Effective as of 01-JAN-21

MILANCHI, SIAMAK, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618

Effective as of 01-APR-15

NG, DANIEL, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-MAY-24

NG, DANIEL, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-MAY-24

SURGERY GENERAL

CHUNG, NATHAN, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-MAR-21

CHUNG, NATHAN, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-MAR-21

COLEMAN, COLLEEN, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-JAN-20

FORRESTER, JARED, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-OCT-23

FORRESTER, JARED, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-OCT-23

HAMOUI, NAHID, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618

Effective as of 01-DEC-19

HAMOUI, NAHID, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618

Effective as of 01-DEC-19

HAMOUI, NAHID, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618

Effective as of 01-JAN-14

HAMOUI, NAHID, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618

Effective as of 01-JAN-21

HAMOUI, NAHID, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604

C1. 网络提供者名单 专科护理医生

IRVINE, CA 92618
Effective as of 01-JAN-23

HURWITZ, MICHAEL, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 260

IRVINE, CA 92618
Effective as of 01-JAN-20

JENSEN, NATISHA, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 260

IRVINE, CA 92618
Effective as of 01-AUG-23

KRAFT, ELIZABETH, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 160

IRVINE, CA 92618
Effective as of 01-OCT-23

KRAFT, ELIZABETH, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 160

IRVINE, CA 92618
Effective as of 01-OCT-23

MACDONALD, HEATHER, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 160

IRVINE, CA 92618
Effective as of 01-JAN-21

MILANCHI, SIAMAK, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604

IRVINE, CA 92618
Effective as of 01-JAN-18

NISHANIAN, GARABED, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 350

IRVINE, CA 92618
Effective as of 01-JAN-20

NISHANIAN, GARABED, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 350

IRVINE, CA 92618
Effective as of 01-NOV-15

SHAVER, JOHN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
IRVINE, CA 92618

Effective as of 01-NOV-19

SHAVER, JOHN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
IRVINE, CA 92618

Effective as of 01-NOV-19

WANG, THOMAS, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230

IRVINE, CA 92618
Effective as of 01-MAY-24

WOLF, RONALD, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230

IRVINE, CA 92618
Effective as of 01-NOV-23

SURGERY GENERAL VASCULAR

NISHANIAN, GARABED, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 350

IRVINE, CA 92618
Effective as of 01-JAN-21

NISHANIAN, GARABED, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 350

IRVINE, CA 92618
Effective as of 01-NOV-15

SURGERY

NEUROLOGICAL

JANKOWSKI, PAWEL, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618
Effective as of 01-MAY-23

MEHTA, VIVEK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 220

IRVINE, CA 92618
Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 220

IRVINE, CA 92618
Effective as of 01-AUG-21

MEHTA, VIVEK, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 300

IRVINE, CA 92618
Effective as of 01-APR-24

MEHTA, VIVEK, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JAN-21

MEHTA, VIVEK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JAN-21

OZGUR, BURAK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-21

OZGUR, BURAK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-MAR-23

SURGERY ORTHOPEDIC

ALEXANDER, GERALD, MD†

Provider ID: N/A

16300 SAND CANYON AVE

STE 511
IRVINE, CA 92618
Effective as of 01-JAN-21

ALEXANDER, GERALD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-MAR-18

ALEXANDER, GERALD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-MAR-18

ALI, RAED, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 240
IRVINE, CA 92618
Effective as of 01-JAN-19

ALI, RAED, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 225
IRVINE, CA 92618
Effective as of 01-JAN-23

ALI, RAED, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 240
IRVINE, CA 92618
Effective as of 01-JAN-23

ALI, RAED, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 225
IRVINE, CA 92618
Effective as of 01-OCT-23

ALI, RAED, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 240
IRVINE, CA 92618
Effective as of 01-OCT-23

AMINIAN, ARASH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

AMINIAN, ARASH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-NOV-21

AMINIAN, ARASH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-DEC-21

AMINIAN, ARASH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-FEB-23

AMINIAN, ARASH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-NOV-21

AMINIAN, ARASH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-NOV-21

AMINIAN, ARASH, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

☞ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-MAR-21

DEBOTTIS, DANIEL, MD

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-OCT-23

DEBOTTIS, DANIEL, MD

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-OCT-23

DUNPHY, TAYLOR, MD†

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618
Effective as of 01-JAN-21

GITTINGS, DANIEL, MD†

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-FEB-22

GITTINGS, DANIEL, MD†

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-FEB-22

GITTINGS, DANIEL, MD†

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-NOV-21

GITTINGS, DANIEL, MD†

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-NOV-21

GORDON, MICHAEL, MD

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

Effective as of 01-JAN-21

GRAHAM, SCOTT, MD

Provider ID: N/A

☞ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

HAGHVERDIAN, BRANDON, MD

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-DEC-23

HAGHVERDIAN, BRANDON, MD

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-DEC-23

HUNTER, MICHAEL, MD

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

Effective as of 01-OCT-22

HUNTER, MICHAEL, MD

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

Effective as of 01-MAR-24

JOHNSON, BRYCE, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

JOHNSON, BRYCE, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JUN-24

JOHNSON, BRYCE, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-MAR-21

JOHNSON, BRYCE, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-DEC-21

JOHNSON, BRYCE, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-FEB-21

KADAKIA, NIMISH, MD†

Provider ID: N/A


☞ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-FEB-21


KADAKIA, NIMISH, MD†

Provider ID: N/A


C1. 网络提供者名单 专科护理医生

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-FEB-17


KADAKIA, NIMISH, MD†
Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-FEB-17


KADAKIA, NIMISH, MD†
Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-FEB-21


KADAKIA, NIMISH, MD†
Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-DEC-21


KADAKIA, NIMISH, MD†
Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-MAR-21


KADAKIA, NIMISH, MD†
Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JUL-23

KADAKIA, NIMISH, MD†
Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JUL-23

KADAKIA, NIMISH, MD†
Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

KASSAM, HAFIZ, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

Effective as of 01-FEB-22

KIM, ABRAHAM, MD†

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

KIM, ABRAHAM, MD†

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-OCT-23

KIM, ABRAHAM, MD†

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-23

KIM, ABRAHAM, MD†

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-23

KIM, ABRAHAM, MD†

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-24

KIM, ABRAHAM, MD†


Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-24


KIM, ABRAHAM, MD†

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JAN-24


KIM, ABRAHAM, MD†

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JAN-24


LEE, RICHARD, MD

Provider ID: N/A

 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618
Effective as of 01-JAN-21


LIN, DARIUS, MD†

Provider ID: N/A

 22 ODYSSEY STE 270B
IRVINE, CA 92618
Effective as of 01-JUN-17


MOLHO, DAVID, MD

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JUN-24


MOLHO, DAVID, MD

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A


 22 ODYSSEY STE 205

C1. 网络提供者名单 专科护理医生

IRVINE, CA 92618
Effective as of 01-DEC-23


MOLHO, DAVID, MD

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-DEC-23


MONTGOMERY, ROBERT, MD

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23


MOSKOW, LONNIE, MD

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23


NIETO, MICHAEL, MD

Provider ID: N/A

 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-JUN-21


NIETO, MICHAEL, MD

Provider ID: N/A

 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-JUN-21

NINH, CHRISTOPHER, MD†

Provider ID: N/A

 113 WATERWORKS WAY
STE 240
IRVINE, CA 92618
Effective as of 01-OCT-23

NINH, CHRISTOPHER, MD†


Provider ID: N/A

 113 WATERWORKS WAY

STE 240
IRVINE, CA 92618
Effective as of 01-MAY-21


NINH, CHRISTOPHER, MD†

Provider ID: N/A

 113 WATERWORKS WAY
STE 240
IRVINE, CA 92618
Effective as of 01-JAN-23


PARVARESH, KEVIN, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-DEC-20


PARVARESH, KEVIN, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-DEC-20


PATEL, AMAR, MD†

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23


PATEL, AMAR, MD†

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-DEC-21


PYRKO, PETER, MD

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-OCT-23


SCUDDAY, TRAVIS, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-JAN-21


SCUDDAY, TRAVIS, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-SEP-18


SCUDDAY, TRAVIS, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-SEP-18


TING, JAMES, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618
Effective as of 01-JAN-21


VENEZIANO, CHRISTOPHER, MD

Provider ID: N/A

 22 ODYSSEY STE 210
IRVINE, CA 92618
Effective as of 01-SEP-23

WANG, WILLIAM, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618
Effective as of 01-AUG-22

WANG, WILLIAM, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

C1. 网络提供者名单 专科护理医生

Effective as of 01-AUG-22

WHITE, JON, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-AUG-18

WHITE, JON, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-FEB-03

WHITE, JON, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-DEC-12

WONG, JEFFREY, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

WONG, JEFFREY, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-20

WONG, JEFFREY, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-FEB-20

WONG, JEFFREY, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-FEB-20

YOUDERIAN, ARI, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-DEC-21

YOUDERIAN, ARI, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-OCT-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

ZHANG, JOANNE, MD

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

Effective as of 01-NOV-22

ZHANG, JOANNE, MD

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

Effective as of 01-NOV-22

SURGERY THORACIC

KANAAN, SAMER, MD†

Provider ID: N/A

☐ 4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-DEC-23

KANAAN, SAMER, MD†

Provider ID: N/A

☐ 4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-APR-22

KANAAN, SAMER, MD†

Provider ID: N/A

☐ 4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-APR-22

KANAAN, SAMER, MD†

Provider ID: N/A

☐ 4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-APR-22

KANAAN, SAMER, MD†

Provider ID: N/A

☐ 4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-APR-22

C1. 网络提供者名单 专科护理医生

KANAAN, SAMER, MD†

Provider ID: N/A

☐ 4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-APR-22

KANAAN, SAMER, MD†

Provider ID: N/A

☐ 16105 SAND CANYON AVE
IRVINE, CA 92618

Effective as of 01-APR-19

UROLOGY

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE

STE 200

IRVINE, CA 92618

Effective as of 01-JUN-24

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-23

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618*

Effective as of 01-OCT-22

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-23

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-DEC-23

ELKHOURY, FUAD, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-23

ELKHOURY, FUAD, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-23

GRUENENFELDER, JENNIFER, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-21

HO, TAMMY, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-21

HO, TAMMY, MD†

C1. 网络提供者名单

专科护理医生

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-FEB-22

HO, TAMMY, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-AUG-19

HO, TAMMY, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-AUG-19

HO, TAMMY, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-AUG-19

HO, TAMMY, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-AUG-19

HO, TAMMY, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-AUG-19

HO, TAMMY, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200

IRVINE, CA 92618

Effective as of 01-DEC-20

HO, TAMMY, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-MAY-19

HO, TAMMY, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-23

HO, TAMMY, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-19

HO, TAMMY, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-19

KIM, MOSES, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-23

KIM, MOSES, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

KIM, MOSES, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-23

KIM, MOSES, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-SEP-18

KIM, MOSES, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-SEP-18

KIM, MOSES, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-DEC-23

KIM, MOSES, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-21

MEAGLIA, JAMES, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-21

MEAGLIA, JAMES, MD†

Provider ID: N/A


☐ 16305 SAND CANYON AVE

C1. 网络提供者名单 专科护理医生

STE 200
IRVINE, CA 92618
Effective as of 01-DEC-23


MEAGLIA, JAMES, MD†

Provider ID: N/A

 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-DEC-19


MEAGLIA, JAMES, MD†

Provider ID: N/A

 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-DEC-19


MEAGLIA, JAMES, MD†

Provider ID: N/A

 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23


MEAGLIA, JAMES, MD†

Provider ID: N/A

 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18


MEAGLIA, JAMES, MD†

Provider ID: N/A

 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18


MEAGLIA, JAMES, MD†

Provider ID: N/A

 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18


MEAGLIA, JAMES, MD†

Provider ID: N/A

 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-23


MEAGLIA, JAMES, MD†

Provider ID: N/A

 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-24


NAKAMURA, LEAH, MD†

Provider ID: N/A

 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-24


NAKAMURA, LEAH, MD†

Provider ID: N/A

 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-23


NAKAMURA, LEAH, MD†

Provider ID: N/A

 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18


NAKAMURA, LEAH, MD†

Provider ID: N/A

 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23


NAKAMURA, LEAH, MD†

Provider ID: N/A

 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-APR-21


NAKAMURA, LEAH, MD†

Provider ID: N/A

 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-21


SHOURESHI, POONE, MD

Provider ID: N/A

 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-AUG-23


SHOURESHI, POONE, MD

Provider ID: N/A

 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-AUG-23


SHOURESHI, POONE, MD

Provider ID: N/A

 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

C1. 网络提供者名单 专科护理医生

Effective as of 01-AUG-23

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-DEC-19

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-21

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-DEC-19

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-23

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-23

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-24

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618*

Effective as of 01-JUN-24

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-23

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200

IRVINE, CA 92618

Effective as of 01-OCT-23

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-18

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-FEB-23

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-21

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-DEC-19

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-DEC-19

C1. 网络提供者名单

专科护理医生

SPITZ, AARON, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-APR-21

SU, DANIEL, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-DEC-19

SU, DANIEL, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
IRVINE, CA 92618
Effective as of 01-SEP-18

SU, DANIEL, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-18

SU, DANIEL, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-21

SU, DANIEL, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23

SU, DANIEL, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200

IRVINE, CA 92618
Effective as of 01-JAN-23

TAKESITA, KEN, MD†

Provider ID: N/A

☞ 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618
Effective as of 01-OCT-15

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-21

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-23

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-MAY-21

TORREY, ROBERT, MD

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JUL-24

TORREY, ROBERT, MD

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JUL-24

ZHAO, HANSON, MD

Provider ID: N/A


☞ 16105 SAND CANYON AVE

C1. 网络提供者名单 专科护理医生

STE 260
IRVINE, CA 92618
Effective as of 01-NOV-22

ZHAO, HANSON, MD


Provider ID: N/A

 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-NOV-22

ALLERGY IMMUNOLOGY


MODENA, BRIAN, MD†

Provider ID: N/A

 9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Teleservice
Effective as of 01-MAY-22


MODENA, BRIAN, MD†

Provider ID: N/A

 9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-22


SHARMA, KUSUM, MD

Provider ID: N/A

 9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Effective as of 01-JUN-22


SHARMA, KUSUM, MD

Provider ID: N/A

 9834 GENESEE AVE STE
400
LA JOLLA, CA 92037
Effective as of 01-JUL-21

SHARMA, KUSUM, MD

Provider ID: N/A

 9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Effective as of 01-JAN-23

ANESTHESIOLOGY


BECERRA SONGOLO, TOSHA, MD

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

CHAN, CHI-BEW, MD

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-24


FILIPOVIC, MAYA, MD

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

FUNDINGSLAND, BRENT, MD†

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-21

NARLA, VINOD, MD

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

NGO, DONALD, MD

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

PARDO, PATRICIA, MD

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-24

ROY, KEVIN, MD

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

SAHA, DEVJANI, MD

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-24


SUYDAM, STEVEN, MD†

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21

TULLY, JEFFREY, MD†

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21


TZENG, ERIC, MD†

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

VAUGHN, DOUGLAS, MD†

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

WANG, MICHELLE, MD†

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

C1. 网络提供者名单 专科护理医生

Effective as of 01-NOV-21

ANESTHESIOLOGY CRITICAL CARE MEDICINE

KRAUSE, MARTIN, MD[†]

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUL-21

ANESTHESIOLOGY PAIN MANAGEMENT

MADHAV, SANDIP, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-APR-21

MADHAV, SANDIP, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-MAR-21

AUDIOLOGIST

BAXTER, STEPHANIE, AuD

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

BAXTER, STEPHANIE, AuD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

BAXTER, STEPHANIE, AuD

Provider ID: N/A

📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

BAXTER, STEPHANIE, AuD

Provider ID: N/A

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

HARRIS, GENEVIEVE, AuD

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

KING, JOHN, AuD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

RUBY, CHARLES, AuD

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

SPRIGGS, MEGHAN, AuD

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

TSANG, JOYCE, AuD

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

WIAN, DEBORAH, AuD

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

WILLIAMS, ALICIA, AuD[†]

Provider ID: N/A

📍 9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037

Effective as of 01-JUL-21

ZETTNER, ERIKA, AuD

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

CARDIAC ELECTROPHYSIOLOGY

COHEN, DAVID, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
940
LA JOLLA, CA 92037

Effective as of 01-MAY-20

COHEN, DAVID, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
940
LA JOLLA, CA 92037

Effective as of 01-SEP-21

HAMZEI, ALI, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
780
LA JOLLA, CA 92037

Effective as of 01-JAN-21

MENDENHALL, GEORGE, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
940

C1. 网络提供者名单

专科护理医生

LA JOLLA, CA 92037
Effective as of 01-JUL-18

MENDENHALL, GEORGE, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
940

LA JOLLA, CA 92037
Effective as of 01-JAN-23

PATEL, JIGAR, DO†

Provider ID: N/A

📍 9850 GENESEE AVE STE
810

LA JOLLA, CA 92037
Effective as of 01-JAN-22

WHITWAM, WAYNE, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
780

LA JOLLA, CA 92037
Effective as of 01-JAN-21

CARDIOVASCULAR DISEASE

AIZIN, VITALI, MD†

Provider ID: N/A

📍 9834 GENESEE AVE STE 101
LA JOLLA, CA 92037

Effective as of 01-FEB-21

AIZIN, VITALI, MD†

Provider ID: N/A

📍 9834 GENESEE AVE STE 101
LA JOLLA, CA 92037

Effective as of 01-JAN-23

AVALOS, ROY, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
780

LA JOLLA, CA 92037
Effective as of 01-JAN-21

BERMAN, BRETT, MD†

Provider ID: N/A

📍 9834 GENESEE AVE STE 101
LA JOLLA, CA 92037

Effective as of 01-FEB-21

CARAZO, MATTHEW, MD†

Provider ID: N/A

📍 9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

Effective as of 01-NOV-21

CHARLAT, MARTIN, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
780

LA JOLLA, CA 92037

Effective as of 01-JAN-21

COHEN, DAVID, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
940

LA JOLLA, CA 92037

Effective as of 01-JAN-21

COSTELLO, DENNIS, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
430

LA JOLLA, CA 92037

Effective as of 01-JAN-21

COSTELLO, DENNIS, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
430

LA JOLLA, CA 92037

Effective as of 01-JUL-20

DAMANI, SAMIR, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE

650

LA JOLLA, CA 92037

Effective as of 01-JUN-22

DURAN, EDWARD, MD

Provider ID: N/A

📍 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

HONG, ERIC, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
780

LA JOLLA, CA 92037

Effective as of 01-JAN-21

KARIMIAN, AMIR, MD

Provider ID: N/A

📍 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

KEEN, WILLIAM, MD†

Provider ID: N/A

📍 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

KULHANEK, JAN, MD

Provider ID: N/A

📍 9850 GENESEE AVE STE
780

LA JOLLA, CA 92037

Effective as of 01-JUL-23

KUMAR, KRIS, DO

Provider ID: N/A

📍 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

MENDENHALL, GEORGE, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE

C1. 网络提供者名单 专科护理医生

940
LA JOLLA, CA 92037
Effective as of 01-JAN-21

PATEL, JIGAR, DO†

Provider ID: N/A

9850 GENESEE AVE STE
810
LA JOLLA, CA 92037
Effective as of 01-MAR-24

PATEL, JIGAR, DO

Provider ID: N/A

9850 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-AUG-24

RAPEPORT, KEVIN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
940B
LA JOLLA, CA 92037
Effective as of 01-MAR-16

RUSSO, ROBERT, MD†

Provider ID: N/A

9850 GENESEE AVE STE
350
LA JOLLA, CA 92037
Effective as of 01-JAN-21

SAB, SHIV, MD†

Provider ID: N/A

9850 GENESEE AVE STE
780
LA JOLLA, CA 92037
Effective as of 01-DEC-22

SHAPIRO, HILARY, MD

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

SHEREV, DIMITRI, MD

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-SEP-23

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-FEB-24

JULIAN, FIDES, LAC

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-FEB-24

JULIAN, FIDES, LAC

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

JULIAN, FIDES, LAC

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

MURRAY, STEVEN, LAC

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

MURRAY, STEVEN, LAC

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

MURRAY, STEVEN, LAC

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

CERTIFIED NURSE PRACTITIONER

ASHMAN, ELLEN, NP†

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

C1. 网络提供者名单 专科护理医生

ATILLO, RONALD MAR, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

BELL, ANDREA, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-22

BIRD, JEREMY, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

BIRD, JEREMY, NP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

BISCHER, MARGARET, NP

Provider ID: N/A

7855 IVANHOE AVE STE 110
LA JOLLA, CA 92037
Effective as of 01-MAR-24

BURNEY, BRAEANNE, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

CAMAQUIN, MIA, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

CAMAQUIN, MIA, NP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

CONNER, PAMELA, NP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

CONNER, PAMELA, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

CONNOR, CAROLINE, NP†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-JUN-21

CZYPULL, MONICA, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-SEP-21

CZYPULL, MONICA, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-21

DE DIOS, SARAH JANE, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

DRISCOLL, KARRIE, NP†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-DEC-21

EVANS, ELISABETH, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-APR-24

GIOVANNETTI, ERIN, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-21

GOMEZ, LESLIE, NP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GOMEZ, LESLIE, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GOMEZ, LESLIE, NP

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GOMEZ, LESLIE, NP

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

C1. 网络提供者名单 专科护理医生

Effective as of 01-MAY-23

GOSHEN, KIRSTEN, NP[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
570
LA JOLLA, CA 92037

Effective as of 01-SEP-22

GOSHEN, KIRSTEN, NP[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
570
LA JOLLA, CA 92037

Effective as of 01-JAN-21

HADINGER, JANE, NP

Provider ID: N/A

📍 8950 VILLA LA JOLLA DR
STE C129
LA JOLLA, CA 92037

Teleservice

Effective as of 01-DEC-23

HALPERN, DAVID, NP[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-JAN-21

HANNA, LINDSAY, NP[†]

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-OCT-21

HAYS, SHEENA, NPF

Provider ID: N/A

📍 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-24

HEURING, JULIE, NP[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-DEC-21

HOEFKE, ANGELA, NPF

Provider ID: N/A

📍 9850 GENESEE AVE STE
770
LA JOLLA, CA 92037

Effective as of 01-SEP-24

JENKINS, ERIN, NP

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

JENKINS, ERIN, NP

Provider ID: N/A

📍 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

JONES, CHRISTA, NP[†]

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-21

JONES, LAILA, NP

Provider ID: N/A

📍 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-JUN-23

JORJADZE, KETEVAN, NP

Provider ID: N/A

📍 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Teleservice

Effective as of 01-AUG-22

KHUAT, LIEN, NP[†]

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

KORMANIK, PATRICIA, NP[†]

Provider ID: N/A

📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-JUL-21

LEE, MINDY, NP

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

LEE, MINDY, NP

Provider ID: N/A

📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

LEE, MINDY, NP

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

LEE, MINDY, NP

Provider ID: N/A

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

LOWE, ASHLEY, NP

Provider ID: N/A

📍 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

C1. 网络提供者名单 专科护理医生

Teleservice

Effective as of 01-MAY-24

LOWE, ASHLEY, NP

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-23

MATTERA, BETH, NPF

Provider ID: N/A

9898 GENESEE AVE FL 4
LA JOLLA, CA 92037

Effective as of 01-MAY-16

MATTHESS, JANETTE, NP†

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-FEB-22

MATTHESS, JANETTE, NP†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Effective as of 01-FEB-22

MCCALLION, DANIELLE, NP†

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037

Effective as of 01-OCT-21

MCCALLION, DANIELLE, NP†

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037

Effective as of 01-SEP-22

MCCLAIN, MEGAN, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

MCCLAIN, MEGAN, NP†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-AUG-22

MCPHERSON, SAMANTHA, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Teleservice

Effective as of 01-AUG-21

MICHAEL, NICOLE, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-MAY-21

MICK, SHARON, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

MOONEY, PATRICIA, NP†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Teleservice

Effective as of 01-MAY-21

MOONEY, PATRICIA, NP†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

MORENO, MANUEL, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Teleservice

Effective as of 01-AUG-22

MULVEY, CAOILFHIONN, NP†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-AUG-22

MWAURA, WAIRIMU, NP†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

C1. 网络提供者名单 专科护理医生

MWAURA, WAIRIMU, NP†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-21

PETREK, MEAGAN, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

PITECK, CAITLIN, NPF

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-24

RENFROE, ILANA, NP

Provider ID: N/A

7855 IVANHOE AVE STE 110
LA JOLLA, CA 92037

Teleservice

Effective as of 01-DEC-21

ROLPH, KELLIE, NP

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037

Effective as of 01-AUG-24

ROSSI, CATHERINE, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

SALINAS, NIECEL, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

SETIAWAN, EUGENIE, NPF†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Teleservice

Effective as of 01-DEC-21

SILVESTRI, NICOLE, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-MAY-21

SOLOMON, AMANDA, NP

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-JUN-23

SRILASAK, MICHELE, NP†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-JUL-21

TOMICICH, STEPHANIE, NP†

Provider ID: N/A

9834 GENESEE AVE STE
416
LA JOLLA, CA 92037

Effective as of 01-JAN-21

TOMICICH, STEPHANIE, NP†

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

TOMICICH, STEPHANIE, NP†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

TRAN, RICHARD, NPF

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-23

TRAN, RICHARD, NPF

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037

Teleservice

Effective as of 01-MAR-24

TRAN, TRAN, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

TRAN, TRAN, NP†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

TREJO, ANA, NP

Provider ID: N/A

3855 HEALTH SCIENCES
DR

C1. 网络提供者名单 专科护理医生

LA JOLLA, CA 92093
Effective as of 01-JUL-24


TREJO, ANA, NP

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-24


TREJO, ANA, NP

Provider ID: N/A

 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-JUL-24

TRUJILLO, DALE, NP†

Provider ID: N/A

 9350 CAMPUS POINT DR
STE 2B
LA JOLLA, CA 92037
Effective as of 01-APR-21


TUCKER, LANIKA, NP

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-24


VIERRA, ERIN, NP†

Provider ID: N/A

 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-MAY-21

WEIDNER, ANNE, NP

Provider ID: N/A

 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-MAY-21

WILLEY, MARTI, NP†

Provider ID: N/A

 9850 GENESEE AVE STE


560
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-21

WILLEY, MARTI, NP†

Provider ID: N/A

 9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Teleservice

Effective as of 01-JAN-24


YEO, ALEXANDRIA, NP

Provider ID: N/A

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

ZUNIGA, VANIA, NP†

Provider ID: N/A

 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-MAY-21

CERTIFIED REGISTERED NURSE ANESTHETIST

CALABRIA, MEGAN, CRNA

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

CANTRELL, SARAH, CRNA

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

COLE, JASON, CRNA†


Provider ID: N/A

 9300 CAMPUS POINT DR

LA JOLLA, CA 92037
Effective as of 01-JUL-21

DOLLAND, STEVEN, CRNA†

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-21


DULAY, JOTI, CRNA

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

ESTABROOK, LARA, CRNA

Provider ID: N/A

 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JUL-23


EVANS, CATHERINE, CRNA

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-23


FIEDLER, DEREK, CRNA

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23


GONZALEZ, LISA, CRNA

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

GRIFFIN, SETH, CRNA

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

C1. 网络提供者名单 专科护理医生

JOHNSTON, RACHEL, CRNA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

LAZARUS, ELIZABETH, CRNA

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Effective as of 01-JUL-23

POLIKOWSKI, SAMANTHA, CRNA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

POLLOM, JESSICA, CRNA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUL-21

RAMIREZ, NICOLE, CRNA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

ROADMAN, KEENE, CRNA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

SACKS, BRENT, CRNA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-APR-21

SNODGRASS, JULIE, CRNA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUL-21

SOTO, GILBERTO, CRNA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-FEB-22

CERTIFIED REGISTERED NURSE MIDWIFE

CHOI, NATHALIE, CRNM

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

CORRY, ANDREA, CRNM

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

ELY-KONOSKE, RACHEL, CRNM

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

ELY-KONOSKE, RACHEL, CRNM

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

NATHAN, CARLY, CRNM

Provider ID: N/A

9300 CAMPUS POINT DR

LA JOLLA, CA 92037

Effective as of 01-AUG-23

CHIROPRACTOR

BERKOFF, GREGORY, DC

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C129
LA JOLLA, CA 92037

Effective as of 01-MAY-21

CLINICAL

NEUROPSYCHOLOGIST

ALASANTRO, LORI, PhD†

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037

Effective as of 01-FEB-18

KAUP, ALLISON, PhD†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-MAR-21

DERMATOLOGY

BUSCH, HEIDI, MD

Provider ID: N/A

9850 GENESEE AVE STE
410
LA JOLLA, CA 92037

Effective as of 01-JUL-24

CHANG, TIMOTHY, MD†

Provider ID: N/A

9850 GENESEE AVE STE
850
LA JOLLA, CA 92037

Teleservice

C1. 网络提供者名单 专科护理医生

Effective as of 01-OCT-21

GONZALES, DARRELL, MD

Provider ID: N/A

📍 9850 GENESEE AVE STE
850
LA JOLLA, CA 92037

Teleservice

Effective as of 01-OCT-21

NASH-GOELITZ, ALYSSA, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
850
LA JOLLA, CA 92037

Teleservice

Effective as of 01-OCT-21

SIDDIQUI, FARYAL, MD

Provider ID: N/A

📍 7720 FAY AVE
LA JOLLA, CA 92037

Effective as of 01-MAY-22

EMERGENCY MEDICINE

BLACK, NICHOLAS, MD†

Provider ID: N/A

📍 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

Effective as of 01-SEP-21

CHEN, ALICE, MD†

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

CHEN, ALICE, MD†

Provider ID: N/A

📍 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Effective as of 01-NOV-21

GALUST, HENRIK, MD

Provider ID: N/A

📍 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

HARDIN, JEREMY, MD†

Provider ID: N/A

📍 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

HERNANDEZ, CRISTINA, MD†

Provider ID: N/A

📍 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Effective as of 01-MAY-21

HOGUE, BRENNIA, MD

Provider ID: N/A

📍 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

HOGUE, BRENNIA, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

KUTZ, CRAIG, MD†

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-21

KUTZ, CRAIG, MD†

Provider ID: N/A

📍 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

Effective as of 01-AUG-21

LIOTTA, BENJAMIN, MD†

Provider ID: N/A

📍 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Effective as of 01-AUG-21

PARK, JAY, MD†

Provider ID: N/A

📍 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Effective as of 01-NOV-21

PARK, JAY, MD†

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-21

SELTZER, JUSTIN, MD†

Provider ID: N/A

📍 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

Effective as of 01-AUG-21

SMITH, CASEY, MD

Provider ID: N/A

📍 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

SUPAT, BENJAMIN, MD

Provider ID: N/A

📍 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

YU, ELAINE, DO

Provider ID: N/A

📍 8910 VILLA LA JOLLA DR
STE A
LA JOLLA, CA 92037

Effective as of 01-JUN-23

C1. 网络提供者名单 专科护理医生

YU, ELAINE, DO

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

ENDOCRINOLOGY

METABOLISM DIABETES

IYENGAR, RAVI, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

IYENGAR, RAVI, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

MBA, MBAUZOMA, MD

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037
Effective as of 01-DEC-22

NAGELBERG, JODI, MD†

Provider ID: N/A

8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

PETTUS, JEREMY, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

SCHNEIDER, DARIUS, MD

Provider ID: N/A

9850 GENESEE AVE STE
470

LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-23

SCHNEIDER, DARIUS, MD

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037

Teleservice

Effective as of 01-OCT-21

SHAH, NANDI, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

SHAH, NANDI, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

FAMILY PRACTICE

BOYD, JAMES, MD†

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

JOLICOEUR, MEGAN, DO

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

GASTROENTEROLOGY

BORTNIKER, ETHAN, MD

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Effective as of 01-JUN-23

GOLDKLANG, ROBERT, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-SEP-22

GOLDKLANG, ROBERT, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-APR-23

HASAN, AWS, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

HASAN, AWS, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

KLAPHEKE, ROBERT, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

LAJOIE, ADRIANNE, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
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Effective as of 01-SEP-22

MAYER, ANDREW, MD†

Provider ID: N/A

9850 GENESEE AVE STE

C1. 网络提供者名单 专科护理医生

820
LA JOLLA, CA 92037*
Effective as of 01-NOV-14

MAYER, ANDREW, MD

Provider ID: N/A
☒ 9850 GENESEE AVE STE
770
LA JOLLA, CA 92037
Effective as of 01-AUG-24

MAYER, ANDREW, MD

Provider ID: N/A
☒ 9850 GENESEE AVE STE
770
LA JOLLA, CA 92037
Effective as of 01-JUL-24

MAYER, ANDREW, MD†

Provider ID: N/A
☒ 9850 GENESEE AVE STE
820
LA JOLLA, CA 92037
Effective as of 01-JAN-21

PAREDEZ, EDWARD, MD†

Provider ID: N/A
☒ 9850 GENESEE AVE STE
820
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

PAREDEZ, EDWARD, MD†

Provider ID: N/A
☒ 9850 GENESEE AVE STE
820
LA JOLLA, CA 92037
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PAREDEZ, EDWARD, MD

Provider ID: N/A
☒ 9850 GENESEE AVE STE
770

LA JOLLA, CA 92037
Effective as of 01-SEP-24

PAREDEZ, EDWARD, MD

Provider ID: N/A
☒ 9850 GENESEE AVE STE
770
LA JOLLA, CA 92037
Effective as of 01-AUG-24

SHAH, SHAILJA, MD†

Provider ID: N/A
☒ 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

SHAH, SHAILJA, MD†

Provider ID: N/A
☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

SYAL, GAURAV, MD

Provider ID: N/A
☒ 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SYAL, GAURAV, MD

Provider ID: N/A
☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

YOUSSEF, FADY, MD

Provider ID: N/A
☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

YOUSSEF, FADY, MD

Provider ID: N/A
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LA JOLLA, CA 92037
Effective as of 01-JUN-23

GENETICS MEDICAL

JONES, MARILYN, MD†

Provider ID: N/A
☒ 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
Effective as of 01-JUN-21

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ, MD†

Provider ID: N/A
☒ 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JUL-21

GYNECOLOGY

MARSHALL, CATHARINE, MD

Provider ID: N/A
☒ 7301 GIRARD AVE STE 300
LA JOLLA, CA 92037
Effective as of 01-NOV-18

HEMATOLOGY / ONCOLOGY

BANERJEE, PUSHPENDU, MD†

Provider ID: N/A
☒ 9850 GENESEE AVE STE
560
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Teleservice
Effective as of 01-JAN-21

BANERJEE, PUSHPENDU, MD†

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560
LA JOLLA, CA 92037
Teleservice

C1. 网络提供者名单 专科护理医生

Effective as of 01-JAN-21

CHEN, YU-WEI, MD

Provider ID: N/A

📄 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-DEC-23

CHEN, YU-WEI, MD

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

SINCLAIR, JAMES, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Effective as of 01-JAN-21

SINCLAIR, JAMES, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
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LA JOLLA, CA 92037

Effective as of 01-JAN-21

SINCLAIR, JAMES, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
560
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Effective as of 01-JUN-18

SULLIVAN, JESSICA, DO

Provider ID: N/A

📄 3855 HEALTH SCIENCES
DR

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Effective as of 01-SEP-23

VENKATESWARAN, APARAJIT, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE
560

LA JOLLA, CA 92037*

Effective as of 01-OCT-24

WALLACH, SABINA, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
400
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

WALLACH, SABINA, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
400
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

HOSPICE AND PALLIATIVE MEDICINE

RUBENZIK, TAMARA, MD†

Provider ID: N/A

📄 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-FEB-21

HOSPITALIST MD/DO

BADALYAN, SEDA, MD†

Provider ID: N/A

📄 9888 GENESEE AVE
LA JOLLA, CA 92037*

Effective as of 01-AUG-21

COFFLER, ELIANE, MD

Provider ID: N/A

📄 9888 GENESEE AVE
LA JOLLA, CA 92037

Effective as of 01-MAR-23

DJEKIC, KRISTINA, DO†

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

DOUGLAS, JASON, MD

Provider ID: N/A

📄 9888 GENESEE AVE
LA JOLLA, CA 92037*

Effective as of 01-JAN-23

FIRESTEIN, CATHERINE, MD†

Provider ID: N/A

📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-21

HAMMOND, CHARLES, MD†

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-APR-21

PAPP, STEPHAN, MD

Provider ID: N/A

📄 9888 GENESEE AVE
LA JOLLA, CA 92037*

Effective as of 01-NOV-22

SCHUETZ, HESTON, MD

Provider ID: N/A

📄 9888 GENESEE AVE
LA JOLLA, CA 92037*

Effective as of 01-APR-24

SHINDO, YURI, MD†

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-21

TONG, ALEXANDER, MD

Provider ID: N/A

📄 9300 CAMPUS POINT DR

C1. 网络提供者名单 专科护理医生

LA JOLLA, CA 92037
Effective as of 01-JUL-23

WILLIAMS, BRANDON, MD†

Provider ID: N/A
9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-SEP-21

YANG, BENJAMIN, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

YASSIN, HAZEM, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

INFECTIOUS DISEASE

BARTHEL, ROBERT, MD†

Provider ID: N/A
9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

KUPPALLI, KRUTIKA, MD

Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-23

KUPPALLI, KRUTIKA, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-23

MILLER, H, MD

Provider ID: N/A
9834 GENESEE AVE STE

310
LA JOLLA, CA 92037*
Effective as of 01-FEB-21

RAMIREZSANCHEZ, CLAUDIA, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

TANG, MICHAEL, MD

Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

INTERNAL MEDICINE

BONAGIRI, PRANAY, DO

Provider ID: N/A
9850 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-JUL-24

BORTZ, DAVID, MD†

Provider ID: N/A
9850 GENESEE AVE STE
570
LA JOLLA, CA 92037*

Teleservice

Effective as of 01-OCT-22

BRAZEL, DANIELLE, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

CROWLEY, DOUGLAS, MD†

Provider ID: N/A
9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

DASHI, ARBEN, MD†

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

GADIYARAM, VARUNA, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

GAN, TERENCE, MD†

Provider ID: N/A
9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

JEBAIN, JEBAIN, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-24

KARNIK, KUSHAL, MD

Provider ID: N/A
9888 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-JUN-24

KATSNELSON, MARCELLA, DO

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

LAM, PAMELA, DO†

Provider ID: N/A
9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

LAM, PAMELA, DO†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

📄 9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

LEVIN, MARINA, MD

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-24

LEWIS, GREG, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

LEWIS, GREG, MD†

Provider ID: N/A

📄 9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

LIU, ANDREW, MD

Provider ID: N/A

📄 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-SEP-23

LIU, ANDREW, MD

Provider ID: N/A

📄 4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-SEP-23

LUGO, GUSTAVO, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

MARTINEZ, ARMANDO, MD†

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

MCCUTCHEON, CLAIRE, MD†

Provider ID: N/A

📄 9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-DEC-22

MIRZA, BASHAR, MD

Provider ID: N/A

📄 9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-MAR-24

MOOLANI, UJJALA, MD

Provider ID: N/A

📄 4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MOOLANI, UJJALA, MD

Provider ID: N/A

📄 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-MAY-23

NOKES, BRANDON, MD†

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21

RADWAN, MOHAMED, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-JAN-21

RAMOS, JEFFREY, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

RAMOS, JEFFREY, MD†

Provider ID: N/A

📄 9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

STEVENS, KENNETH, MD†

Provider ID: N/A

📄 9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

STEVENS, KENNETH, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

TOPPEN, WILLIAM, MD†

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

TOROSIAN, KARO, DO†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-SEP-22

TRAN, PHI, DO†

Provider ID: N/A

📄 9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

C1. 网络提供者名单

专科护理医生

TRAN, PHI, DO[†]

Provider ID: N/A

📍 9888 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-JAN-21

TRIVEDI, NAYANA, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
900
LA JOLLA, CA 92037
Effective as of 01-JAN-21

TRIVEDI, MEHUL, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

YANG, JENNY, MD[†]

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

INTERNAL MEDICINE CRITICAL CARE MEDICINE

BOROK, ZEA, MD[†]

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

JAFFE, GILAD, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

JONES, DANIEL, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
780

LA JOLLA, CA 92037
Effective as of 01-JAN-21

SULLIVAN, LAUREN, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

INTERVENTIONAL CARDIOLOGY

AIZIN, VITALI, MD[†]

Provider ID: N/A

📍 9834 GENESEE AVE STE 101
LA JOLLA, CA 92037
Effective as of 01-SEP-15

AL KHIAMI, BELAL, MD[†]

Provider ID: N/A

📍 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
Effective as of 01-JAN-21

CRUZ RODRIGUEZ, JOSE, MD

Provider ID: N/A

📍 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

DAMANI, SAMIR, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
650
LA JOLLA, CA 92037
Effective as of 01-NOV-23

GOVEA, ALAYN, MD

Provider ID: N/A

📍 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

RAPEPORT, KEVIN, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
940B
LA JOLLA, CA 92037
Effective as of 01-JAN-21

WHITWAM, WAYNE, MD[†]

Provider ID: N/A

📍 9850 GENESEE AVE STE
780
LA JOLLA, CA 92037
Effective as of 01-NOV-20

LICENSED CLINICAL SOCIAL WORKER

ELLEDDGE, LINDSAY, LCSW

Provider ID: N/A

📍 8950 VILLA LA JOLLA DR
STE 101
LA JOLLA, CA 92037
Effective as of 01-JUL-23

ESTEN, JOHN, LCSW

Provider ID: N/A

📍 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-AUG-24

WISHNEK, HANNAH, LCSW[†]

Provider ID: N/A

📍 8910 VILLA LA JOLLA DR
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Effective as of 01-AUG-22

MARRIAGE FAMILY THERAPIST

POZUN, CARA, MFT

Provider ID: N/A

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STE C101
LA JOLLA, CA 92037

C1. 网络提供者名单 专科护理医生

Effective as of 01-DEC-23

MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI, MD

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

MEDICAL ONCOLOGY

BANERJEE, PUSHPENDU, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-18

FLORES, EDNA, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Effective as of 01-JUN-18

FLORES, EDNA, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Effective as of 01-JAN-21

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A

📄 4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037

Effective as of 01-MAY-23

CRUZ WHITLEY, JESSICA, MD

Provider ID: N/A

📄 4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037

Effective as of 01-MAY-23

DAVIS, JASON, MD

Provider ID: N/A

📄 4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037

Effective as of 01-JUN-23

LAKHERA, YOGITA, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-22

LAKHERA, YOGITA, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037

Teleservice

Effective as of 01-MAR-17

LAKHERA, YOGITA, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037

Teleservice

Effective as of 01-MAR-22

LAKHERA, YOGITA, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037

Teleservice

Effective as of 01-AUG-24

LAKHERA, YOGITA, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

NAMAZY, DAVID, MD

Provider ID: N/A

📄 4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037

Effective as of 01-JUN-23

STEER, DYLAN, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037

Effective as of 01-SEP-15

STEER, DYLAN, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037

Effective as of 01-JAN-21

STEER, DYLAN, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037

Effective as of 01-JAN-21

STEER, DYLAN, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037

Effective as of 01-FEB-05

STEER, DYLAN, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-JUL-22

TOROSIAN, KARO, DO†

Provider ID: N/A

9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-DEC-17

TOROSIAN, KARO, DO†

Provider ID: N/A

9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-JUL-22

TOROSIAN, KARO, DO†

Provider ID: N/A

9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-JAN-21

TOROSIAN, KARO, DO†

Provider ID: N/A

9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-SEP-20

ZHONG, YAN, MD†

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-MAR-22

NEUROLOGY

ANSARI, HOSSEIN, MD†

Provider ID: N/A

4180 LA JOLLA VILLAGE

DR STE 240
LA JOLLA, CA 92037
Effective as of 01-MAY-22

CHOUDRY, BILAL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037
Effective as of 01-FEB-16

CHOUDRY, BILAL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037
Effective as of 01-FEB-16

DROKER, BRIAN, MD

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Teleservice
Effective as of 01-APR-24

DROKER, BRIAN, MD

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Teleservice
Effective as of 01-SEP-24

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037
Effective as of 01-FEB-16

GUPTA, VISHAL, DO

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-23

HAAS, RICHARD, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037
Effective as of 01-OCT-21

HAMILTON, ROSS, MD

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037*
Effective as of 01-OCT-24

KARANJIA, NAVAZ, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-22

KOCHARIAN, NAIRA, MD†

Provider ID: N/A

9850 GENESEE AVE STE
340
LA JOLLA, CA 92037
Effective as of 01-JAN-21

LUHAR, RIYA, DO

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-23

LUHAR, RIYA, DO

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-24

C1. 网络提供者名单 专科护理医生

NIELSEN, AMY, DO†

Provider ID: N/A

📍 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-FEB-21

NIELSEN, AMY, DO†

Provider ID: N/A

📍 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-FEB-21

NIELSEN, AMY, DO†

Provider ID: N/A

📍 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-FEB-21

OH, IRENE, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
470
LA JOLLA, CA 92037

Effective as of 01-FEB-16

PADUGA, REMIA, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Effective as of 01-MAR-21

QAYOUMI, WALI, MD†

Provider ID: N/A

📍 9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037

Effective as of 01-OCT-21

QAYOUMI, WALI, MD†

Provider ID: N/A

📍 9500 GILMAN DR STE 2069
LA JOLLA, CA 92093

Effective as of 01-OCT-21

SADOFF, MARK, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
470
LA JOLLA, CA 92037

Effective as of 01-FEB-16

SADOFF, MARK, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Effective as of 01-FEB-21

SCHIM, JACK, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
470
LA JOLLA, CA 92037

Effective as of 01-FEB-16

SCHULTE, JESSICA, MD†

Provider ID: N/A

📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-SEP-21

WANG, CHUNYANG, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Effective as of 01-SEP-22

WANG, CHUNYANG, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
470

LA JOLLA, CA 92037

Effective as of 01-FEB-16

WANG, ANCHI, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
470

LA JOLLA, CA 92037

Effective as of 01-FEB-16

WANG, CHUNYANG, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
470

LA JOLLA, CA 92037

Effective as of 01-FEB-16

WIEGAND, SARAH, DO†

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-21

NUCLEAR MEDICINE

CHOI, ESTHER, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

GAMIE, SHERIEF, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-24

KIPPER, MICHAEL, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

SHARIF TABRIZI, AHMAD, MD

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JUL-21

BONDRE, IOANA, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-OCT-21

CARDENAS, MICHAEL, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-NOV-21

CARDENAS, MICHAEL, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

DELCORE, LAURA, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

DELCORE, LAURA, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

HARVEY, SCOTT, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-21

HARVEY, SCOTT, MD†

Provider ID: N/A

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-MAY-21

HILL, KAITLYN, MD

Provider ID: N/A

9850 GENESEE AVE STE
820
LA JOLLA, CA 92037
Effective as of 01-JAN-24

KURTULUS, MEL, MD

Provider ID: N/A

9850 GENESEE AVE STE
820
LA JOLLA, CA 92037
Effective as of 01-JAN-24

MACKAY, GILLIAN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

MACKAY, GILLIAN, MD

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-DEC-23

MELLENDEZ, ARIANA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

MEURICE, MARIELLE

ERENDIRA LUCILLE, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-SEP-21

PICKETT, CHARLOTTE, MD

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

SPRING-ROBINSON,

CHANDRA, DO†

Provider ID: N/A

9850 GENESEE AVE STE
770
LA JOLLA, CA 92037
Effective as of 01-JAN-23

SPRING-ROBINSON,

CHANDRA, DO†

Provider ID: N/A

9850 GENESEE AVE STE

C1. 网络提供者名单 专科护理医生

770
LA JOLLA, CA 92037
Effective as of 01-JAN-21

THOMSON, SAMANTHA, MD†
Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-OCT-21

THOMSON, SAMANTHA, MD†
Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-OCT-21

OCCUPATIONAL THERAPIST

MUNCADA, CAESAR, OT†
Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-22

OPHTHALMOLOGY

ARNETT, JUSTIN, MD
Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

ARNETT, JUSTIN, MD
Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-23

ARNETT, JUSTIN, MD
Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

BINDER, NICHOLAS, MD†

Provider ID: N/A
9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A
9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-NOV-23

BINDER, NICHOLAS, MD†

Provider ID: N/A
9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-NOV-21

BINDER, NICHOLAS, MD†

Provider ID: N/A
9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-DEC-23

BOKOSKY, JOHN, MD

Provider ID: N/A
9834 GENESEE AVE STE
200
LA JOLLA, CA 92037
Effective as of 01-SEP-24

BOLO, KYLE, MD

Provider ID: N/A
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-23

BOLO, KYLE, MD

Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

BOLO, KYLE, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

CHIU, STEPHAN, MD†

Provider ID: N/A
9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-MAY-22

CHIU, STEPHAN, MD†

Provider ID: N/A
9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-JUN-23

CHOPLIN, NEIL, MD†

Provider ID: N/A
9834 GENESEE AVE STE
428

C1. 网络提供者名单 专科护理医生

LA JOLLA, CA 92037
Effective as of 01-JUL-21

CHOPLIN, NEIL, MD†

Provider ID: N/A

📍 9834 GENESEE AVE STE
428

LA JOLLA, CA 92037
Effective as of 01-AUG-23

CULOTTA, ANTHONY, MD

Provider ID: N/A

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037
Effective as of 01-FEB-24

CULOTTA, ANTHONY, MD

Provider ID: N/A

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037
Effective as of 01-SEP-24

ESLANI, MEDI, MD

Provider ID: N/A

📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-23

ESLANI, MEDI, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

ESLANI, MEDI, MD

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

FISH, STEVEN, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE

310
LA JOLLA, CA 92037
Effective as of 01-NOV-22

FISH, STEVEN, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037
Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037
Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037
Effective as of 01-APR-23

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037
Effective as of 01-SEP-22

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037
Effective as of 01-JAN-21

HENNEIN, LAUREN, MD

Provider ID: N/A

📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-23

HUANG, ALEX, MD†

Provider ID: N/A

📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-DEC-21

HUDSON, HENRY, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037
Effective as of 01-APR-22

HUDSON, HENRY, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037
Effective as of 01-APR-23

HUDSON, HENRY, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037
Effective as of 01-MAY-21

HUDSON, HENRY, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037
Effective as of 01-SEP-22

LANG, PAUL, MD

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

LANG, PAUL, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

C1. 网络提供者名单

专科护理医生

LANG, PAUL, MD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-23

MCGRAW, JOSEPH, MD†

Provider ID: N/A

9834 GENESEE AVE STE
428
LA JOLLA, CA 92037
Effective as of 01-NOV-21

MCGRAW, JOSEPH, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-SEP-22

MIDTLING, STEPHANIE, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-JUL-24

MORRISON-REYES, JOSHUA, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-FEB-24

MORTON, ASA, MD

Provider ID: N/A

9834 GENESEE AVE STE
428
LA JOLLA, CA 92037
Effective as of 01-AUG-23

MORTON, ASA, MD

Provider ID: N/A

9834 GENESEE AVE STE
428
LA JOLLA, CA 92037
Effective as of 01-JUL-23

PERRY, ARTHUR, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-JAN-21

PERRY, ARTHUR, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-JAN-21

PERRY, ARTHUR, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-FEB-07

PERRY, ARTHUR, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-OCT-95

PRATT, STEVEN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-OCT-12

PRATT, STEVEN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-JAN-21

PRATT, STEVEN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-JAN-21

PUIG LLANO, MANUEL, MD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUL-23

ROESKE, RICHMOND, MD

Provider ID: N/A

9834 GENESEE AVE STE
200
LA JOLLA, CA 92037
Effective as of 01-MAR-24

SAMUEL, MICHAEL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-SEP-22

SATTERFIELD, KELLIE, MD

Provider ID: N/A

9834 GENESEE AVE STE
200
LA JOLLA, CA 92037
Effective as of 01-MAR-24

SATTERFIELD, KELLIE, MD

Provider ID: N/A

9834 GENESEE AVE STE
200
LA JOLLA, CA 92037
Effective as of 01-DEC-23

SCHONBACH, ETIENNE, MD†

Provider ID: N/A

C1. 网络提供者名单

专科护理医生

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-21

SHEILS, CATHERINE, MD
Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SHEILS, CATHERINE, MD
Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUN-23

SHEILS, CATHERINE, MD
Provider ID: N/A

9834 GENESEE AVE STE
200
LA JOLLA, CA 92037
Effective as of 01-JAN-24

SHOJI, MARISSA, MD
Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

SHOJI, MARISSA, MD
Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

SHOJI, MARISSA, MD
Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-23

SONG, DELU, MD†
Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-21

SUK, KEVIN, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-FEB-24

TOPILOW, NICOLE, MD†

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-21

WESTEREN, ALAN, MD

Provider ID: N/A

6529 LA JOLLA BLVD
LA JOLLA, CA 92037
Effective as of 01-JAN-23

ZHAO, TAILUN, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
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Effective as of 01-JAN-24

ZHAO, TAILUN, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-JUL-23

ZHAO, TAILUN, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-SEP-24

ZHAO, TAILUN, MD

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9850 GENESEE AVE STE

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LA JOLLA, CA 92037
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OPTOMETRIST

HOO, PAMELA, OD†

Provider ID: N/A

9415 CAMPUS POINT DR
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JOMOC, CAITLIN, OD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUL-23

JOMOC, CAITLIN, OD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

JULAZADEH, SARA, OD

Provider ID: N/A

9834 GENESEE AVE STE
428
LA JOLLA, CA 92037
Effective as of 01-SEP-23

JULAZADEH, SARA, OD

Provider ID: N/A

9834 GENESEE AVE STE
200
LA JOLLA, CA 92037
Effective as of 01-SEP-24

KHIEU, TINA, OD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-NOV-23

C1. 网络提供者名单 专科护理医生

KHIEU, TINA, OD

Provider ID: N/A

📍 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
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KHIEU, TINA, OD

Provider ID: N/A

📍 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
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KIM, PHILIP, OD†

Provider ID: N/A

📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAR-22

MARR, RYAN, OD

Provider ID: N/A

📍 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-JUL-24

MCCLEAN, ESMERALDA, OD†

Provider ID: N/A

📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-22

TAUNTON, PHILIP, OD†

Provider ID: N/A

📍 9834 GENESEE AVE STE
428
LA JOLLA, CA 92037
Effective as of 01-SEP-21

TAUNTON, PHILIP, OD†

Provider ID: N/A

📍 9834 GENESEE AVE STE
428
LA JOLLA, CA 92037

Effective as of 01-SEP-23

YU, CAROL, OD

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

YU, CAROL, OD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

OTOLARYNGOLOGY

BAREISS, ANNA, MD

Provider ID: N/A

📍 4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Teleservice
Effective as of 01-MAY-23

BAREISS, ANNA, MD

Provider ID: N/A

📍 4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Teleservice
Effective as of 01-DEC-23

BRUMUND, KEVIN, MD

Provider ID: N/A

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

BRUMUND, KEVIN, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

BRUMUND, KEVIN, MD

Provider ID: N/A

📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A

📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

CHANG, ANGELA, MD†

Provider ID: N/A

📍 9834 GENESEE AVE STE 112
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Effective as of 01-JAN-21

CHANG, ANGELA, MD†

Provider ID: N/A

📍 9834 GENESEE AVE STE 112
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CHANG, ANGELA, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

9834 GENESEE AVE STE 112 Effective as of 01-MAY-23
LA JOLLA, CA 92037
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CHANG, ANGELA, MD†

Provider ID: N/A

9834 GENESEE AVE STE 112 Effective as of 01-MAY-23
LA JOLLA, CA 92037
Effective as of 01-JUL-20

COFFEY, CHARLES, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

COFFEY, CHARLES, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

COFFEY, CHARLES, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
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COFFEY, CHARLES, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
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DECONDE, ADAM, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
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DECONDE, ADAM, MD

Provider ID: N/A

9400 CAMPUS POINT DR
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DECONDE, ADAM, MD

Provider ID: N/A

9300 CAMPUS POINT DR
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DECONDE, ADAM, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
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Effective as of 01-MAY-23

FRIEDMAN, RICK, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
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FRIEDMAN, RICK, MD

Provider ID: N/A

9300 CAMPUS POINT DR
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FRIEDMAN, RICK, MD

Provider ID: N/A

9400 CAMPUS POINT DR
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FRIEDMAN, RICK, MD

Provider ID: N/A

9350 CAMPUS POINT DR
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GILANI, SAPIDEH, MD

Provider ID: N/A

9350 CAMPUS POINT DR
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Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A

9400 CAMPUS POINT DR
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GILANI, SAPIDEH, MD

Provider ID: N/A

9300 CAMPUS POINT DR
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GILANI, SAPIDEH, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
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GREENE, JACQUELINE, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
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LA JOLLA, CA 92037
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD

Provider ID: N/A

9400 CAMPUS POINT DR
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Effective as of 01-MAY-23

GREENE, JACQUELINE, MD

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9350 CAMPUS POINT DR
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C1. 网络提供者名单 专科护理医生

GUO, THERESA, MD

Provider ID: N/A

9350 CAMPUS POINT DR
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GUO, THERESA, MD

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9400 CAMPUS POINT DR
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GUO, THERESA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
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GUO, THERESA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
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HARRIS, JEFFREY, MD

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3855 HEALTH SCIENCES
DR
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Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

9300 CAMPUS POINT DR
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Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

9400 CAMPUS POINT DR
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HARRIS, JEFFREY, MD

Provider ID: N/A

9350 CAMPUS POINT DR
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Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

9350 CAMPUS POINT DR
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HOM, DAVID, MD

Provider ID: N/A

9400 CAMPUS POINT DR
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HOM, DAVID, MD

Provider ID: N/A

9300 CAMPUS POINT DR
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Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
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Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

3855 HEALTH SCIENCES
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Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

9300 CAMPUS POINT DR
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HUGHES, CHARLOTTE, MD

Provider ID: N/A

9400 CAMPUS POINT DR
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Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HUSSEMAN, JACOB, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-23

JANSEN, CORNELIUS, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
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LA JOLLA, CA 92037
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
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Effective as of 01-MAY-23

KARI, ELINA, MD

Provider ID: N/A

3855 HEALTH SCIENCES

C1. 网络提供者名单 专科护理医生

DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

KARI, ELINA, MD
Provider ID: N/A
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

KARI, ELINA, MD
Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

KARI, ELINA, MD†
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD
Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD
Provider ID: N/A
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD
Provider ID: N/A
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD
Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

NGUYEN, QUYEN, MD†
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

NGUYEN, QUYEN, MD
Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

NGUYEN, QUYEN, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

NGUYEN, QUYEN, MD
Provider ID: N/A
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

REUTHER, MARSHA, MD†
Provider ID: N/A
4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Effective as of 01-AUG-23

REUTHER, MARSHA, MD†
Provider ID: N/A
4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
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SCHALCH LEPE, PAUL, MD
Provider ID: N/A
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD
Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD†
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

C1. 网络提供者名单 专科护理医生

VAHABZADEH-HAGH, ANDREW, MD

Provider ID: N/A

📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

VAHABZADEH-HAGH, ANDREW, MD

Provider ID: N/A

📄 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

VAHABZADEH-HAGH, ANDREW, MD

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

VAHABZADEH-HAGH, ANDREW, MD†

Provider ID: N/A

📄 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

WATSON, DEBORAH, MD

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

WATSON, DEBORAH, MD

Provider ID: N/A

📄 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

WATSON, DEBORAH, MD

Provider ID: N/A

📄 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

WATSON, DEBORAH, MD†

Provider ID: N/A

📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD†

Provider ID: N/A

📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD

Provider ID: N/A

📄 9400 CAMPUS POINT DR
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Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD†

Provider ID: N/A

📄 3855 HEALTH SCIENCES
DR
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Effective as of 01-MAY-23

WOO, LINDA, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE 101
LA JOLLA, CA 92037
Effective as of 01-JAN-21

WOO, LINDA, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE 101
LA JOLLA, CA 92037

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YAN, CAROL, MD

Provider ID: N/A

📄 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

YAN, CAROL, MD†

Provider ID: N/A

📄 9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
Effective as of 01-MAY-23

YAN, CAROL, MD

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

YAN, CAROL, MD

Provider ID: N/A

📄 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

PATHOLOGY ANATOMIC CLINICAL

LIN, GRACE, MD†

Provider ID: N/A

📄 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-FEB-22

PEDIATRIC PULMONOLOGY

ANBAR, RAN, MD

Provider ID: N/A

📄 3252 HOLIDAY CT STE 113
LA JOLLA, CA 92037

C1. 网络提供者名单 专科护理医生

Effective as of 01-NOV-18

PEDIATRIC RADIOLOGY

DWEK, JERRY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-22

EVORA, DARRYL, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-22

KONING, JEFFREY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-22

PUGMIRE, BRIAN, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-OCT-21

PEDIATRICS

GROBMAN, LILLIAN, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-DEC-21

KOOROS, KOOROSH, MD†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037

Effective as of 01-FEB-22

PHYSICAL MEDICINE / REHABILITATION

MADHAV, SANDIP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

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PHYSICIANS ASSISTANT

ABDELWAHHAB, EANAS, PA

Provider ID: N/A

9850 GENESEE AVE STE
320
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Effective as of 01-JUN-23

ABRAHAMSEN, KELSEY, PA

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-JAN-21

AHN, JORDAN, PA

Provider ID: N/A

7855 IVANHOE AVE STE 110
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-24

ALBRIGHT, KELSEY, PA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-21

ALLERS, JENNA, PA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-23

ARMEEN, GARY, PA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

BAKER, LINDZEE, PA

Provider ID: N/A

9850 GENESEE AVE STE
320
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BECKER, JANTIMA, PA

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-DEC-21

CANDARE, VANESSA, PA

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9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-FEB-21

CASO, STEPHEN, PA

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

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DOUGHERTY, CLARA, PA†

Provider ID: N/A

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400
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FELLION, LAUREN, PA

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9850 GENESEE AVE STE
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C1. 网络提供者名单 专科护理医生

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FLORENCE, BRYNA, PA†

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FREY, LAUREN, PA

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9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
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HANSEN, CHRISTINA, PA

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210
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Effective as of 01-OCT-23

HIGGINS, JOSHUA, PA†

Provider ID: N/A
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-JAN-22

HIGGINS, JOSHUA, PA†

Provider ID: N/A
8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-JAN-22

HUNTER, JACOB, PA†

Provider ID: N/A
8910 VILLA LA JOLLA DR

STE 100
LA JOLLA, CA 92037
Effective as of 01-MAY-21

HUNTER, JACOB, PA†

Provider ID: N/A
9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
Effective as of 01-FEB-22

HUNTER, JACOB, PA

Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HUNTER, JACOB, PA

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HUNTER, JACOB, PA

Provider ID: N/A
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

KARPEN, SARAH, PA

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-24

KARPEN, SARAH, PA

Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-24

LEE, JENNIFER, PA

Provider ID: N/A
9300 CAMPUS POINT DR

LA JOLLA, CA 92037
Effective as of 01-SEP-24

LEE, JENNIFER, PA

Provider ID: N/A
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-SEP-24

LIU, SHARON, PA

Provider ID: N/A
9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-24

MALLES, CHRISTINA, PA

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-24

MARTIN, HALEY, PA

Provider ID: N/A
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-MAR-24

MARTIN, HALEY, PA

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAR-24

MARTIN, HALEY, PA

Provider ID: N/A
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAR-24

MATTIOLI, TAYLOR, PA

Provider ID: N/A
9850 GENESEE AVE STE

C1. 网络提供者名单 专科护理医生

320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-22

MEGALI, NICOLE, PA

Provider ID: N/A
9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Teleservice
Effective as of 01-APR-24

MOREO, HUNTER, PA

Provider ID: N/A
9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUL-24

OKADA, MICHELLE, PA†

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-21

OKADA, MICHELLE, PA†

Provider ID: N/A
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-APR-21

PAAMONI, ARIELLE, PA

Provider ID: N/A
9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-22

PELIO, DARREN, PA†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-22

PELIO, DARREN, PA†

Provider ID: N/A
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-SEP-22

PERREAULT, MARK, PA†

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

PERREAULT, MARK, PA†

Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-AUG-21

RAHIM, ARIANNA, PA

Provider ID: N/A
9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Effective as of 01-OCT-23

ROMO, JORGE, PA

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-24

SAIKHON, TALIA, PA†

Provider ID: N/A
8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
Effective as of 01-SEP-22

SAINT, MEAGHAN, PA

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-DEC-21

SAUNDERS, SARA, PA†

Provider ID: N/A
9898 GENESEE AVE FL 4
LA JOLLA, CA 92037
Effective as of 01-MAY-16

SHARAF, KAREEM, PA†

Provider ID: N/A
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21

SHARAF, KAREEM, PA†

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21

SHARAF, KAREEM, PA†

Provider ID: N/A
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-DEC-21

SNOWDEN, KELLY, PA

Provider ID: N/A
7855 IVANHOE AVE STE 110
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

SPEH, BRIAN, PA

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAR-24

SZABO, HAYLIE, PA

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

9850 GENESEE AVE STE
210
LA JOLLA, CA 92037

Teleservice

Effective as of 01-OCT-22

WAHLIN, TAMARA, PA

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-JUN-23

WAHLIN, TAMARA, PA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

WAHLIN, TAMARA, PA

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-JUN-23

WEIR, JACQUELINE, PA†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-APR-21

WRITER, NICOLE, PA

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037*

Effective as of 01-FEB-21

PODIATRIST

BERENTER, JAY, DPM†

Provider ID: N/A

9850 GENESEE AVE STE
510
LA JOLLA, CA 92037

Effective as of 01-JAN-21

BERENTER, JAY, DPM†

Provider ID: N/A

9850 GENESEE AVE STE
510
LA JOLLA, CA 92037

Effective as of 01-OCT-19

BERGER, COLBY, DPM

Provider ID: N/A

9850 GENESEE AVE STE
510
LA JOLLA, CA 92037

Effective as of 01-APR-23

BERGER, COLBY, DPM

Provider ID: N/A

9850 GENESEE AVE STE
510
LA JOLLA, CA 92037

Effective as of 01-JUN-23

KREPS, CHRISTOPHER, DPM†

Provider ID: N/A

9850 GENESEE AVE STE
510
LA JOLLA, CA 92037

Effective as of 01-MAR-22

KREPS, CHRISTOPHER, DPM†

Provider ID: N/A

9850 GENESEE AVE STE
510
LA JOLLA, CA 92037

Effective as of 01-SEP-21

PREVENTATIVE MEDICINE GENERAL

STERN, ANNA, MD

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

PSYCHIATRY

BRAR, SIMERJEET, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-21

BRAR, SIMERJEET, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-21

FINN, DAPHNA, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-SEP-21

FINN, DAPHNA, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-SEP-21

JOSHI, YASH, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-24

JOSHI, YASH, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-24

C1. 网络提供者名单 专科护理医生

KARANJIA, NAVAZ, MD†

Provider ID: N/A

📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-22

KARANJIA, NAVAZ, MD†

Provider ID: N/A

📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-22

LEDBETTER, ALEX, DO

Provider ID: N/A

📄 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-JAN-24

LEDBETTER, ALEX, DO

Provider ID: N/A

📄 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-JAN-24

LI, XIA, MD†

Provider ID: N/A

📄 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-AUG-21

LI, XIA, MD†

Provider ID: N/A

📄 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-AUG-21

LIU, FRED, MD†

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

LIU, FRED, MD†

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

MOORE, SHAVON, MD†

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

MOORE, SHAVON, MD†

Provider ID: N/A

📄 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-NOV-21

MOORE, SHAVON, MD†

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

MOORE, SHAVON, MD†

Provider ID: N/A

📄 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-NOV-21

NICHOLS, ALPHONSO, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUL-22

QAYOUMI, WALI, MD†

Provider ID: N/A

📄 9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037
Effective as of 01-OCT-21

QAYOUMI, WALI, MD†

Provider ID: N/A

📄 9500 GILMAN DR STE 2069
LA JOLLA, CA 92093
Effective as of 01-OCT-21

QAYOUMI, WALI, MD†

Provider ID: N/A

📄 9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037
Effective as of 01-OCT-21

QAYOUMI, WALI, MD†

Provider ID: N/A

📄 9500 GILMAN DR STE 2069
LA JOLLA, CA 92093

C1. 网络提供者名单 专科护理医生

Effective as of 01-OCT-21

REGO KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

REGO KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

REGO KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

REGO KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

SCHNEEBERGER, ANDRES, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-22

SCHNEEBERGER, ANDRES, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-22

TARVER, LESLIE, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-22

TARVER, LESLIE, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-22

PSYCHIATRY CHILD

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-23

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9834 GENESEE AVE STE
400
LA JOLLA, CA 92037

Effective as of 01-JUL-21

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9834 GENESEE AVE STE
400
LA JOLLA, CA 92037

Effective as of 01-JUL-21

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9834 GENESEE AVE STE
400
LA JOLLA, CA 92037

Effective as of 01-JUL-21

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9834 GENESEE AVE STE
400
LA JOLLA, CA 92037

Effective as of 01-JUL-21

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-23

NICHOLS, ALPHONSO, MD

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-22

C1. 网络提供者名单 专科护理医生

NICHOLS, ALPHONSO, MD

Provider ID: N/A

☞ 9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-22

REGO KEARNEY, JENNIFER, MD†

Provider ID: N/A

☞ 8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

REGO KEARNEY, JENNIFER, MD†

Provider ID: N/A

☞ 8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

REGO KEARNEY, JENNIFER, MD†

Provider ID: N/A

☞ 8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

REGO KEARNEY, JENNIFER, MD†

Provider ID: N/A

☞ 8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

PSYCHIATRY SLEEP MEDICINE

KARIPPOT, ANOOP, MD†

Provider ID: N/A

☞ 9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-23

PSYCHOLOGIST

BAILIS, JESSICA, PSYD

Provider ID: N/A

☞ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-JUN-23

BAILIS, JESSICA, PSYD

Provider ID: N/A

☞ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-JUN-23

BOUTELLE, KERRI, PhD

Provider ID: N/A

☞ 3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

BOUTELLE, KERRI, PhD

Provider ID: N/A

☞ 3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

CRANDAL, BRENT, PhD†

Provider ID: N/A

☞ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-22

CRANDAL, BRENT, PhD†

Provider ID: N/A

☞ 8950 VILLA LA JOLLA DR

STE C101

LA JOLLA, CA 92037

Effective as of 01-AUG-22

CUSACK, ANNE, PSYD

Provider ID: N/A

☞ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-DEC-23

CUSACK, ANNE, PSYD

Provider ID: N/A

☞ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-DEC-23

EICHEN, DAWN, PhD

Provider ID: N/A

☞ 3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

EICHEN, DAWN, PhD

Provider ID: N/A

☞ 3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

KAUP, ALLISON, PhD†

Provider ID: N/A

☞ 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

KAUP, ALLISON, PhD†

Provider ID: N/A

☞ 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-NOV-23

C1. 网络提供者名单 专科护理医生

KAUP, ALLISON, PhD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-NOV-23

KAUP, ALLISON, PhD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

MINASSIAN, ARPI, PhD†

Provider ID: N/A

☐ 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-NOV-21

MINASSIAN, ARPI, PhD†

Provider ID: N/A

☐ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

MINASSIAN, ARPI, PhD†

Provider ID: N/A

☐ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

MINASSIAN, ARPI, PhD†

Provider ID: N/A

☐ 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-NOV-21

PARK, JESSIE, PSYD†

Provider ID: N/A

☐ 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-DEC-21

PARK, JESSIE, PSYD†

Provider ID: N/A

☐ 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-DEC-21

PELHAM, WILLIAM, PSYD

Provider ID: N/A

☐ 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-JUL-24

PELHAM, WILLIAM, PSYD

Provider ID: N/A

☐ 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-JUL-24

REED, KRISTIE, PhD†

Provider ID: N/A

☐ 8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037

Effective as of 01-AUG-22

REED, KRISTIE, PhD

Provider ID: N/A

☐ 3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

REED, KRISTIE, PhD†

Provider ID: N/A

☐ 8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037

Effective as of 01-AUG-22

REED, KRISTIE, PhD

Provider ID: N/A

☐ 3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

TARLE, STEPHANIE, PhD

Provider ID: N/A

☐ 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-DEC-23

TARLE, STEPHANIE, PhD

Provider ID: N/A

☐ 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-DEC-23

THOMAS, KELSEY, PSYD

Provider ID: N/A

☐ 8950 VILLA LA JOLLA DR
STE 101

LA JOLLA, CA 92037

Effective as of 01-SEP-24

THOMAS, KELSEY, PSYD

Provider ID: N/A

☐ 8950 VILLA LA JOLLA DR
STE 101

LA JOLLA, CA 92037

Effective as of 01-SEP-24

PUBLIC HEALTH

PREVENTATIVE MEDICINE

PERLMAN, MONICA, MD

Provider ID: N/A

☐ 9850 GENESEE AVE STE
320

LA JOLLA, CA 92037

Effective as of 01-NOV-20

PULMONARY DISEASES

C1. 网络提供者名单 专科护理医生

BAILEY, JACOB, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

CORATE, LALAINÉ, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
780
LA JOLLA, CA 92037
Effective as of 01-JAN-21

CORATE, LALAINÉ, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-JUL-20

CORATE, LALAINÉ, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-JAN-21

FE, ALEXANDER, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-SEP-21

FE, ALEXANDER, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-FEB-23

FRICKS, CARL, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
370

LA JOLLA, CA 92037
Effective as of 01-JUL-20

FRICKS, CARL, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
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GLICKMAN, SAMUEL, MD†

Provider ID: N/A

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JONES, DANIEL, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
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MCCAUL, DAVID, MD†

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MCCAUL, DAVID, MD†

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MCGUIRE, WILLIAM, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
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MUNOZ PINEDA, JORGE, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
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PEARCE, ALEX, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
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RADWAN, MOHAMED, MD†

Provider ID: N/A

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370
LA JOLLA, CA 92037
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WILTCHIK, ERIN, MD

Provider ID: N/A

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WILTCHIK, ERIN, MD

Provider ID: N/A

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RADIATION ONCOLOGY

BEAR, JONATHAN, MD

Provider ID: N/A

📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
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BRUGGEMAN, ANDREW, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JAN-24

**HATTANGADI-GLUTH, JONA,
MD†**
Provider ID: N/A

3855 HEALTH SCIENCES
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HORN, ADAM, MD
Provider ID: N/A

3855 HEALTH SCIENCES
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MACEWAN, IAIN, MD†
Provider ID: N/A

3855 HEALTH SCIENCES
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TRINGALE, KATHRYN, MD
Provider ID: N/A

3960 HEALTH SCIENCES
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TRINGALE, KATHRYN, MD
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3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
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TYE, KAREN, MD
Provider ID: N/A

3855 HEALTH SCIENCES
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LA JOLLA, CA 92093
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YORK, JOHN, MD
Provider ID: N/A

9300 CAMPUS POINT DR
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RADIOLOGY DIAGNOSTIC

AGANOVIC, LEJLA, MD
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AMMIRATI, GIUSEPPE, MD†
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9834 GENESEE AVE STE 411
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BOLAR, DIVYA, MD
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9452 MEDICAL CENTER DR
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BOSWELL, GILBERT, MD
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9300 CAMPUS POINT DR
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BRANCH, CODY, MD†
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9300 CAMPUS POINT DR
LA JOLLA, CA 92037
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BROUHA, SHARON, MD
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9452 MEDICAL CENTER DR
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BUI, KEVIN, MD†
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9300 CAMPUS POINT DR
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CARSWELL, AIMEE, MD
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CHANG, JENNIFER, MD
Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
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CHENG, KAREN, MD
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CHENG, KAREN, MD†
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9300 CAMPUS POINT DR
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CHO, AARON, MD
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9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
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CHUNG, CHRISTINE, MD
Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
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DORROS, STEPHEN, MD

C1. 网络提供者名单

专科护理医生

Provider ID: N/A

9452 MEDICAL CENTER DR
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EAJAZI, ALIREZA, MD†

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EGHTEDARI, MOHAMMAD, MD

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9452 MEDICAL CENTER DR
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FARID, NIKDOKHT, MD

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9452 MEDICAL CENTER DR
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FAZELI, SOUDABEH, MD

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9300 CAMPUS POINT DR
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FEDERHART, JAY, MD

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LA JOLLA, CA 92037
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FLISZAR, EVELYNE, MD

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9452 MEDICAL CENTER DR
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FOWLER, KATHRYN, MD

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9452 MEDICAL CENTER DR
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GENTILI, AMILCARE, MD

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9452 MEDICAL CENTER DR
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HAHN, LEWIS, MD

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9452 MEDICAL CENTER DR
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HAHN, MICHAEL, MD

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9452 MEDICAL CENTER DR
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HANDWERKER, JASON, MD

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HAWLEY, DANIEL, MD

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HOROWITZ, MICHAEL, MD

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9452 MEDICAL CENTER DR
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HSIAO, ALBERT, MD

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9452 MEDICAL CENTER DR
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HUANG, BRADY, MD

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JACOBS, KATHLEEN, MD

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JAFFRAY, PAUL, MD

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KAROW, DAVID, MD

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KARUNAMUNI, JENNIFER, MD

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KIM, ERIC, MD†

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9300 CAMPUS POINT DR
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C1. 网络提供者名单

专科护理医生

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KLIGERMAN, SETH, MD

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KONDILI, DHIMITER, MD†

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9300 CAMPUS POINT DR
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LEE, ROLAND, MD

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9452 MEDICAL CENTER DR
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LIM, VIVIAN, MD

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MAREK BYKOWSKI, JULIE, MD

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MARKS, ROBERT, MD

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MCDONALD, MARIN, MD†

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MCDONALD, MARIN, MD

Provider ID: N/A

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MURPHY, PAUL, MD

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OBOYLE, MARY, MD

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OBOYLE, MARY, MD†

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9452 MEDICAL CENTER DR

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PATHRIA, MINI, MD

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RAKOW-PENNER, REBECCA, MD

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9452 MEDICAL CENTER DR
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RESNICK, DONALD, MD

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9452 MEDICAL CENTER DR
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RITCHIE, DAVID, MD

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SADAT, SAYED, DO

Provider ID: N/A

9300 CAMPUS POINT DR
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SAMPATH, SRIHARI, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

SAMPATH, SRINATH, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

C1. 网络提供者名单 专科护理医生

SANTILLAN, CYNTHIA, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
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Effective as of 01-APR-23

SEARLEMAN, ADAM, MD

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9300 CAMPUS POINT DR
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SLATER, JERRY, MD†

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9300 CAMPUS POINT DR
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Effective as of 01-AUG-21

SMITAMAN, EDWARD, MD

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9452 MEDICAL CENTER DR
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SPENGLER, NATHAN, MD

Provider ID: N/A

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Effective as of 01-DEC-23

STEINBERGER, AMANDA, DO

Provider ID: N/A

9850 GENESEE AVE STE
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Teleservice

Effective as of 01-OCT-23

STEINBERGER, AMANDA, DO

Provider ID: N/A

9850 GENESEE AVE STE
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Teleservice

Effective as of 01-JAN-24

STEPENOSKY, JAMES, DO

Provider ID: N/A

9300 CAMPUS POINT DR
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Effective as of 01-AUG-24

TAMAYO-MURILLO,

DORATHY, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

UNSDORFER, KYLE, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

VAHDAT, NOUSHIN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
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Effective as of 01-JUL-23

YORK, VINCENT, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-21

ZAPALA, MATTHEW, MD

Provider ID: N/A

9300 CAMPUS POINT DR
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Effective as of 01-JUL-24

REGISTERED DIETITIAN / NUTRITIONIST

CARLSON, STACY, RD

Provider ID: N/A

3855 HEALTH SCIENCES
DR

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Effective as of 01-AUG-24

SALCEDO, ALEXANDRA, RD

Provider ID: N/A

9350 CAMPUS POINT DR
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REGISTERED PHYSICAL THERAPIST

FERRER, MIRON, PT

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-24

GILLILAND, TYLER, PT

Provider ID: N/A

9400 CAMPUS POINT DR
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HOUSELY, ALEXIS, PT

Provider ID: N/A

9350 CAMPUS POINT DR
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SHARP, SIMPSON, PT

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9350 CAMPUS POINT DR
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TROYER, CORY, PT

Provider ID: N/A

9350 CAMPUS POINT DR
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RHEUMATOLOGY

C1. 网络提供者名单

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KIM, JANET, MD

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PATEL, PUJA, DO

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9350 CAMPUS POINT DR
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SPEECH PATHOLOGIST

BLUMENFELD, LIZA, SP

Provider ID: N/A

3855 HEALTH SCIENCES
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LA JOLLA, CA 92093
Effective as of 01-MAY-23

LINNEMEYER-RISSER, KRISTEN, SP

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3855 HEALTH SCIENCES
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LINNEMEYER-RISSER, KRISTEN, SP

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9350 CAMPUS POINT DR
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Effective as of 01-MAY-23

NEESE, SUSAN, SP

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9350 CAMPUS POINT DR
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SCHIEDERMAYER, BENJAMIN, SP†

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3855 HEALTH SCIENCES
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SCHIEDERMAYER, BENJAMIN, SP†

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9400 CAMPUS POINT DR
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THOMPSON, DANIELLE, SP

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SURGERY COLON SURGERY

BEIERMEISTER, KEITH, MD†

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BEIERMEISTER, KEITH, MD†

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LOPEZ, NICOLE, MD†

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3855 HEALTH SCIENCES
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Effective as of 01-DEC-21

PARRY, LISA, MD†

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3855 HEALTH SCIENCES
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RAMAMOORTHY, SONIA, MD†

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SCHULTZEL, MATTHEW, DO†

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WORSEY, MICHAEL, MD†

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WORSEY, MICHAEL, MD†

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SURGERY CRITICAL CARE

ADAMS, LAURA, MD†

C1. 网络提供者名单 专科护理医生

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9300 CAMPUS POINT DR
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VENTRO, GEORGE, MD†

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SURGERY GENERAL

ARMANI, AVA, MD†

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3855 HEALTH SCIENCES
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BHOYRUL, SUNIL, MD†

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BHOYRUL, SUNIL, MD†

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BORTZ, PASCAL, MD†

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LA JOLLA, CA 92037
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BORTZ, PASCAL, MD†

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BURGESS, DANIEL, DO†

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4150 REGENTS PARK ROW
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BURGESS, DANIEL, DO†

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4150 REGENTS PARK ROW
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HORGAN, SANTIAGO, MD

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MORELL, MICHAEL, MD

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Effective as of 01-DEC-23

MORELL, MICHAEL, MD

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9850 GENESEE AVE STE
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Effective as of 01-MAR-24

MORELL, MICHAEL, MD

Provider ID: N/A

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OLSON, CHERYL, MD†

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OLSON, CHERYL, MD†

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OLSON, CHERYL, MD†

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SHAPER, EMANUEL, MD

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SHAPER, EMANUEL, MD

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SHERMAN, MARK, MD
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📍 9850 GENESEE AVE STE
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ZUBER, SAMUEL, MD
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📍 9850 GENESEE AVE STE
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SURGERY GENERAL VASCULAR

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LUCAS, SARAH, MD
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SURGERY HAND

BROWN, RICHARD, MD†
Provider ID: N/A

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210
LA JOLLA, CA 92037
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DOWNING, KRISTOPHER, MD†
Provider ID: N/A

📍 9834 GENESEE AVE STE
228
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SURGERY HAND ORTHOPEDIC

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STEPHENSON, SAMUEL, MD†
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Effective as of 01-OCT-21

SURGERY NEUROLOGICAL

HATEFI, DUSTIN, MD
Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-24

MURTHY, NIKHIL, MD
Provider ID: N/A

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-JUL-23

MURTHY, NIKHIL, MD
Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

OSTRUP, RICHARD, MD†
Provider ID: N/A

📍 9850 GENESEE AVE STE
770
LA JOLLA, CA 92037
Effective as of 01-JAN-13

YOO, FRANK, MD
Provider ID: N/A

📍 4150 REGENTS PARK ROW
STE 325
LA JOLLA, CA 92037
Effective as of 01-JUN-24

SURGERY ORTHOPEDIC

ANDRY, JAMES, MD
Provider ID: N/A

📍 9834 GENESEE AVE STE
228
LA JOLLA, CA 92037
Effective as of 01-MAR-24

ANDRY, JAMES, MD
Provider ID: N/A

📍 9834 GENESEE AVE STE
228
LA JOLLA, CA 92037*
Effective as of 01-MAR-24

BLAIS, MICAH, MD
Provider ID: N/A

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUL-23

BUKATA, SUSAN, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAR-21

CHOI, JIHOON, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

CHOI, JIHOON, MD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-21

DOWNING, KRISTOPHER, MD†

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037*
Effective as of 01-MAR-24

DOWNING, KRISTOPHER, MD†

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037
Effective as of 01-MAR-24

GOEB, YANNICK, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

GOEB, YANNICK, MD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-21

HACKLEY, DAVID, MD†

Provider ID: N/A

9850 GENESEE AVE STE
210
LA JOLLA, CA 92037
Effective as of 01-JAN-21

KANE, NORMAN, MD

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037
Teleservice
Effective as of 01-APR-24

KUSNEZOV, NICHOLAS, MD

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037
Teleservice
Effective as of 01-APR-24

MARSHALL, STUART, MD

Provider ID: N/A

7301 GIRARD AVE STE 300
LA JOLLA, CA 92037
Effective as of 01-NOV-18

MCKNIGHT, BRADEN, MD

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037
Teleservice
Effective as of 01-APR-24

MOHLENBROCK, WILLIAM, MD

Provider ID: N/A

9850 GENESEE AVE STE
210
LA JOLLA, CA 92037
Effective as of 01-JAN-21

PALLIA, CHRISTOPHER, MD

Provider ID: N/A

9834 GENESEE AVE STE

228

LA JOLLA, CA 92037

Teleservice

Effective as of 01-APR-24

PALLIA, CHRISTOPHER, MD

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037*
Teleservice
Effective as of 01-MAR-24

SIROTA, MICHAEL, MD

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037
Effective as of 01-AUG-24

SWENSON, FRANK, MD†

Provider ID: N/A

9850 GENESEE AVE STE
210
LA JOLLA, CA 92037
Effective as of 01-JAN-21

THUNDER, RICHARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
210
LA JOLLA, CA 92037
Effective as of 01-JAN-21

WHEATLEY, BENJAMIN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SURGERY PLASTIC

GOSMAN, AMANDA, MD†

Provider ID: N/A

9300 CAMPUS POINT DR

C1. 网络提供者名单 专科护理医生

LA JOLLA, CA 92037
Effective as of 01-NOV-21

MOFID, MEHRDAD, MD†

Provider ID: N/A

📍 4150 REGENTS PARK ROW
STE 300

LA JOLLA, CA 92037
Effective as of 01-JAN-21

MOFID, MEHRDAD, MD†

Provider ID: N/A

📍 4150 REGENTS PARK ROW
STE 300

LA JOLLA, CA 92037
Effective as of 01-SEP-15

MOFID, MEHRDAD, MD†

Provider ID: N/A

📍 4150 REGENTS PARK ROW
STE 300

LA JOLLA, CA 92037
Effective as of 01-MAR-16

MOFID, MEHRDAD, MD†

Provider ID: N/A

📍 4150 REGENTS PARK ROW
STE 300

LA JOLLA, CA 92037
Effective as of 01-JUL-21

MOFID, MEHRDAD, MD†

Provider ID: N/A

📍 4150 REGENTS PARK ROW
STE 300

LA JOLLA, CA 92037*
Effective as of 01-JUL-22

UMANSKY, JEFFREY, MD†

Provider ID: N/A

📍 4150 REGENTS PARK ROW
STE 260

LA JOLLA, CA 92037*
Effective as of 01-JAN-14

SURGERY THORACIC

BARADARIAN, SAM, MD†

Provider ID: N/A

📍 9898 GENESEE AVE
LA JOLLA, CA 92037

Effective as of 01-NOV-17

BARADARIAN, SAM, MD

Provider ID: N/A

📍 9898 GENESEE AVE FL 3
LA JOLLA, CA 92037

Effective as of 01-JAN-24

HUDSON, JESSICA, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

HUDSON, JESSICA, MD

Provider ID: N/A

📍 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093
Effective as of 01-DEC-23

HUDSON, JESSICA, MD

Provider ID: N/A

📍 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

MOASIS, GHASSAN, MD†

Provider ID: N/A

📍 9898 GENESEE AVE
LA JOLLA, CA 92037

Effective as of 01-MAY-17

TYNER, JOHN, MD†

Provider ID: N/A

📍 10666 N TORREY PINES RD
STE 209

LA JOLLA, CA 92037
Effective as of 01-SEP-20

TYNER, JOHN, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
560

LA JOLLA, CA 92037
Effective as of 01-SEP-15

WANG, WILLIAM, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
560

LA JOLLA, CA 92037
Effective as of 01-SEP-15

ZANDER, ASHLEY, DO†

Provider ID: N/A

📍 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

ZANDER, ASHLEY, DO†

Provider ID: N/A

📍 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093
Effective as of 01-AUG-22

ZANDER, ASHLEY, DO†

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

SURGICAL ONCOLOGY

MEHTSUN, WINTA, MD†

Provider ID: N/A

📍 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093
Effective as of 01-JAN-22

UROLOGY

ANGER, JENNIFER, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-OCT-21

BAGRODIA, ADITYA, MD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-DEC-21

BASTUBA, MARTIN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
630
LA JOLLA, CA 92037
Effective as of 01-JAN-21

COHEN, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-21

COHEN, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-21

COHEN, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-SEP-21

COHEN, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JUL-22

COHEN, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-OCT-12

DATO, PAUL, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-24

DICKS, BRIAN, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-FEB-24

JUMA, SAAD, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-24

KATZ, JONATHAN, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUN-23

KEILLER, DANNY, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-FEB-24

NAITOH, JOHN, MD†

Provider ID: N/A

9850 GENESEE AVE STE

440

LA JOLLA, CA 92037
Effective as of 01-JAN-21

NAITOH, JOHN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-21

NAITOH, JOHN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-SEP-22

NAITOH, JOHN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JUL-22

NAITOH, JOHN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-NOV-98

NAITOH, JOHN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-NOV-21

NEUSTEIN, PAUL, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-24

C1. 网络提供者名单 专科护理医生

NGUYEN, HUNG, MD[†]

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Teleservice

Effective as of 01-SEP-19

NGUYEN, HUNG, MD[†]

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Teleservice

Effective as of 01-SEP-21

NGUYEN, HUNG, MD[†]

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

NGUYEN, HUNG, MD[†]

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

PE, MARK-RALLY, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Effective as of 01-FEB-24

ROBERTS, JAMES, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Effective as of 01-FEB-24

SHEETZ, TYLER, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-23

SIMON, SCOTT, MD

Provider ID: N/A

9834 GENESEE AVE STE
224
LA JOLLA, CA 92037

Effective as of 01-JUN-23

VAPNEK, EVAN, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Effective as of 01-JAN-24

WANG, LUKE, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-JUN-23

ANESTHESIOLOGY

CHIEN, SHELBY, MD[†]

Provider ID: N/A

5360 JACKSON DR STE 100
LA MESA, CA 91942

Effective as of 01-JAN-21

VERDOLIN, MICHAEL, MD

Provider ID: N/A

7051 ALVARADO RD STE 101
LA MESA, CA 91942

Effective as of 01-JAN-23

VERDOLIN, MICHAEL, MD

Provider ID: N/A

7051 ALVARADO RD STE 101
LA MESA, CA 91942

Effective as of 01-FEB-16

VERDOLIN, MICHAEL, MD

Provider ID: N/A

7051 ALVARADO RD STE 101
LA MESA, CA 91942

Effective as of 01-JAN-21

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY, MD

Provider ID: N/A

5360 JACKSON DR STE 100
LA MESA, CA 91942

Effective as of 01-APR-24

COHEN, ZACHARY, MD

Provider ID: N/A

5360 JACKSON DR STE 100
LA MESA, CA 91942

Effective as of 01-FEB-24

LEE, INSUN, MD[†]

Provider ID: N/A

5360 JACKSON DR STE 100
LA MESA, CA 91942

Teleservice

Effective as of 01-APR-24

VERDOLIN, MICHAEL, MD

Provider ID: N/A

7051 ALVARADO RD STE 101
LA MESA, CA 91942

Effective as of 01-MAR-22

AUDIOLOGIST

C1. 网络提供者名单

专科护理医生

SHASKY, GARY, AuD

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 463
LA MESA, CA 91942
Effective as of 01-FEB-24

SHASKY, GARY, AuD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 153
LA MESA, CA 91942
Effective as of 01-JAN-21

CARDIAC ELECTROPHYSIOLOGY

DAWOOD, FARAH, MD†

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-DEC-20

CARDIOVASCULAR DISEASE

AZIMI, NASSIR, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3 STE 444
LA MESA, CA 91942
Effective as of 01-JAN-21

AZIMI, NASSIR, MD

Provider ID: N/A

8911 LA MESA BLVD STE 101
LA MESA, CA 91942
Effective as of 01-JUN-24

BELOTT, PETER, MD†

Provider ID: N/A

8851 CENTER DR STE 305
LA MESA, CA 91942
Effective as of 01-APR-17

DAWOOD, FARAH, MD†

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-AUG-21

FERNANDEZ, GENARO, MD†

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-AUG-21

KIM, JAMES, MD

Provider ID: N/A

5358 JACKSON DR STE 1
LA MESA, CA 91942
Teleservice
Effective as of 01-AUG-23

KIM, JAMES, MD

Provider ID: N/A

5358 JACKSON DR STE 1
LA MESA, CA 91942
Teleservice
Effective as of 01-JUN-23

KOTHA, PURUSHOTHAM, MD†

Provider ID: N/A

8860 CENTER DR STE 400
LA MESA, CA 91942
Effective as of 01-JAN-21

MEHRANPOUR, PAYAM, MD†

Provider ID: N/A

8851 CENTER DR STE 405
LA MESA, CA 91942
Teleservice
Effective as of 01-JAN-21

SHEREV, DIMITRI, MD

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-APR-23

CERTIFIED NURSE PRACTITIONER

DWYER, ERIN, NP

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

MCCALLION, DANIELLE, NP

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-AUG-23

MCCALLION, DANIELLE, NP

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-AUG-23

TOMICICH, STEPHANIE, NP

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE, MA†

Provider ID: N/A

5565 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-SEP-22

HEMATOLOGY / ONCOLOGY

BATRA, REEMA, MD†

Provider ID: N/A

5555 GROSSMONT

C1. 网络提供者名单 专科护理医生

CENTER DR
LA MESA, CA 91942*
Effective as of 01-JAN-14

BATRA, REEMA, MD†

Provider ID: N/A
☑ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-21

BODKIN, DAVID, MD†

Provider ID: N/A
☑ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-21

MEDIC, IGOR, MD†

Provider ID: N/A
☑ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-21

MEDIC, IGOR, MD†

Provider ID: N/A
☑ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942*
Effective as of 01-FEB-18

ZU, KAI, MD†

Provider ID: N/A
☑ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942*
Teleservice
Effective as of 01-JAN-14

ZU, KAI, MD†

Provider ID: N/A
☑ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Teleservice
Effective as of 01-JAN-21

INFECTIOUS DISEASE

HADDAD, FADI, MD

Provider ID: N/A
☑ 8860 CENTER DR STE 320
LA MESA, CA 91942
Effective as of 01-JUN-23

INTERNAL MEDICINE

FADDA, GEORGE, MD†

Provider ID: N/A
☑ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-NOV-23

FARAVARDEH, ARMAN, MD†

Provider ID: N/A
☑ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-SEP-14

FERNANDEZ, GENARO, MD†

Provider ID: N/A
☑ 8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-SEP-22

KOTHA, ROSHAN, MD†

Provider ID: N/A
☑ 8860 CENTER DR STE 400
LA MESA, CA 91942
Effective as of 01-SEP-15

LEININGER, DANIEL, DO†

Provider ID: N/A
☑ 8851 CENTER DR STE 505
LA MESA, CA 91942
Teleservice
Effective as of 01-NOV-22

LIU, ANDREW, MD

Provider ID: N/A
☑ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-SEP-23

MOOLANI, UJJALA, MD

Provider ID: N/A
☑ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-MAY-23

POKALA, SATHYA, MD†

Provider ID: N/A
☑ 8860 CENTER DR STE 240
LA MESA, CA 91942
Effective as of 01-JAN-14

REDDY, REDDIWANDLA, MD†

Provider ID: N/A
☑ 5565 GROSSMONT
CENTER DR STE 202
LA MESA, CA 91942
Teleservice
Effective as of 01-JAN-21

INTERVENTIONAL CARDIOLOGY

FERNANDEZ, GENARO, MD†

Provider ID: N/A
☑ 8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-DEC-20

MEHRANPOUR, PAYAM, MD†

Provider ID: N/A
☑ 8851 CENTER DR STE 405
LA MESA, CA 91942
Teleservice
Effective as of 01-JAN-19

NAGHI, JESSE, MD†

Provider ID: N/A
☑ 8851 CENTER DR STE 304

C1. 网络提供者名单 专科护理医生

LA MESA, CA 91942
Effective as of 01-JUL-22

NAGHI, JESSE, MD†

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-JAN-24

NGUYEN, BRYANT, MD†

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-JAN-21

REDDY, REDDIWANDLA, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 202
LA MESA, CA 91942

Teleservice

Effective as of 01-SEP-22

TAGHIZADEH, BEHZAD, MD†

Provider ID: N/A

8851 CENTER DR STE 405
LA MESA, CA 91942
Effective as of 01-SEP-22

TAGHIZADEH, BEHZAD, MD†

Provider ID: N/A

8851 CENTER DR STE 405
LA MESA, CA 91942
Effective as of 01-SEP-22

YELLEN, LAURENCE, MD†

Provider ID: N/A

8851 CENTER DR STE 405
LA MESA, CA 91942
Effective as of 01-SEP-22

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-MAY-23

DO, LUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-14

DO, LUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JUL-22

DO, LUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-SEP-20

DO, LUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

DO, LUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

FADDA, GEORGE, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

FADDA, GEORGE, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-AUG-16

FADDA, GEORGE, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-AUG-16

FADDA, GEORGE, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JUL-22

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-AUG-14

LEININGER, DANIEL, DO†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Teleservice

Effective as of 01-AUG-22

LEININGER, DANIEL, DO†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Teleservice

Effective as of 01-SEP-22

LEININGER, DANIEL, DO†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Teleservice

Effective as of 01-OCT-22

LEININGER, DANIEL, DO†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Teleservice

C1. 网络提供者名单 专科护理医生

Effective as of 01-SEP-22

MILLER, LUCY, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-SEP-20

MILLER, LUCY, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JUL-22

MILLER, LUCY, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-APR-15

MILLER, LUCY, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JAN-21

MILLER, LUCY, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JAN-21

SAEED, ODAY, MD

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-MAR-24

SAEED, ODAY, MD

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-MAY-24

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JAN-21

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-MAY-15

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JUL-22

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JAN-21

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JAN-21

NEUROLOGY

MOHAMMAD, AHMADSHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942

Effective as of 01-SEP-22

MOHAMMAD, AHMADSHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942

Effective as of 01-JAN-21

MOHAMMAD, AHMADSHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942*

Effective as of 01-JAN-21

MOHAMMAD, AHMADSHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942

Effective as of 01-JAN-21

MOHAMMAD, AHMADSHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942

Effective as of 01-JAN-14

OBSTETRICS / GYNECOLOGY

PAPA, RHETT, DO†

Provider ID: N/A

8851 CENTER DR STE 210
LA MESA, CA 91942

Effective as of 01-APR-21

OCCUPATIONAL THERAPIST

BERNALES-MENDEZ, DEZARINA, OT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942

Effective as of 01-JAN-23

BERNALES-MENDEZ, DEZARINA, OT

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-AUG-23

BERNALES-MENDEZ, DEZARINA, OT

Provider ID: N/A

4700 SPRING ST STE 180
LA MESA, CA 91942
Effective as of 01-NOV-23

PORTER, EILEEN, OT

Provider ID: N/A

4700 SPRING ST STE 180
LA MESA, CA 91942
Effective as of 01-NOV-23

PORTER, EILEEN, OT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-JAN-22

PORTER, EILEEN, OT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-AUG-23

SHIH, LYNN, OT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-DEC-23

SHIH, LYNN, OT

Provider ID: N/A

4700 SPRING ST STE 180
LA MESA, CA 91942
Effective as of 01-DEC-23

OPHTHALMOLOGY

BARNARD, LUKE, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-SEP-24

BINDER, NICHOLAS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3 BLDG 2
LA MESA, CA 91942
Effective as of 01-APR-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3 BLDG 2
LA MESA, CA 91942
Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3 BLDG 2
LA MESA, CA 91942
Effective as of 01-NOV-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-DEC-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

CARRABY, ARNETT, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

CARRABY, ARNETT, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-JUL-22

CHIU, STEPHAN, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-JUN-23

CHIU, STEPHAN, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-MAY-22

CHIU, STEPHAN, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-FEB-23

COCKERHAM, KIMBERLY, MD

Provider ID: N/A

5525 GROSSMONT
CENTER DR STE 602
LA MESA, CA 91942
Effective as of 01-MAY-24

DELENGOCKY, TAYSON, DO†

Provider ID: N/A

8851 CENTER DR STE 406

C1. 网络提供者名单 专科护理医生

LA MESA, CA 91942
Effective as of 01-SEP-22

DELENGOCKY, TAYSON, DO†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942

Effective as of 01-JUL-22

FISH, STEVEN, MD

Provider ID: N/A

7339 EL CAJON BLVD STE
J-K
LA MESA, CA 91942

Effective as of 01-APR-23

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-APR-23

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-SEP-22

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3 BLDG 2
LA MESA, CA 91942

Effective as of 01-SEP-22

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-SEP-22

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-JUN-23

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-JAN-21

HAIGHT, BRUCE, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
551
LA MESA, CA 91942

Effective as of 01-JAN-21

HAIGHT, BRUCE, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
551
LA MESA, CA 91942

Effective as of 01-JAN-22

HAIGHT, BRUCE, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
551
LA MESA, CA 91942

Effective as of 01-SEP-22

HAIGHT, BRUCE, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 2-3
LA MESA, CA 91942

Effective as of 01-SEP-22

HAIGHT, BRUCE, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

HAIGHT, BRUCE, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-SEP-22

HSU, CHRISTOPHER, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-APR-22

HSU, CHRISTOPHER, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

HSU, CHRISTOPHER, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-MAY-22

HUDSON, HENRY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551

C1. 网络提供者名单 专科护理医生

LA MESA, CA 91942
Effective as of 01-MAY-21

HUDSON, HENRY, MD†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-MAY-24

HUDSON, HENRY, MD†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-SEP-22

HUDSON, HENRY, MD†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-APR-23

HUDSON, HENRY, MD†

Provider ID: N/A

☒ 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-23

HUDSON, HENRY, MD†

Provider ID: N/A

☒ 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

HUDSON, HENRY, MD†

Provider ID: N/A

☒ 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-APR-23

HUDSON, HENRY, MD†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-MAR-23

KATZMAN, BARRY, MD†

Provider ID: N/A

☒ 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

KATZMAN, BARRY, MD†

Provider ID: N/A

☒ 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-APR-22

MANI, MAJID, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

MANI, MAJID, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-JUL-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR BLDG 2 STE 3
LA MESA, CA 91942
Effective as of 01-JAN-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

☒ 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

☒ 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-APR-23

MCGRAW, JOSEPH, MD†

Provider ID: N/A

☒ 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

MORRISON-REYES, JOSHUA, MD

Provider ID: N/A

☒ 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-FEB-24

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR STE 551 BLDG
3
LA MESA, CA 91942
Effective as of 01-SEP-22

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR BLDG 2 STE 3

C1. 网络提供者名单 专科护理医生

LA MESA, CA 91942
Effective as of 01-APR-22

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📍 5565 GROSSMONT
CENTER DR STE 551 BLDG
3
LA MESA, CA 91942
Effective as of 01-MAR-23

NAJAFI, DAVID, MD

Provider ID: N/A

📍 8262 UNIVERSITY AVE
LA MESA, CA 91942
Effective as of 01-JAN-23

PAPASTERGIOU, GEORGIOS, MD†

Provider ID: N/A

📍 8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-JAN-21

PAPASTERGIOU, GEORGIOS, MD†

Provider ID: N/A

📍 8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-AUG-20

PAPASTERGIOU, GEORGIOS, MD†

Provider ID: N/A

📍 8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

PATEL, GITANE, MD†

Provider ID: N/A

📍 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-SEP-22

PATEL, SARJAN, MD†

Provider ID: N/A

📍 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-SEP-22

PATEL, GITANE, MD†

Provider ID: N/A

📍 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-DEC-23

PATEL, SARJAN, MD†

Provider ID: N/A

📍 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-DEC-23

PATEL, GITANE, MD†

Provider ID: N/A

📍 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

PATEL, SARJAN, MD†

Provider ID: N/A

📍 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

PEAIRS, JAMES, MD†

Provider ID: N/A

📍 8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

PEAIRS, JAMES, MD†

Provider ID: N/A

📍 8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-AUG-20

PERRY, ARTHUR, MD

Provider ID: N/A

📍 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-APR-22

PERRY, ARTHUR, MD

Provider ID: N/A

📍 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-APR-23

PRABHU, SUJATA, MD†

Provider ID: N/A

📍 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-DEC-23

PRABHU, SUJATA, MD†

Provider ID: N/A

📍 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

PRABHU, SUJATA, MD†

Provider ID: N/A

📍 5565 GROSSMONT
CENTER DR STE 3 BLDG 2
LA MESA, CA 91942
Effective as of 01-APR-22

PRABHU, SUJATA, MD†

Provider ID: N/A

📍 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-SEP-22

C1. 网络提供者名单

专科护理医生

PRABHU, SUJATA, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
551
LA MESA, CA 91942
Effective as of 01-DEC-20

PRATT, STEVEN, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

RAJSBAUM, MARTIN, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-JUL-22

SAMUEL, MICHAEL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-MAR-21

SAMUEL, MICHAEL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-FEB-21

SASSANI, PATRICK, MD

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-FEB-24

SCHER, BARRY, MD†

Provider ID: N/A

8851 CENTER DR STE 406

LA MESA, CA 91942
Effective as of 01-SEP-22

SKAF, AYHAM, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

SKAF, AYHAM, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-JAN-21

SKAF, AYHAM, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-AUG-20

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3
LA MESA, CA 91942
Effective as of 01-JAN-21

OPTOMETRIST

AOTO, KIM, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

AOTO, KIM, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-SEP-22

DEAN, MOENA, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-JAN-24

DEAN, MOENA, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

DYER, SHARON, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

DYER, SHARON, OD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-SEP-22

HAN, SUL, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE
J/K

C1. 网络提供者名单 专科护理医生

LA MESA, CA 91942
Effective as of 01-DEC-22

KHALIL, VADY, OD†

Provider ID: N/A

 7339 EL CAJON BLVD STE J-K

LA MESA, CA 91942
Effective as of 01-NOV-22

KHALIL, VADY, OD†

Provider ID: N/A

 7339 EL CAJON BLVD STE J-K

LA MESA, CA 91942
Effective as of 01-NOV-22

MARR, RYAN, OD


Provider ID: N/A

 7339 EL CAJON BLVD STE JK

LA MESA, CA 91942
Effective as of 01-JUL-24

MARR, RYAN, OD

Provider ID: N/A

 5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-JUL-24

TONNU, ANH, OD†


Provider ID: N/A

 7339 EL CAJON BLVD STE J AND K

LA MESA, CA 91942
Effective as of 01-MAR-22

TONNU, ANH, OD


Provider ID: N/A

 5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-AUG-24

VINH, JOHN, OD†


Provider ID: N/A

 5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-SEP-20

VINH, JOHN, OD†


Provider ID: N/A

 7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

VINH, JOHN, OD†


Provider ID: N/A

 5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-JAN-21

ZVANUT, DONALD, OD†


Provider ID: N/A

 7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

ZVANUT, DONALD, OD†

Provider ID: N/A

 7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942

Effective as of 01-AUG-22

ZVANUT, DONALD, OD

Provider ID: N/A


 5565 GROSSMONT CENTER DR BLDG 3 STE 551

LA MESA, CA 91942
Effective as of 01-AUG-24

OTOLARYNGOLOGY

BUSINO, ROWLEY, MD†


Provider ID: N/A

 5565 GROSSMONT CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-JAN-21

BUSINO, ROWLEY, MD†


Provider ID: N/A

 5565 GROSSMONT CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-JAN-21

BUSINO, ROWLEY, MD†


Provider ID: N/A

 5565 GROSSMONT CENTER DR STE 101
LA MESA, CA 91942

Effective as of 01-JAN-21

BUSINO, ROWLEY, MD†


Provider ID: N/A

 5565 GROSSMONT CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-DEC-15

BUSINO, ROWLEY, MD†


Provider ID: N/A

 5565 GROSSMONT CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-APR-21

BUSINO, ROWLEY, MD†

Provider ID: N/A

 5565 GROSSMONT CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-SEP-22

BUSINO, ROWLEY, MD†

Provider ID: N/A

 5565 GROSSMONT

C1. 网络提供者名单 专科护理医生

CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-JUL-22

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-JUL-22

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-NOV-22

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-SEP-22

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-APR-21

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-DEC-15

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-JAN-21

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-JAN-21

MOSHTAGHI, OMID, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-24

MOSHTAGHI, OMID, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Teleservice
Effective as of 01-JUL-24

MOSHTAGHI, OMID, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Teleservice
Effective as of 01-JUL-24

MOSHTAGHI, OMID, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Teleservice
Effective as of 01-OCT-23

PATSIAS, ALEXIS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942
Effective as of 01-JUN-24

PATSIAS, ALEXIS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942
Effective as of 01-MAY-21

PATSIAS, ALEXIS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942
Effective as of 01-JAN-21

PATSIAS, ALEXIS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942
Effective as of 01-JUN-20

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Teleservice
Effective as of 01-JAN-21

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Teleservice
Effective as of 01-JAN-21

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Teleservice
Effective as of 01-JAN-21

C1. 网络提供者名单 专科护理医生

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-AUG-16

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-APR-21

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-NOV-22

SAEZ, NEIL, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3
LA MESA, CA 91942

Effective as of 01-NOV-23

SAEZ, NEIL, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-JUL-24

SAEZ, NEIL, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-JUL-24

SAEZ, NEIL, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JAN-24

SAEZ, NEIL, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-FEB-24

SAID, MENA, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3-101
LA MESA, CA 91942

Effective as of 01-JUL-24

SAID, MENA, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3-154
LA MESA, CA 91942

Effective as of 01-JUL-24

SAID, MENA, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-JUL-24

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-JUL-22

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3
LA MESA, CA 91942

Effective as of 01-MAY-21

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-OCT-22

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3
LA MESA, CA 91942

Effective as of 01-JAN-21

SKELTON, SEAN, DO†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-APR-21

SKELTON, SEAN, DO†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-SEP-22

SKELTON, SEAN, DO†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-MAY-21

PEDIATRICS

C1. 网络提供者名单 专科护理医生

SHAHBAZ, MAJID, MD

Provider ID: N/A

8851 CENTER DR STE 408
LA MESA, CA 91942

Teleservice

Effective as of 01-MAR-18

PHYS MED/ REHAB PAIN MEDICINE

KATZEN, SETH, DO

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-MAY-23

PHYSICAL MEDICINE / REHABILITATION

KATZEN, SETH, DO

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-NOV-22

PHYSICIANS ASSISTANT

FERRARA, SAMANTHA, PA

Provider ID: N/A

7339 EL CAJON BLVD STE 1
LA MESA, CA 91942

Teleservice

Effective as of 01-JUL-23

GUTH, CARA, PA

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-24

HINKLE, CORINNE, PA

Provider ID: N/A

7339 EL CAJON BLVD STE 1

LA MESA, CA 91942

Teleservice

Effective as of 01-MAR-24

KHALEGHI, MANI, PA†

Provider ID: N/A

5360 JACKSON DR STE 100
LA MESA, CA 91942

Effective as of 01-JAN-21

MOORMAN, KRISTA, PA

Provider ID: N/A

7339 EL CAJON BLVD STE 1
LA MESA, CA 91942

Effective as of 01-MAY-22

PYLE, ALEXANDRA, PA

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-24

SMITH, KRISTIN, PA†

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JAN-21

TAYLOR, RYAN, PA

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-24

WHITE, KYLE, PA

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-NOV-23

WHITE, KYLE, PA

Provider ID: N/A

5565 GROSSMONT

CENTER DR BLDG 3 STE 101

LA MESA, CA 91942

Effective as of 01-MAY-23

WHITE, KYLE, PA

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3
LA MESA, CA 91942

Teleservice

Effective as of 01-MAR-23

PODIATRIST

CAINE, SAMUEL, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-JUL-24

CAINE, SAMUEL, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942

Teleservice

Effective as of 01-DEC-23

CAINE, SAMUEL, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942

Teleservice

Effective as of 01-DEC-23

CAINE, SAMUEL, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942

C1. 网络提供者名单 专科护理医生

Teleservice

Effective as of 01-APR-24

COLLINS, MICHAEL, DPM†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-21

COLLINS, MICHAEL, DPM†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-AUG-23

COX, KEVIN, DPM

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942

Effective as of 01-JUN-24

KRIGER, STEPHEN, DPM†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Teleservice

Effective as of 01-JAN-22

NGUYEN, HAN, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-DEC-23

NGUYEN, HAN, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-JUN-23

NGUYEN, HAN, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-JUL-23

NGUYEN, HAN, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-JAN-24

NGUYEN, HAN, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-SEP-24

TSAI, GRACE, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942

Effective as of 01-SEP-23

TSAI, GRACE, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942

Effective as of 01-APR-23

TSAI, GRACE, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942

Effective as of 01-FEB-23

TSAI, GRACE, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510

LA MESA, CA 91942

Effective as of 01-AUG-24

XU, DIXON, DPM†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-AUG-24

XU, DIXON, DPM†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-SEP-22

XU, DIXON, DPM†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-MAR-24

PSYCHIATRY

MILLER, BRIAN, MD

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JUL-23

MILLER, BRIAN, MD

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JUL-23

PULMONARY DISEASES

AL-NASER, RAED, MD

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

☒ 5525 GROSSMONT
CENTER DR STE 609
LA MESA, CA 91942
Effective as of 01-AUG-23

POKALA, SATHYA, MD

Provider ID: N/A
☒ 8851 CENTER DR STE 304
LA MESA, CA 91942
Teleservice
Effective as of 01-JUN-24

RADIATION ONCOLOGY

BRUGGEMAN, ANDREW, MD

Provider ID: N/A
☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-24

CARMONA, RUBEN, MD

Provider ID: N/A
☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-24

COLEMAN, LORI, MD†

Provider ID: N/A
☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-21

JABBARI, SIAVASH, MD†

Provider ID: N/A
☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-OCT-22

PEJAVAR, SUNANDA, MD†

Provider ID: N/A

☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-21

VOLPP, PAUL, MD†

Provider ID: N/A
☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-21

RADIOLOGY DIAGNOSTIC

MOORE, BRIAN, MD†

Provider ID: N/A
☒ 8860 CENTER DR STE 100
LA MESA, CA 91942
Effective as of 01-JAN-21

VENKATESH, VIJAY, MD†

Provider ID: N/A
☒ 8860 CENTER DR STE 100
LA MESA, CA 91942
Effective as of 01-SEP-22

REGISTERED PHYSICAL THERAPIST

ALLOS, ALEXANDER, PT

Provider ID: N/A
☒ 8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-NOV-23

CONCHA URDAY ZAA, JANNY, PT

Provider ID: N/A
☒ 5266 BALTIMORE DR
LA MESA, CA 91942
Effective as of 01-JAN-23

NGUYEN, STEVEN, PT

Provider ID: N/A
☒ 8388 PARKWAY DR

LA MESA, CA 91942
Effective as of 01-MAY-22

NGUYEN, STEVEN, PT

Provider ID: N/A
☒ 8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-AUG-23

PAPA, AMY, PT

Provider ID: N/A
☒ 8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-AUG-23

PAPA, AMY, PT

Provider ID: N/A
☒ 8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-NOV-21

SAHATDJIAN, EVA, PT

Provider ID: N/A
☒ 8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-AUG-23

SAHATDJIAN, EVA, PT

Provider ID: N/A
☒ 8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-DEC-21

THOMAS, KAITLIN, PT

Provider ID: N/A
☒ 8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-NOV-23

RHEUMATOLOGY

KOTHA, AKTHER, MD†

Provider ID: N/A
☒ 8860 CENTER DR STE 400
LA MESA, CA 91942

C1. 网络提供者名单 专科护理医生

Effective as of 01-SEP-15

KOTHA, ROSHAN, MD†

Provider ID: N/A

8860 CENTER DR STE 400
LA MESA, CA 91942

Effective as of 01-AUG-20

KOTHA, ROSHAN, MD†

Provider ID: N/A

8860 CENTER DR STE 400
LA MESA, CA 91942

Effective as of 01-JAN-21

KOTHA, AKTHER, MD†

Provider ID: N/A

8860 CENTER DR STE 400
LA MESA, CA 91942

Effective as of 01-DEC-23

KOTHA, AKTHER, MD†

Provider ID: N/A

8860 CENTER DR STE 400
LA MESA, CA 91942

Effective as of 01-JAN-21

SURGERY GENERAL

DICKINSON, PHILLIP, MD†

Provider ID: N/A

8554 LA MESA BLVD
LA MESA, CA 91942

Effective as of 01-JUL-22

DICKINSON, PHILLIP, MD†

Provider ID: N/A

8554 LA MESA BLVD
LA MESA, CA 91942

Effective as of 01-JAN-24

DICKINSON, PHILLIP, MD†

Provider ID: N/A

8554 LA MESA BLVD
LA MESA, CA 91942

Effective as of 01-JAN-14

KHARAZI, ALEXANDRA, MD

Provider ID: N/A

8851 CENTER DR STE 500
LA MESA, CA 91942

Effective as of 01-MAY-23

SURGERY HAND

RICKARDS, ENASS, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-21

SURGERY

NEUROLOGICAL

KURESHI, SOHAIB, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 210
LA MESA, CA 91942

Effective as of 01-JAN-21

OSTRUP, RICHARD, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 210
LA MESA, CA 91942

Effective as of 01-MAR-21

OSTRUP, RICHARD, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 210
LA MESA, CA 91942

Effective as of 01-JAN-21

ZACHARIAH, MARCUS, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 1 STE 210
LA MESA, CA 91942

Effective as of 01-MAY-23

SURGERY ORTHOPEDIC

HENDERSON, RODNEY, MD

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-14

KIMBALL, MICHAEL, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-OCT-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JUL-23

KIMBALL, MICHAEL, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-MAR-16

RICKARDS, ENASS, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-SEP-22

C1. 网络提供者名单 专科护理医生

RICKARDS, ENASS, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-JUL-23

RICKARDS, ENASS, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-JAN-21

RICKARDS, ENASS, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-APR-23

TAYYAB, NEIL, MD

Provider ID: N/A

☒ 8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-AUG-23

SURGERY THORACIC

KOUMJIAN, MICHAEL, MD†

Provider ID: N/A

☒ 5525 GROSSMONT
CENTER DR STE 609
LA MESA, CA 91942
Effective as of 01-FEB-07

KOUMJIAN, MICHAEL, MD†

Provider ID: N/A

☒ 5525 GROSSMONT
CENTER DR STE 609
LA MESA, CA 91942
Effective as of 01-JAN-21

UROLOGY

BUTLER, PHILIP, MD

Provider ID: N/A

☒ 8851 CENTER DR STE 501

LA MESA, CA 91942
Effective as of 01-JAN-24

COHEN, EDWARD, MD

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

DICKS, BRIAN, MD

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

JAVIER-DESLOGES, JUAN, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Teleservice
Effective as of 01-JUL-23

JAVIER-DESLOGES, JUAN, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Teleservice
Effective as of 01-DEC-22

JAVIER-DESLOGES, JUAN, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Teleservice
Effective as of 01-JAN-23

JUMA, SAAD, MD

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

KEARSE, WILFRED, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-DEC-21

NEUSTEIN, PAUL, MD

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

NGUYEN, HUNG, MD

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

PE, MARK-RALLY, MD

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

ROBERTS, JAMES, MD

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

SALMASI, AMIRALI, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JUL-23

VAPNEK, EVAN, MD

Provider ID: N/A

C1. 网络提供者名单

专科护理医生

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

CARDIAC ELECTROPHYSIOLOGY

MITIKU, TEFERI, MD†
Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-FEB-22

MITIKU, TEFERI, MD†
Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-FEB-22

CARDIOVASCULAR DISEASE

NGUYEN, HUY, MD†
Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-JAN-20

WERTMAN, BRETT, MD
Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-JAN-21

WERTMAN, BRETT, MD
Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-JAN-20

CERTIFIED NURSE PRACTITIONER

PASICOLAN, MARI, NP
Provider ID: N/A

25612 CROWN VALLEY
PKWY
LADERA RANCH, CA 92694
Effective as of 01-DEC-22

PASICOLAN, MARI, NP
Provider ID: N/A

25612 CROWN VALLEY
PKWY
LADERA RANCH, CA 92694
Effective as of 01-DEC-22

PASICOLAN, MARI, NP
Provider ID: N/A

25612 CROWN VALLEY
PKWY
LADERA RANCH, CA 92694
Effective as of 01-DEC-22

DERMATOLOGY

BINGHAM, LUCAS, MD
Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-MAY-22

BINGHAM, LUCAS, MD
Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-DEC-18

BINGHAM, LUCAS, MD
Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694

Effective as of 01-DEC-18

LANDER, JEFFREY, MD†
Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-MAY-20

LANDER, JEFFREY, MD†
Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-FEB-20

LANDER, JEFFREY, MD†
Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-OCT-23

LANDER, JEFFREY, MD†
Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-MAY-20

LANDER, JEFFREY, MD†
Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-MAY-20

PETERSON, SAMUEL, MD†
Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-MAY-22

PETERSON, SAMUEL, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-DEC-21

EMERGENCY MEDICINE

KENNEDY, GREGORY, MD†

Provider ID: N/A
777 CORPORATE DR STE
250
LADERA RANCH, CA 92694
Effective as of 01-MAY-24

TIMBOE, JENNA, MD

Provider ID: N/A
777 CORPORATE DR
LADERA RANCH, CA 92694
Effective as of 01-OCT-23

WAINWRIGHT, MITCHELL, MD

Provider ID: N/A
800 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-SEP-18

INTERVENTIONAL CARDIOLOGY

NGUYEN, HUY, MD†

Provider ID: N/A
333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-DEC-17

NGUYEN, HUY, MD†

Provider ID: N/A
333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-DEC-17

NGUYEN, HUY, MD†

Provider ID: N/A
333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-JAN-21

WERTMAN, BRETT, MD

Provider ID: N/A
333 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-DEC-15

WERTMAN, BRETT, MD

Provider ID: N/A
333 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-JAN-16

NEUROLOGY

PENG, YING, MD†

Provider ID: N/A
333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-JUN-22

NEUROLOGY CHILD

PENG, YING, MD†

Provider ID: N/A
333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-OCT-19

PENG, YING, MD†

Provider ID: N/A
333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-DEC-20

PENG, YING, MD†

Provider ID: N/A
333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-JUL-21

PENG, YING, MD†

Provider ID: N/A
333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-JUL-21

PENG, YING, MD†

Provider ID: N/A
333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-JUN-24

PENG, YING, MD†

Provider ID: N/A
333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-OCT-19

OTOLARYNGOLOGY

KAUFMAN, AVRUM, DO

Provider ID: N/A
800 CORPORATE DR STE
290
LADERA RANCH, CA 92694
Effective as of 01-JAN-18

PEDIATRICS

DWINELL, LAUREN, MD

Provider ID: N/A
777 CORPORATE DR STE
250
LADERA RANCH, CA 92694

C1. 网络提供者名单

专科护理医生

Effective as of 01-JUL-23

PHYSICIANS ASSISTANT

RUMMEL, LAURA, PA†

Provider ID: N/A

333 CORPORATE DR STE
100
LADERA RANCH, CA 92694

Effective as of 01-DEC-22

RUMMEL, LAURA, PA†

Provider ID: N/A

333 CORPORATE DR STE
100
LADERA RANCH, CA 92694

Effective as of 01-JUN-24

PODIATRIST

RODRIGUEZ, NITZA, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694

Effective as of 01-NOV-19

RODRIGUEZ, NITZA, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694

Effective as of 01-NOV-19

RODRIGUEZ, NITZA, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694

Effective as of 01-SEP-19

SPENCER, ROBERT, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230

LADERA RANCH, CA 92694

Effective as of 01-SEP-19

SPENCER, ROBERT, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694

Effective as of 01-MAY-24

SPENCER, ROBERT, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694

Effective as of 01-SEP-19

SPENCER, ROBERT, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694

Effective as of 01-SEP-19

PSYCHIATRY

BORECKY, ADAM, MD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694

Effective as of 01-JAN-24

BORECKY, ADAM, MD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694

Effective as of 01-JAN-24

KINBACK, KEVIN, MD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694

Effective as of 01-JAN-19

KINBACK, KEVIN, MD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694

Effective as of 01-JAN-19

KINBACK, KEVIN, MD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694

Effective as of 01-JAN-19

KINBACK, KEVIN, MD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694

Effective as of 01-JAN-19

LAW, LINDSEY, MD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694

Effective as of 01-DEC-20

LAW, LINDSEY, MD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694

Effective as of 01-DEC-20

LAW, LINDSEY, MD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694

Effective as of 01-DEC-20

LAW, LINDSEY, MD

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-DEC-20

PSYCHOLOGIST

OKONSKI, MICHELE, PSYD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JUN-19

OKONSKI, MICHELE, PSYD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JUN-19

OKONSKI, MICHELE, PSYD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JUN-19

OKONSKI, MICHELE, PSYD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JUN-19

SURGERY GENERAL

QURESHI, ALI, MD

Provider ID: N/A

800 CORPORATE DR STE
280
LADERA RANCH, CA 92694
Effective as of 01-FEB-24

QURESHI, ALI, MD

Provider ID: N/A

800 CORPORATE DR STE
280
LADERA RANCH, CA 92694
Effective as of 01-FEB-24

SURGERY PLASTIC

DOEZIE, ALLEN, MD†

Provider ID: N/A

777 CORPORATE DR STE 110
LADERA RANCH, CA 92694
Effective as of 01-SEP-10

DOEZIE, ALLEN, MD†

Provider ID: N/A

777 CORPORATE DR STE 110
LADERA RANCH, CA 92694
Effective as of 01-SEP-10

CERTIFIED NURSE PRACTITIONER

BINAVI, HOWNAZ, NP†

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA BEACH, CA 92677
Effective as of 01-JUL-21

INFECTIOUS DISEASE

HAMIDI ASL, KAMRAN, MD

Provider ID: N/A

31852 COAST HWY STE 302
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

OPHTHALMOLOGY

HENRICK, ANDREW, MD

Provider ID: N/A

31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651

Effective as of 01-OCT-23

HENRICK, ANDREW, MD

Provider ID: N/A

31852 COAST HWY
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-23

JOSON, PETER, MD

Provider ID: N/A

25200 LA PAZ RD STE 100
LAGUNA BEACH, CA 92653
Effective as of 01-JUL-24

PRENDIVILLE, PAUL, MD

Provider ID: N/A

31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-23

PRENDIVILLE, PAUL, MD

Provider ID: N/A

31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-23

SPANGGORD, HOLLY, MD†

Provider ID: N/A

31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-19

SPANGGORD, HOLLY, MD†

Provider ID: N/A

31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-23

PEDIATRIC CRITICAL CARE MEDICINE

REDA, ZACHARIA, MD†

Provider ID: N/A

31862 COAST HWY STE 302
LAGUNA BEACH, CA 92651

C1. 网络提供者名单 专科护理医生

Effective as of 01-OCT-23

PEDIATRIC PULMONOLOGY

REDA, ZACHARIA, MD†

Provider ID: N/A

☒ 31862 COAST HWY STE 203
LAGUNA BEACH, CA 92651

Effective as of 01-JUN-22

REDA, ZACHARIA, MD†

Provider ID: N/A

☒ 31862 COAST HWY STE 203
LAGUNA BEACH, CA 92651

Effective as of 01-JUN-22

REDA, ZACHARIA, MD†

Provider ID: N/A

☒ 31862 COAST HWY STE 203
LAGUNA BEACH, CA 92651

Effective as of 01-JUN-22

PODIATRIST

YETTER, MARCUS, DPM†

Provider ID: N/A

☒ 31852 COAST HWY STE 105
LAGUNA BEACH, CA 92651

Effective as of 01-MAR-20

YETTER, MARCUS, DPM†

Provider ID: N/A

☒ 31852 COAST HWY STE 105
LAGUNA BEACH, CA 92651

Effective as of 01-MAR-20

YETTER, MARCUS, DPM†

Provider ID: N/A

☒ 31852 COAST HWY STE 105
LAGUNA BEACH, CA 92651

Effective as of 01-JUL-19

PULMONARY DISEASES

SHAHINIAN, GEORGE, MD†

Provider ID: N/A

☒ 31852 COAST HWY STE 201
LAGUNA BEACH, CA 92651

Effective as of 01-NOV-23

SHAHINIAN, GEORGE, MD†

Provider ID: N/A

☒ 31852 COAST HWY STE 201
LAGUNA BEACH, CA 92651

Effective as of 01-JUL-23

SHAHINIAN, GEORGE, MD†

Provider ID: N/A

☒ 31852 COAST HWY STE 201
LAGUNA BEACH, CA 92651

Effective as of 01-JAN-15

SURGERY GENERAL

CHANG, STEVEN, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651

Effective as of 01-APR-12

CHANG, STEVEN, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651

Effective as of 01-DEC-11

CHANG, STEVEN, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651

Effective as of 01-JAN-18

CHANG, STEVEN, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651

Effective as of 01-SEP-13

COCCIA, MICHAEL, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651

Effective as of 01-NOV-14

COCCIA, MICHAEL, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651

Effective as of 01-JAN-18

COCCIA, MICHAEL, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651

Effective as of 01-APR-12

SURGERY ORTHOPEDIC

ABDOLLAHI, KARIM, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651

Effective as of 01-NOV-14

ABDOLLAHI, KARIM, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651

Effective as of 01-SEP-10

ABDOLLAHI, KARIM, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651

Effective as of 01-JAN-18

ASHKENAZE, DAVID, MD†

Provider ID: N/A

☒ 31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651

Effective as of 01-OCT-13

ASHKENAZE, DAVID, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-13

ASHKENAZE, DAVID, MD†

Provider ID: N/A

31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

GILLMAN, MICHAEL, MD

Provider ID: N/A

31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

GILLMAN, MICHAEL, MD

Provider ID: N/A

31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-NOV-14

GILLMAN, MICHAEL, MD

Provider ID: N/A

31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-SEP-10

GILLMAN, MICHAEL, MD

Provider ID: N/A

31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-APR-16

ALLERGY IMMUNOLOGY

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101

LAGUNA HILLS, CA 92653
Effective as of 01-DEC-21

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-17

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-22

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

ANESTHESIOLOGY

ALIKHANI, SHAHRIAR, MD†

Provider ID: N/A

23025 MILL CREEK DR
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

BARNHILL, JOSHUA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 204
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-24

BARNHILL, JOSHUA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 204
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-24

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

HO, ALAN, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

24953 PASEO DE
VALENCIA STE 7A
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

ANESTHESIOLOGY PAIN MANAGEMENT

ALSHARIF, KAIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

ALSHARIF, KAIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-18

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-15

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-24

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

HO, ALAN, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 7A
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-17

HO, ALAN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 7A
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

KUO, DENNIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-19

KUO, DENNIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-21

KUO, DENNIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-21

MESSIHA, ANDREW, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 204

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-16

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-16

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-16

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-22

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

POURADIB, AMIR, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

POURADIB, AMIR, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

POURADIB, AMIR, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-18

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

24953 PASEO DE

C1. 网络提供者名单 专科护理医生

VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-22

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

☒ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-20

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

☒ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

☒ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-16

AUDIOLOGIST

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CARDIAC

ELECTROPHYSIOLOGY

DRURY, PAUL, MD†

Provider ID: N/A

☒ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

DRURY, PAUL, MD†

Provider ID: N/A

☒ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

GUJRAL, INDERPAL, MD†

Provider ID: N/A

☒ 24953 PASEO DE
VALENCIA STE 30A
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

GUJRAL, INDERPAL, MD†

Provider ID: N/A

☒ 24953 PASEO DE
VALENCIA STE 30A
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

SARCON, ANNAHITA, MD

Provider ID: N/A

☒ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

SARCON, ANNAHITA, MD

Provider ID: N/A

☒ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

CARDIOVASCULAR DISEASE

ARD, SCOTT, MD

Provider ID: N/A

☒ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-AUG-23

ARD, SCOTT, MD

Provider ID: N/A

☒ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-AUG-23

ARD, SCOTT, MD

Provider ID: N/A

☒ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-SEP-23

ARD, SCOTT, MD

Provider ID: N/A

☒ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-SEP-23

ARD, SCOTT, MD

Provider ID: N/A

☒ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-SEP-23

ARD, SCOTT, MD

Provider ID: N/A

☒ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

C1. 网络提供者名单 专科护理医生

Teleservice

Effective as of 01-JAN-24

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JUN-24

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JUN-24

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JUN-24

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JUL-24

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JUN-24

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JUN-24

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JUN-24

BAHADORANI, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-19

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

FEINER, JEFFREY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-12

GIM, RONALD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-12

GUJRAL, INDERPAL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 30A
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-17

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

C1. 网络提供者名单
专科护理医生

Effective as of 01-JAN-24

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-AUG-17

LAMONT, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 550
 LAGUNA HILLS, CA 92653

Effective as of 01-MAY-12

LE, DAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

LE, DAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

LE, DAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-DEC-21

LE, DAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-DEC-21

LYLE, DOUGLAS, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 550
 LAGUNA HILLS, CA 92653

Effective as of 01-MAY-12

PARISE, CHARLES, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500

LAGUNA HILLS, CA 92653

Effective as of 01-APR-20

PATEL, MILAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-APR-19

PATEL, MILAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-SEP-19

ROSANIO, SALVATORE, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-SEP-23

ROSANIO, SALVATORE, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-SEP-23

ROSANIO, SALVATORE, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-SEP-23

ROSANIO, SALVATORE, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500

C1. 网络提供者名单 专科护理医生

LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-MAR-24

ROSANIO, SALVATORE, MD

Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-AUG-23

ROSANIO, SALVATORE, MD

Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-AUG-23

ROSANIO, SALVATORE, MD

Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JUN-24

ROSANIO, SALVATORE, MD

Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JUN-24

VAN, HOHAI, MD†

Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

VAN, HOHAI, MD†

Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-20

VAN, HOHAI, MD†

Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

VAN, HOHAI, MD†

Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

VAN, HOHAI, MD†

Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

VAN, HOHAI, MD†

Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

ZAREMBA, MARK, MD†

Provider ID: N/A
25401 CABOT RD STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

ZAREMBA, MARK, MD†

Provider ID: N/A
25401 CABOT RD STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-13

ZAREMBA, MARK, MD†

Provider ID: N/A
25401 CABOT RD STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-14

CERTIFIED

ACUPUNCTURIST

OMIDI, SHOHREH, LAC

Provider ID: N/A
24422 AVENIDA DE LA
CARLOTA STE 105
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

OMIDI, SHOHREH, LAC

Provider ID: N/A
24422 AVENIDA DE LA
CARLOTA STE 105
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

SHE, WU, LAC†

Provider ID: N/A
24953 PASEO DE
VALENCIA STE 7C
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

CERTIFIED NURSE PRACTITIONER

CARASQUERO, ANDREA, NP

Provider ID: N/A
23121 PLAZA POINTE DR
STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

CHANG KIMES, AUDREY, NP†

Provider ID: N/A
24422 AVENIDA DE LA
CARLOTA STE 300

C1. 网络提供者名单 专科护理医生

LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CHANG KIMES, AUDREY, NP†

Provider ID: N/A

📍 24422 AVENIDA DE LA
CARLOTA STE 130
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CHANG KIMES, AUDREY, NP†

Provider ID: N/A

📍 24422 AVENIDA DE LA
CARLOTA STE 130
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

KHAN, KHADEER, NP

Provider ID: N/A

📍 23121 PLAZA POINTE DR
STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

KHURANA, ANIL, NP

Provider ID: N/A

📍 23121 PLAZA POINTE DR
STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

NGUYEN, MARICEL, NP

Provider ID: N/A

📍 23181 VERDUGO DR STE
103A
LAGUNA HILLS, CA 92653*
Effective as of 01-APR-23

NGUYEN, MARICEL, NP

Provider ID: N/A

📍 23181 VERDUGO DR STE
103A
LAGUNA HILLS, CA 92653*
Effective as of 01-APR-23

PARK, NURI, NP

Provider ID: N/A

📍 23181 VERDUGO DR STE
103A
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-15

PARK, SE, NP

Provider ID: N/A

📍 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

PARK, SE, NP

Provider ID: N/A

📍 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

📍 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

📍 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

📍 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

***CERTIFIED REGISTERED
NURSE MIDWIFE***

MCDANIEL-DAVIS, SHAYNA, CRNM

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

MCDANIEL-DAVIS, SHAYNA, CRNM

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

MOLINSKI, ALLISON, CRNM

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-24

SAJADI, ALISA, CRNM

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

VIVALDA, JULIE, CRNM

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

VIVALDA, JULIE, CRNM

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

VIVALDA, JULIE, CRNM

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

VIVALDA, JULIE, CRNM

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

CHIROPRACTOR

COSTALES, STEPHEN, DC

Provider ID: N/A

24741 ALICIA PKWY STE D
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LANIER, TIMOTHY, DC†

Provider ID: N/A

23412 MOULTON PKWY
STE 100
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

MCHONE, PATRICIA, DC†

Provider ID: N/A

24741 ALICIA PKWY STE D
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

MCHONE, PATRICIA, DC†

Provider ID: N/A

24741 ALICIA PKWY STE D
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

DERMATOLOGY

ATHALYE, LEELA, DO

Provider ID: N/A

24012 CALLE DE LA PLATA

STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-24

ATHALYE, LEELA, DO

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-24

LANDER, JEFFREY, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-19

LANDER, JEFFREY, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

LANDER, JEFFREY, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LANDER, JEFFREY, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-16

LANDER, JEFFREY, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

LEE, KATHERINE, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

LEE, KATHERINE, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-14

LEE, KATHERINE, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-14

LEE, KATHERINE, MD

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LEE, KATHERINE, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LEE, KATHERINE, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

NAMI, NAVID, DO

Provider ID: N/A

C1. 网络提供者名单
专科护理医生

24012 CALLE DE LA PLATA
 STE 200
 LAGUNA HILLS, CA 92653
 Effective as of 01-JUL-24

NAMI, NAVID, DO
 Provider ID: N/A

24012 CALLE DE LA PLATA
 STE 200
 LAGUNA HILLS, CA 92653
 Effective as of 01-JUL-24

EMERGENCY MEDICINE

BLAND, HOWARD, MD
 Provider ID: N/A

23595 MOULTON PKWY
 STE E
 LAGUNA HILLS, CA 92653
 Effective as of 01-SEP-23

GEE, KELLY, DO†
 Provider ID: N/A

23521 PASEO DE VALENCIA
 STE 311
 LAGUNA HILLS, CA 92653
 Effective as of 01-FEB-22

ENDOCRINOLOGY

METABOLISM DIABETES

BANDUKWALA, RAHIL, DO†
 Provider ID: N/A

23141 MOULTON PKWY STE
 102
 LAGUNA HILLS, CA 92653
 Effective as of 01-OCT-23

BANDUKWALA, RAHIL, DO†
 Provider ID: N/A

23141 MOULTON PKWY STE
 102
 LAGUNA HILLS, CA 92653
 Effective as of 01-JUL-16

BANDUKWALA, RAHIL, DO†
 Provider ID: N/A

23141 MOULTON PKWY STE
 102
 LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-23

BANDUKWALA, RAHIL, DO†
 Provider ID: N/A

23141 MOULTON PKWY STE
 102
 LAGUNA HILLS, CA 92653
 Effective as of 01-JUN-24

BANDUKWALA, RAHIL, DO†
 Provider ID: N/A

23141 MOULTON PKWY STE
 102
 LAGUNA HILLS, CA 92653
 Effective as of 01-JUN-19

CHAN, JESSICA, MD†
 Provider ID: N/A

24321 AVENIDA DE LA
 CARLOTA
 LAGUNA HILLS, CA 92653
 Effective as of 01-APR-23

CHAN, JESSICA, MD†
 Provider ID: N/A

24321 AVENIDA DE LA
 CARLOTA
 LAGUNA HILLS, CA 92653
 Effective as of 01-NOV-22

CHANG, KU JUEY, MD
 Provider ID: N/A

23141 MOULTON PKWY STE
 102
 LAGUNA HILLS, CA 92653
 Effective as of 01-JUN-19

CHANG, KU JUEY, MD
 Provider ID: N/A

23141 MOULTON PKWY STE

102
 LAGUNA HILLS, CA 92653
 Effective as of 01-NOV-16

CHANG, KU JUEY, MD
 Provider ID: N/A

23141 MOULTON PKWY STE
 102
 LAGUNA HILLS, CA 92653
 Effective as of 01-OCT-23

CHANG, KU JUEY, MD
 Provider ID: N/A

23141 MOULTON PKWY STE
 102
 LAGUNA HILLS, CA 92653
 Effective as of 01-AUG-21

FARJOUDI, FARHAD, MD†
 Provider ID: N/A

23521 PASEO DE VALENCIA
 STE 108
 LAGUNA HILLS, CA 92653
 Effective as of 01-MAY-22

FARJOUDI, FARHAD, MD†
 Provider ID: N/A

23521 PASEO DE VALENCIA
 STE 106
 LAGUNA HILLS, CA 92653
 Effective as of 01-JUN-22

FARJOUDI, FARHAD, MD†
 Provider ID: N/A

23521 PASEO DE VALENCIA
 STE 108
 LAGUNA HILLS, CA 92653
 Effective as of 01-MAY-22

FARJOUDI, FARHAD, MD†
 Provider ID: N/A

23521 PASEO DE VALENCIA
 STE 106
 LAGUNA HILLS, CA 92653
 Effective as of 01-JUN-22

C1. 网络提供者名单
专科护理医生

<p>KRISHNAN, PRIYANKA, MD Provider ID: N/A  23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-JUN-19</p>	<p>102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-OCT-23</p>	<p>LAGUNA HILLS, CA 92653 Effective as of 01-JAN-23</p>
<p>KRISHNAN, PRIYANKA, MD Provider ID: N/A  23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-JUL-16</p>	<p>KRISHNAN, PRIYANKA, MD Provider ID: N/A  23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-AUG-21</p>	<p>MARKMAN, LISA, MD Provider ID: N/A  23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-MAR-23</p>
<p>KRISHNAN, PRIYANKA, MD Provider ID: N/A  23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-JUN-24</p>	<p>MARKMAN, LISA, MD Provider ID: N/A  23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-MAR-23</p>	<p>MEHTA, SHILPA, MD[†] Provider ID: N/A  23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-NOV-19</p>
<p>KRISHNAN, PRIYANKA, MD Provider ID: N/A  23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-APR-18</p>	<p>MARKMAN, LISA, MD Provider ID: N/A  23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-MAR-23</p>	<p>MEHTA, SHILPA, MD[†] Provider ID: N/A  23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-NOV-19</p>
<p>KRISHNAN, PRIYANKA, MD Provider ID: N/A  23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-FEB-16</p>	<p>MARKMAN, LISA, MD Provider ID: N/A  23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-MAR-23</p>	<p>MEHTA, SHILPA, MD[†] Provider ID: N/A  23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-NOV-19</p>
<p>KRISHNAN, PRIYANKA, MD Provider ID: N/A  23141 MOULTON PKWY STE</p>	<p>MARKMAN, LISA, MD Provider ID: N/A  23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-23</p>	<p>MEHTA, SHILPA, MD[†] Provider ID: N/A  23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-NOV-19</p>

C1. 网络提供者名单 专科护理医生

- ☐ 23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JAN-23
- MEHTA, SHILPA, MD†**
Provider ID: N/A
- ☐ 23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JUN-19
- MEHTA, SHILPA, MD†**
Provider ID: N/A
- ☐ 23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JUN-19
- MEHTA, SHILPA, MD†**
Provider ID: N/A
- ☐ 23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JUN-24
- MEHTA, SHILPA, MD†**
Provider ID: N/A
- ☐ 23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-OCT-23
- POURBABAK, SAM, MD**
Provider ID: N/A
- ☐ 23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653
Teleservice
- ☐ 23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23
- TRAN, NEIL, MD**
Provider ID: N/A
- ☐ 24321 AVENIDA DE LA CARLOTA
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23
- ENDOCRINOLOGY**
REPRODUCTIVE
- FREDERICK, JANE, MD†**
Provider ID: N/A
- ☐ 23961 CALLE DE LA MAGDALENA STE 503
LAGUNA HILLS, CA 92653*
Effective as of 01-JUN-19
- FREDERICK, JANE, MD†**
Provider ID: N/A
- ☐ 23961 CALLE DE LA MAGDALENA STE 541
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-13
- FREDERICK, JANE, MD†**
Provider ID: N/A
- ☐ 23961 CALLE DE LA MAGDALENA STE 541
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24
- FAMILY PRACTICE**
- LEISH, BRIAN, MD**
Provider ID: N/A
- ☐ 24411 HEALTH CENTER DR STE 460
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18
- RIZNIS, TENGIS, MD†**
Provider ID: N/A
- ☐ 24451 HEALTH CENTER DR STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18
- FAMILY PRACTICE**
GERIATRIC MEDICINE
- PATEL, NEHAL, MD†**
Provider ID: N/A
- ☐ 23141 VERDUGO DR STE 201
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-DEC-20
- PATEL, NEHAL, MD†**
Provider ID: N/A
- ☐ 23141 VERDUGO DR STE 201
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-AUG-24
- PATEL, NEHAL, MD†**
Provider ID: N/A
- ☐ 23141 VERDUGO DR STE 201
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-DEC-20
- FEMALE PELVIC MED AND RECONSTRUCTIVE SURG**
- MWESIGWA, PATRICIA, MD†**
Provider ID: N/A
- ☐ 23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-22
- SHOURESHI, POONE, MD**
Provider ID: N/A
- ☐ 23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

C1. 网络提供者名单 专科护理医生

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-23

GASTROENTEROLOGY

JALALI, FARID, MD†

Provider ID: N/A

24221 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-19

JALALI, FARID, MD†

Provider ID: N/A

24221 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-19

NGO, CATHERINE, MD

Provider ID: N/A

26671 ALISO CREEK RD STE
301
LAGUNA HILLS, CA 92656

Effective as of 01-DEC-22

NGO, CATHERINE, MD

Provider ID: N/A

26671 ALISO CREEK RD STE
301
LAGUNA HILLS, CA 92656

Effective as of 01-DEC-22

SHAH, KETAN, MD

Provider ID: N/A

24221 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-16

SHAH, KETAN, MD

Provider ID: N/A

24221 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-16

SHAH, KETAN, MD

Provider ID: N/A

24221 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-16

SHAH, KETAN, MD

Provider ID: N/A

24221 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

SY, THEODORE, MD†

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-21

SY, THEODORE, MD†

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-18

SY, THEODORE, MD†

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-18

SY, THEODORE, MD†

Provider ID: N/A

26538 MOULTON PKWY
STE 38E

LAGUNA HILLS, CA 92653

Effective as of 01-MAR-21

GENERAL PRACTICE

SHAW, BRIAN, DO†

Provider ID: N/A

23265 S POINTE DR STE
100
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-15

GYNECOLOGIC

ONCOLOGY

DHOLAKIYA, PRIYAL, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-24

DHOLAKIYA, PRIYAL, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-24

DHOLAKIYA, PRIYAL, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-24

DHOLAKIYA, PRIYAL, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-24

DHOLAKIYA, PRIYAL, MD

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-24

DHOLAKIYA, PRIYAL, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-24

HEMATOLOGY / ONCOLOGY

CHENG, HOWARD, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 25B
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-08

CHENG, HOWARD, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 25B
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

CHENG, HOWARD, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 25B
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

HASSAN, SARAH, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

MALEKIRAD, JACQUELINE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

MALEKIRAD, JACQUELINE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

MULTANI, GURPREET, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

PATHAK, BHAVANA, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

PATHAK, BHAVANA, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

PATHAK, BHAVANA, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

PATHAK, BHAVANA, MD

Provider ID: N/A

24401 HEALTH CENTER DR

STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

PATHAK, BHAVANA, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 420
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 420
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 420
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 420
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 501
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

C1. 网络提供者名单

专科护理医生

RAO, AMOL, MD†

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

SALIMI-TARI, PEYMAN, MD†

Provider ID: N/A

📍 23961 CALLE DE LA
MAGDALENA STE 501
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

SU, DERRICK, MD†

Provider ID: N/A

📍 23961 CALLE DE LA
MAGDALENA STE 501
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

VU, COLLIN, MD†

Provider ID: N/A

📍 25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-22

VU, COLLIN, MD†

Provider ID: N/A

📍 25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-22

VU, COLLIN, MD†

Provider ID: N/A

📍 25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-22

VU, COLLIN, MD†

Provider ID: N/A

📍 25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

VU, COLLIN, MD†

Provider ID: N/A

📍 25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

VU, COLLIN, MD†

Provider ID: N/A

📍 25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

HOSPITALIST MD/DO

ABCEDE, GAIL FRANCES LIEZL, MD†

Provider ID: N/A

📍 24953 PASEO DE
VALENCIA STE 7C
LAGUNA HILLS, CA 92653
Teleservice

Effective as of 01-SEP-22

SINGH, DEEPPJOT, MD

Provider ID: N/A

📍 24451 HEALTH CENTER DR
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

INFECTIOUS DISEASE

KOPACZ, JOANNA, MD

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

KOPACZ, JOANNA, MD

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KOPACZ, JOANNA, MD

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

KOPACZ, JOANNA, MD

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KOPACZ, JOANNA, MD

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KOPACZ, JOANNA, MD

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

KOPACZ, JOANNA, MD

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

WHITE, ALAN, MD

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 460
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

INTERNAL MEDICINE

BAE, CHAY, DO†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

BAE, CHAY, DO[†]

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

BAE, CHAY, DO[†]

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

BAE, CHAY, DO[†]

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-FEB-24

LO, ALAN, MD

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

NGUYEN, AN, DO[†]

Provider ID: N/A

23181 VERDUGO DR STE
103A
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

POURBABAK, SAM, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JAN-23

SOONG, YEN-HUI, MD[†]

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

SOONG, YEN-HUI, MD[†]

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

INTERNAL MEDICINE CRITICAL CARE MEDICINE

KADIFA, FADY, MD[†]

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

VOVAN, THOMAS, MD[†]

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

INTERVENTIONAL CARDIOLOGY

ALLAM, SHAMILI, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

ALLAM, SHAMILI, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

ALLAM, SHAMILI, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

CHEN, CHENG-HAN, MD[†]

Provider ID: N/A

24022 CALLE DE LA PLATA

C1. 网络提供者名单 专科护理医生

STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-20

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

FEINER, JEFFREY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

FRUMIN, HOWARD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

GAULT, MICHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

GIM, RONALD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

GUJRAL, INDERPAL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 30A
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-11

KARROWNI, WASSEF, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LAMONT, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

LYLE, DOUGLAS, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

MASTERS, ROBERT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653

C1. 网络提供者名单
专科护理医生

Effective as of 01-JUN-24

PARISE, CHARLES, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

PARISE, CHARLES, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

PARISE, CHARLES, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

PARISE, CHARLES, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

PARISE, CHARLES, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

PATEL, MILAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

PATEL, MILAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-AUG-20

PATEL, MILAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

PATEL, MILAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-AUG-20

TURIY, YULIYA, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-MAY-21

TURIY, YULIYA, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-MAY-21

TURIY, YULIYA, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-MAY-21

VAN, HOHAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500

LAGUNA HILLS, CA 92653

Effective as of 01-AUG-20

VAN, HOHAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-AUG-20

VAN, HOHAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

VAN, HOHAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-AUG-20

VAN, HOHAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

WALTERS, DANIEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 550
 LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

WALTERS, DANIEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 550
 LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

C1. 网络提供者名单 专科护理医生

WALTERS, DANIEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

WALTERS, DANIEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

LICENSED CLINICAL SOCIAL WORKER

DOWNES, SAIGE, LCSW

Provider ID: N/A

23461 S POINTE DR STE 240
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

DOWNES, SAIGE, LCSW

Provider ID: N/A

23461 S POINTE DR STE 240
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

HAYDEN, SANDRA, LCSW

Provider ID: N/A

25255 CABOT RD STE 210
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-21

HAYDEN, SANDRA, LCSW

Provider ID: N/A

25255 CABOT RD STE 210
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-21

MACIEL, MARLA, LCSW

Provider ID: N/A

23121 PLAZA POINTE DR

STE 107

LAGUNA HILLS, CA 92653

Effective as of 01-MAR-24

ZARGARBASHI, STEFANIE, LCSW†

Provider ID: N/A

24321 AVENIDA DE LA
CARLOTA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

MARRIAGE FAMILY THERAPIST

MOORE, CANDACE, MFT

Provider ID: N/A

23461 S POINTE DR
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-22

MOORE, CANDACE, MFT

Provider ID: N/A

23461 S POINTE DR
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-22

MATERNAL AND FETAL MEDICINE

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-11

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-04

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 260
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 260
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 260
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

C1. 网络提供者名单 专科护理医生

LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 260

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-16

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 260

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

CHAU, CINDY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

CHAU, CINDY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

CHAU, CINDY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

CHAU, CINDY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

CHAU, CINDY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

DAY, ROBERT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

KFIR, MENASHE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR

STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KFIR, MENASHE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KFIR, MENASHE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KFIR, MENASHE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

MASAKI, DAMON, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-MAY-19

MASAKI, DAMON, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-DEC-19

MILLS, MARLIN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 540

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

C1. 网络提供者名单 专科护理医生

MILLS, MARLIN, MD†

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 540
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

MILLS, MARLIN, MD†

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 540
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

MILLS, MARLIN, MD†

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 540
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SHRIVASTAVA, VINEET, MD†

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

SHRIVASTAVA, VINEET, MD†

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

MEDICAL ONCOLOGY

VU, COLLIN, MD†

Provider ID: N/A

📍 25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

NEONATAL / PERINATAL

MEDICINE

BUSH, MELISSA, MD†

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

MASAKI, DAMON, MD†

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-19

NEPHROLOGY

HAFTBARADARAN

MOHAMMADI, AFSANEH, MD

Provider ID: N/A

📍 25411 CABOT RD STE 105
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

HAFTBARADARAN

MOHAMMADI, AFSANEH, MD

Provider ID: N/A

📍 25411 CABOT RD STE 105
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

JAMES, JOJI, MD

Provider ID: N/A

📍 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

MANSOURY, HADI, MD

Provider ID: N/A

📍 23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

NEUROLOGY

BANDARI, DANIEL, MD†

Provider ID: N/A

📍 24012 CALLE DE LA PLATA
STE 210
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

CHOAN, CAROLINE, MD

Provider ID: N/A

📍 24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JUN-24

LOC, KIET, MD†

Provider ID: N/A

📍 24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

LOC, KIET, MD†

Provider ID: N/A

📍 24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

LOC, KIET, MD†

Provider ID: N/A

📍 24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

MAASUMI, KASRA, MD†

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

C1. 网络提供者名单 专科护理医生

MAASUMI, KASRA, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

MAASUMI, KASRA, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

MAASUMI, KASRA, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

MAASUMI, KASRA, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

RAPOPORT, ZHANNA, MD

Provider ID: N/A

☒ 24953 PASEO DE
VALENCIA STE 8A
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

RAPOPORT, ZHANNA, MD

Provider ID: N/A

☒ 24953 PASEO DE
VALENCIA STE 8A
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

RAPOPORT, ZHANNA, MD

Provider ID: N/A

☒ 24953 PASEO DE

VALENCIA STE 8A
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

RAPOPORT, ZHANNA, MD

Provider ID: N/A

☒ 24953 PASEO DE
VALENCIA STE 8A
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

RAPOPORT, ZHANNA, MD

Provider ID: N/A

☒ 24953 PASEO DE
VALENCIA STE 8A
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

SHEN, MICHAEL, MD

Provider ID: N/A

☒ 24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

SHEN, MICHAEL, MD

Provider ID: N/A

☒ 24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-16

SHEN, MICHAEL, MD

Provider ID: N/A

☒ 24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-16

SHEN, MICHAEL, MD

Provider ID: N/A

☒ 24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-16

OBSTETRICS / GYNECOLOGY

AL-AZAWI, HIND, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

AL-AZAWI, HIND, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

CHUNG, LINDA, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

CHUNG, LINDA, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-APR-20

COUGH, HEIDI, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

COUGH, HEIDI, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

C1. 网络提供者名单

专科护理医生

COUGH, HEIDI, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

DAVIS, STEPHANIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

DAVIS, STEPHANIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

DAY, ROBERT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

DEJBAKSH, SHEILA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

EDMUNDSON, MORIAH, DO†

Provider ID: N/A

24321 AVENIDA DE LA
CARLOTA
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

FREDERICK, JANE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 503
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

FREDERICK, JANE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 503
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

JOHNSON, SUSAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

KONG, GRACE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

KONG, GRACE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

KONG, GRACE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

KRYCHMAN, MICHAEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-24

KRYCHMAN, MICHAEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

KRYCHMAN, MICHAEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

KRYCHMAN, MICHAEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

LAM, KIM, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LAM, KIM, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

LEE, KATHERINE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

LEE, KATHERINE, MD

C1. 网络提供者名单

专科护理医生

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

LO, PATRICIA, MD

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

LOPEZ, RACHAEL, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

LOPEZ, RACHAEL, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

LOPEZ, RACHAEL, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

LOPEZ, RACHAEL, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

LOPEZ, RACHAEL, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

MASAKI, DAMON, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
LAGUNA HILLS, CA 92653
Effective as of 01-APR-19

MASAKI, DAMON, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-22

MASAKI, DAMON, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-22

MENDELSON, SUSAN, MD

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

MENDELSON, SUSAN, MD

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

MENDELSON, SUSAN, MD

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

MILLER, JAMIE, MD

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

O TOOLE, MARY, MD

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

O TOOLE, MARY, MD

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

PATEL, MITA, MD

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-19

PETERS, AMY, DO†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

PETERS, AMY, DO

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

PRIESTLEY, ANGELIKA, MD

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 200

C1. 网络提供者名单

专科护理医生

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

STERNFELD, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

STERNFELD, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

STERNFELD, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

STERNFELD, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-19

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-MAY-20

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

VICENS-VILLAFANA, JOSE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

VICENS-VILLAFANA, JOSE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

WINTER, MARC, MD

Provider ID: N/A

24411 HEALTH CENTER DR

STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

YU, MIAO, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

YU, MIAO, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

YU, MIAO, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-MAY-20

OPHTHALMOLOGY

AHMAD, ASHRAF, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

AHMAD, ASHRAF, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

AHMAD, ASHRAF, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300

C1. 网络提供者名单
专科护理医生

LAGUNA HILLS, CA 92653
 Effective as of 01-SEP-23

AHMAD, ASHRAF, MD†

Provider ID: N/A
 23961 CALLE DE LA
 MAGDALENA STE 300
 LAGUNA HILLS, CA 92653
 Effective as of 01-SEP-23

BANUELOS, LYDIA, MD†

Provider ID: N/A
 23521 PASEO DE VALENCIA
 STE 305
 LAGUNA HILLS, CA 92653
 Effective as of 01-DEC-22

BANUELOS, LYDIA, MD

Provider ID: N/A
 23521 PASEO DE VALENCIA
 STE 309
 LAGUNA HILLS, CA 92653
 Effective as of 01-FEB-23

BROOKMAN, MYLES, MD

Provider ID: N/A
 23521 PASEO DE VALENCIA
 STE 305
 LAGUNA HILLS, CA 92653
 Effective as of 01-MAY-23

BROOKMAN, MYLES, MD

Provider ID: N/A
 23521 PASEO DE VALENCIA
 STE 305
 LAGUNA HILLS, CA 92653
 Effective as of 01-MAY-23

CHEN, SANFORD, MD†

Provider ID: N/A
 23521 PASEO VALENCIA
 309
 LAGUNA HILLS, CA 92653
 Effective as of 01-APR-13

CHOI, DAVID, MD

Provider ID: N/A
 23521 PASEO DE VALENCIA
 STE 305
 LAGUNA HILLS, CA 92653
 Effective as of 01-APR-23

CHOI, DAVID, MD

Provider ID: N/A
 23521 PASEO DE VALENCIA
 STE 305
 LAGUNA HILLS, CA 92653
 Effective as of 01-APR-23

CHOI, DAVID, MD

Provider ID: N/A
 23521 PASEO DE VALENCIA
 STE 305
 LAGUNA HILLS, CA 92653
 Effective as of 01-APR-23

CHOI, DAVID, MD

Provider ID: N/A
 23521 PASEO DE VALENCIA
 STE 305
 LAGUNA HILLS, CA 92653
 Effective as of 01-MAY-24

DHOOT, SONIA, MD†

Provider ID: N/A
 24401 CALLE DE LA LOUISA
 STE 300
 LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-19

DHOOT, SONIA, MD†

Provider ID: N/A
 24401 CALLE DE LA LOUISA
 STE 300
 LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-19

DHOOT, SONIA, MD†

Provider ID: N/A
 23961 CALLE DE LA

MAGDALENA STE 300
 LAGUNA HILLS, CA 92653
 Effective as of 01-SEP-22

DHOOT, SONIA, MD†

Provider ID: N/A
 23961 CALLE DE LA
 MAGDALENA STE 300
 LAGUNA HILLS, CA 92653
 Effective as of 01-OCT-23

**EIFRIG, CHARLES WILLIAM,
 MD†**

Provider ID: N/A
 23521 PASEO DE VALENCIA
 STE 207
 LAGUNA HILLS, CA 92653
 Effective as of 01-DEC-20

**EIFRIG, CHARLES WILLIAM,
 MD†**

Provider ID: N/A
 23521 PASEO DE VALENCIA
 STE 207
 LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-20

**EIFRIG, CHARLES WILLIAM,
 MD†**

Provider ID: N/A
 23521 PASEO DE VALENCIA
 STE 207
 LAGUNA HILLS, CA 92653
 Effective as of 01-SEP-22

**EIFRIG, CHARLES WILLIAM,
 MD†**

Provider ID: N/A
 23521 PASEO DE VALENCIA
 STE 207
 LAGUNA HILLS, CA 92653
 Effective as of 01-OCT-23

**EIFRIG, CHARLES WILLIAM,
 MD†**

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

☒ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-18

EIFRIG, CHARLES WILLIAM, MD†

Provider ID: N/A

☒ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-18

GUJRAL, SATVINDER, MD†

Provider ID: N/A

☒ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

GUJRAL, SATVINDER, MD†

Provider ID: N/A

☒ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

GUJRAL, SATVINDER, MD†

Provider ID: N/A

☒ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

GUJRAL, SATVINDER, MD†

Provider ID: N/A

☒ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

GUPTA, MRINALI, MD†

Provider ID: N/A

☒ 23521 PASEO DE VALENCIA

STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-22

GUPTA, MRINALI, MD†

Provider ID: N/A

☒ 23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-22

GUPTA, MRINALI, MD†

Provider ID: N/A

☒ 23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-20

GUPTA, MRINALI, MD†

Provider ID: N/A

☒ 23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-20

GUPTA, MRINALI, MD†

Provider ID: N/A

☒ 23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-20

GUPTA, MRINALI, MD†

Provider ID: N/A

☒ 23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

GUPTA, MRINALI, MD†

Provider ID: N/A

☒ 23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

GWYNN, DAVID, MD

Provider ID: N/A

☒ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

GWYNN, DAVID, MD

Provider ID: N/A

☒ 25200 LA PAZ RD
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-24

GWYNN, DAVID, MD

Provider ID: N/A

☒ 25200 LA PAZ RD
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-24

HENRICK, ANDREW, MD

Provider ID: N/A

☒ 24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

HENRICK, ANDREW, MD

Provider ID: N/A

☒ 24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

HENRICK, ANDREW, MD

Provider ID: N/A

☒ 24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-14

HENRICK, ANDREW, MD

Provider ID: N/A

☒ 24022 CALLE DE LA PLATA
STE 305

C1. 网络提供者名单 专科护理医生

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-14

HENRICK, ANDREW, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

HOVANESIAN, JOHN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

HWANG, JOHN, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-18

HWANG, JOHN, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

HWANG, JOHN, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-20

HWANG, JOHN, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

HWANG, JOHN, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-16

JACOBS, JEFFREY, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-22

JACOBS, JEFFREY, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

23961 CALLE DE LA

MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

JOSON, PETER, MD

Provider ID: N/A

25200 LA PAZ RD
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-24

JOSON, PETER, MD

Provider ID: N/A

25200 LA PAZ RD
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-24

JOSON, PETER, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 309
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-22

JOSON, PETER, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 309
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-17

KELLER, CHARLES, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-22

KELLER, CHARLES, MD

C1. 网络提供者名单

专科护理医生

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

KERSTEN, DIANA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

KERSTEN, DIANA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

KERSTEN, DIANA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

KERSTEN, DIANA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

KHAN, SAMIRA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

KHAN, SAMIRA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305

LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

KIM, JANET, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305

LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KIM, JANET, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305

LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KIM, BRIAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-22

KIM, JANET, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305

LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

KIM, JANET, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305

LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

KIM, JANET, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305

LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KIM, JANET, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

KIM, BRIAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

KIM, ESTHER, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 745
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-22

KIM, EDWARD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-22

KIM, ESTHER, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 745
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

KIM, EDWARD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

KIM, BRIAN, MD†

Provider ID: N/A

23961 CALLE DE LA

C1. 网络提供者名单 专科护理医生

MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

KIM, BRIAN, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

KIM, BRIAN, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

MCGUIRE, DESMOND, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

NOGUCHI, JONATHAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

PATEL, ALPA, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

PATEL, ALPA, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-22

PERRY, ANGELA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

PERRY, ANGELA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

PERRY, ANGELA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

PRENDIVILLE, PAUL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-14

PRENDIVILLE, PAUL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-14

PRENDIVILLE, PAUL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

PRENDIVILLE, PAUL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

PRENDIVILLE, PAUL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

RATHOD, RAJIV, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

RATHOD, RAJIV, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

RATHOD, RAJIV, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

RATHOD, RAJIV, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

RATHOD, RAJIV, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

RATHOD, RAJIV, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475

C1. 网络提供者名单
专科护理医生

LAGUNA HILLS, CA 92653
 Effective as of 01-APR-22

RATHOD, RAJIV, MD†

Provider ID: N/A

23521 PASEO VALENCIA
 309

LAGUNA HILLS, CA 92653
 Effective as of 01-FEB-15

ROUHANI, BEHNAZ, MD

Provider ID: N/A

23961 CALLE DE LA
 MAGDALENA STE 300
 LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

ROUHANI, BEHNAZ, MD

Provider ID: N/A

23961 CALLE DE LA
 MAGDALENA STE 300
 LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

ROUHANI, BEHNAZ, MD

Provider ID: N/A

23961 CALLE DE LA
 MAGDALENA STE 300
 LAGUNA HILLS, CA 92653

Effective as of 01-SEP-22

ROUHANI, BEHNAZ, MD

Provider ID: N/A

24401 CALLE DE LA LOUISA
 STE 300
 LAGUNA HILLS, CA 92653

Effective as of 01-SEP-19

ROUHANI, BEHNAZ, MD

Provider ID: N/A

24401 CALLE DE LA LOUISA
 STE 300
 LAGUNA HILLS, CA 92653

Effective as of 01-SEP-19

SALEHI-HAD, HANI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
 STE 309
 LAGUNA HILLS, CA 92653

Effective as of 01-JUN-21

SALEHI-HAD, HANI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
 STE 309
 LAGUNA HILLS, CA 92653

Effective as of 01-JUN-21

SALIB, GEORGE, MD†

Provider ID: N/A

24422 AVENIDA DE LA
 CARLOTA STE 110
 LAGUNA HILLS, CA 92653

Effective as of 01-JUN-21

SALIB, GEORGE, MD†

Provider ID: N/A

24422 AVENIDA DE LA
 CARLOTA STE 110
 LAGUNA HILLS, CA 92653

Effective as of 01-SEP-18

SALIB, GEORGE, MD†

Provider ID: N/A

24422 AVENIDA DE LA
 CARLOTA STE 110
 LAGUNA HILLS, CA 92653

Effective as of 01-MAR-20

SPANGGORD, HOLLY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 305
 LAGUNA HILLS, CA 92653

Effective as of 01-NOV-14

SPANGGORD, HOLLY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA

STE 305
 LAGUNA HILLS, CA 92653
 Effective as of 01-OCT-23

SPANGGORD, HOLLY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 305
 LAGUNA HILLS, CA 92653

Effective as of 01-DEC-14

SPANGGORD, HOLLY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 305
 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-19

SPANGGORD, HOLLY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 305
 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

TAI, AUDREY, DO

Provider ID: N/A

25200 LA PAZ RD STE 100
 LAGUNA HILLS, CA 92653

Effective as of 01-JUL-24

TAYANI, RAMIN, MD

Provider ID: N/A

25200 LA PAZ RD STE 100
 LAGUNA HILLS, CA 92653

Effective as of 01-JUL-24

TAYANI, RAMIN, MD

Provider ID: N/A

25200 LA PAZ RD
 LAGUNA HILLS, CA 92653

Effective as of 01-SEP-24

TAYANI, RAMIN, MD

Provider ID: N/A

C1. 网络提供者名单

专科护理医生

25200 LA PAZ RD
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-24

TAYANI, RAMIN, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-14

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

TOMPKINS, BRETT, DO

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-24

TOMPKINS, BRETT, DO

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

TOMPKINS, BRETT, DO

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

TOMPKINS, BRETT, DO

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

TOMPKINS, BRETT, DO

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-24

TOMPKINS, BRETT, DO

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-24

TOMPKINS, BRETT, DO

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-24

WANG, YE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

WANG, YE, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

WANG, YE, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

WANG, YE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

WANG, YE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

C1. 网络提供者名单 专科护理医生

WILLIAMS, MARK, MD

Provider ID: N/A

📄 24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

WILLIAMS, MARK, MD

Provider ID: N/A

📄 24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

WILLIAMS, MARK, MD

Provider ID: N/A

📄 24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

WILLIAMS, MARK, MD

Provider ID: N/A

📄 24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

WILLIAMS, MARK, MD

Provider ID: N/A

📄 24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

YOU, TIMOTHY, MD†

Provider ID: N/A

📄 24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

YOU, TIMOTHY, MD†

Provider ID: N/A

📄 23521 PASEO DE VALENCIA

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-05

YOU, TIMOTHY, MD†

Provider ID: N/A

📄 24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

OPTOMETRIST

CHOI-SIRITARATIWAT, ISABELL, OD†

Provider ID: N/A

📄 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

CHOI-SIRITARATIWAT, ISABELL, OD†

Provider ID: N/A

📄 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

CHOI-SIRITARATIWAT, ISABELL, OD†

Provider ID: N/A

📄 24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

CHOI-SIRITARATIWAT, ISABELL, OD†

Provider ID: N/A

📄 24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

CHOI-SIRITARATIWAT,

ISABELL, OD†

Provider ID: N/A

📄 23961 CALLE DE LA
MAGDALENA STE 300
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Effective as of 01-AUG-22

GRATTAN, ANNE, OD†

Provider ID: N/A

📄 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

GRATTAN, ANNE, OD†

Provider ID: N/A

📄 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

GRATTAN, ANNE, OD†

Provider ID: N/A

📄 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

GRATTAN, ANNE, OD†

Provider ID: N/A

📄 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

GRATTAN, ANNE, OD†

Provider ID: N/A

📄 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

HUYNH, ANTHONY, OD†

Provider ID: N/A

📄 23521 PASEO DE VALENCIA

C1. 网络提供者名单 专科护理医生

STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

HUYNH, ANTHONY, OD†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

HUYNH, ANTHONY, OD†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

HUYNH, ANTHONY, OD†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

HUYNH, ANTHONY, OD†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

HUYNH, ANTHONY, OD†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

LEI, SHARON, OD

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 325
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

LEIGHT, TERRA, OD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

LEIGHT, TERRA, OD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

LEUNG, CHRISTINA, OD†

Provider ID: N/A

☞ 25260 LA PAZ RD STE G
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-16

MONTANA-COLLINS, CLAUDIA, OD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 412
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

MULICK, STEPHANIE, OD

Provider ID: N/A

☞ 25200 LA PAZ RD STE 100
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-24

NG, REBECCA, OD

Provider ID: N/A

☞ 25200 LA PAZ RD STE 100
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-24

NG, REBECCA, OD

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-23

PHAN, MIMI, OD†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

PLECHOT, ERIQ, OD

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

PLECHOT, ERIQ, OD

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

PLECHOT, ERIQ, OD

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

PLECHOT, ERIQ, OD

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

PLECHOT, ERIQ, OD

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

SKVARNA, KAREN, OD

C1. 网络提供者名单

专科护理医生

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-22

SKVARNA, KAREN, OD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

SKVARNA, KAREN, OD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

TERADA, SEIJU, OD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

TERADA, SEIJU, OD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-22

TERADA, SEIJU, OD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

OTOLARYNGOLOGY

ABEDI ASL, ESRAFIL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 430
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-14

ABEDI ASL, ESRAFIL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 430
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

ABEDI ASL, ESRAFIL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 430
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

ABEDI ASL, ESRAFIL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 430
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-13

BALAKER, ASHLEY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-19

BALAKER, ASHLEY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-19

BALAKER, ASHLEY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

BUEN, FLOYD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-20

BUEN, FLOYD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-20

BUEN, FLOYD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-20

CHO, MICHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

CHO, MICHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

JAKOBSEN, MICHAEL, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

MUNDI, JAGMEET, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

SUN, PAUL, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

SUN, JOHN, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

SUN, JOHN, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-16

SUN, PAUL, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

SUN, JOHN, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600

LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

SUN, JOHN, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

SUN, PAUL, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-11

SUN, PAUL, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SUN, JOHN, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-11

SUN, PAUL, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

SUN, JOHN, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SUN, JOHN, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

SUN, PAUL, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

SUN, JOHN, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

SUN, JOHN, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

SUN, PAUL, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

SUN, PAUL, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

SUN, PAUL, MD†

Provider ID: N/A


☒ 24411 HEALTH CENTER DR

C1. 网络提供者名单 专科护理医生

STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16


SUN, JOHN, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-07


SUN, PAUL, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-07


SUN, PAUL, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-12


SUN, JOHN, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-12


SUN, PAUL, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20


SUN, JOHN, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20


SUN, PAUL, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-14


SUN, JOHN, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-14


SUN, JOHN, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17


SUN, PAUL, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17


YIAN, CHRISTOPHER, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-14


YIAN, CHRISTOPHER, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17


YIAN, CHRISTOPHER, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-12


YIAN, CHRISTOPHER, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-07


YIAN, CHRISTOPHER, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16


YIAN, CHRISTOPHER, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18


YIAN, CHRISTOPHER, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21


YIAN, CHRISTOPHER, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-11

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

C1. 网络提供者名单 专科护理医生

Effective as of 01-MAY-12

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-APR-11

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
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LAGUNA HILLS, CA 92653

Effective as of 01-NOV-14

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

PEDIATRIC CARDIOLOGY

DENNY-BROWN, SINAN, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

DENNY-BROWN, SINAN, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

PHYS MED/ REHAB PAIN MEDICINE

HANNA, ANDREW, DO

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-23

HANNA, ANDREW, DO

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-23

HANNA, ANDREW, DO

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-23

PHYSICAL MEDICINE / REHABILITATION

ALSHARIF, KAIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-21

ALSHARIF, KAIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-21

HILAL, TARIQ, DO†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-21

HILAL, TARIQ, DO†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-21

HILAL, TARIQ, DO†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-20

C1. 网络提供者名单 专科护理医生

HILAL, TARIQ, DO[†]

Provider ID: N/A

☒ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

KUO, DENNIS, MD[†]

Provider ID: N/A

☒ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-20

LYNN, KENNETH, MD[†]

Provider ID: N/A

☒ 24012 CALLE DE LA PLATA
STE 460
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-19

POURADIB, AMIR, MD[†]

Provider ID: N/A

☒ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

POURADIB, AMIR, MD[†]

Provider ID: N/A

☒ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-22

POURADIB, AMIR, MD[†]

Provider ID: N/A

☒ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-22

POURADIB, AMIR, MD[†]

Provider ID: N/A

☒ 24012 CALLE DE LA PLATA

STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

PHYSICIANS ASSISTANT

BYNON, KRISTEN, PA

Provider ID: N/A

☒ 24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

BYNON, KRISTEN, PA

Provider ID: N/A

☒ 24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

BYNON, KRISTEN, PA

Provider ID: N/A

☒ 24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

CARDENAS, RICARDO, PA[†]

Provider ID: N/A

☒ 23521 PASEO DE VALENCIA
STE 250
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CARDENAS, RICARDO, PA[†]

Provider ID: N/A

☒ 23521 PASEO DE VALENCIA
STE 250
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CARR, OLIVIA, PA

Provider ID: N/A

☒ 23961 CALLE DE LA
MAGDALENA STE 500

LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

CARR, OLIVIA, PA

Provider ID: N/A

☒ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

DINH, Y NHA THI, PA[†]

Provider ID: N/A

☒ 23181 VERDUGO DR STE
103A
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-15

KIM, MOSES, MD[†]

Provider ID: N/A

☒ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

KISCADEN, LAUREN, PA

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 208
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

KISCADEN, LAUREN, PA

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 208
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

NAGEL, IRENE, PA[†]

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

C1. 网络提供者名单 专科护理医生

OWEN, LISA, PA

Provider ID: N/A

☐ 23181 VERDUGO DR STE
103A
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

PALMER, VIVIENNE, PA

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

PALMER, VIVIENNE, PA

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

PALMER, VIVIENNE, PA

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

SHARAF, KAREEM, PA

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-24

SHARAF, KAREEM, PA

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-24

SHARAF, KAREEM, PA

Provider ID: N/A

☐ 24411 HEALTH CENTER DR

STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-24

SHARAF, KAREEM, PA

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-24

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

WANG, LILLIAN, PA†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-FEB-22

PODIATRIST

ARJOMANDI, NEDA, DPM†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 410
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

ARJOMANDI, NEDA, DPM†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 410
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

☐ 23141 MOULTON PKWY STE
109
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-20

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

☐ 23141 MOULTON PKWY STE
109
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-20

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

☐ 23141 MOULTON PKWY STE
109
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

GOLSHAHI, BAHAR, DPM†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

☐ 23141 MOULTON PKWY STE
109
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

LEAMING, ROBERT, DPM

Provider ID: N/A

☐ 23141 MOULTON PKWY STE
109
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-FEB-24

LEAMING, ROBERT, DPM

Provider ID: N/A

☐ 23141 MOULTON PKWY STE
109
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-FEB-24

MCCANN, JAN, DPM

Provider ID: N/A

☐ 24012 CALLE DE LA PLATA
STE 135
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

MCCANN, JAN, DPM

Provider ID: N/A

☐ 24012 CALLE DE LA PLATA
STE 135
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

NOSRATI, SAM, DPM†

Provider ID: N/A

☐ 23141 MOULTON PKWY STE
109
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-16

NOSRATI, SAM, DPM†

Provider ID: N/A

☐ 23141 MOULTON PKWY STE
109
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-16

NOSRATI, SAM, DPM†

Provider ID: N/A

☐ 23141 MOULTON PKWY STE
109
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

POLISKIE, MICHAEL, DPM†

Provider ID: N/A

☐ 23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-22

POLISKIE, MICHAEL, DPM†

Provider ID: N/A

☐ 23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-18

YETTER, MARCUS, DPM†

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 143
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

PSYCHIATRY

CHU, WEIMING, MD†

Provider ID: N/A

☐ 24953 PASEO DE
VALENCIA STE 7C
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-21

CHU, WEIMING, MD†

Provider ID: N/A

☐ 24953 PASEO DE

VALENCIA STE 7C
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-21

EAGAN, TERRY, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 424
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

EAGAN, TERRY, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 424
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

PULMONARY DISEASES

CHANG, WILLIAM, DO†

Provider ID: N/A

☐ 23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

CHANG, WILLIAM, DO†

Provider ID: N/A

☐ 23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

CHANG, WILLIAM, DO†

Provider ID: N/A

☐ 23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

CHANG, WILLIAM, DO†

Provider ID: N/A

☐ 23141 MOULTON PKWY STE
108

C1. 网络提供者名单
专科护理医生

LAGUNA HILLS, CA 92653
 Effective as of 01-JUN-24

CHANG, WILLIAM, DO†

Provider ID: N/A

23141 MOULTON PKWY STE 108

LAGUNA HILLS, CA 92653
 Effective as of 01-JUN-24

CHANG, WILLIAM, DO†

Provider ID: N/A

23141 MOULTON PKWY STE 108

LAGUNA HILLS, CA 92653
 Effective as of 01-NOV-22

CHANG, WILLIAM, DO†

Provider ID: N/A

23141 MOULTON PKWY STE 108

LAGUNA HILLS, CA 92653
 Effective as of 01-NOV-22

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-18

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-17

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-17

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-AUG-23

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-AUG-23

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-MAY-22

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-OCT-23

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-JUN-17

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-JUN-24

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR

STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-JUN-24

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-23

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-23

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-NOV-19

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-MAY-12

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-NOV-19

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-APR-11

C1. 网络提供者名单
专科护理医生

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 560
 LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-17

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 560
 LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-18

KOHLI, SANJIVAN, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
 108
 LAGUNA HILLS, CA 92653
 Effective as of 01-JUN-23

KOHLI, SANJIVAN, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
 108
 LAGUNA HILLS, CA 92653
 Effective as of 01-NOV-22

KOHLI, SANJIVAN, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
 108
 LAGUNA HILLS, CA 92653
 Effective as of 01-JUN-24

KOHLI, SANJIVAN, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
 108
 LAGUNA HILLS, CA 92653
 Effective as of 01-NOV-22

SHAHINIAN, GEORGE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 620
 LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

Effective as of 01-APR-23

SINGH, SAMARJIT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 560
 LAGUNA HILLS, CA 92653

Effective as of 01-MAR-19

SINGH, SAMARJIT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 560
 LAGUNA HILLS, CA 92653

Effective as of 01-MAR-22

SINGH, SAMARJIT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 560
 LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

SINGH, SAMARJIT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 560
 LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

SOONG, YEN-HUI, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
 108
 LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

SOONG, YEN-HUI, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
 108
 LAGUNA HILLS, CA 92653

SOONG, YEN-HUI, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
 108
 LAGUNA HILLS, CA 92653

Effective as of 01-NOV-22

VO, BRYAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 560
 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

VO, BRYAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 560
 LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

VO, BRYAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 560
 LAGUNA HILLS, CA 92653

Effective as of 01-DEC-18

VO, BRYAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 560
 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

VO, BRYAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 560
 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

VO, BRYAN, MD

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

VO, BRYAN, MD

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-12

VOVAN, THOMAS, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

VOVAN, THOMAS, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

VOVAN, THOMAS, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

VOVAN, THOMAS, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

VOVAN, THOMAS, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

RADIATION ONCOLOGY

CHAN, LINDA, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

CHAN, LINDA, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-24

CHAN, LINDA, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

CHAN, LINDA, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

CHAN, LINDA, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

CHAN, LINDA, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-19

HARSOLIA, ASIF, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

HARSOLIA, ASIF, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

HARSOLIA, ASIF, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

HARSOLIA, ASIF, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KABOLIZADEH, PEYMAN, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

KABOLIZADEH, PEYMAN, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

LEE, SHARON, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

☒ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

LEE, SHARON, MD†

Provider ID: N/A

☒ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

LEE, SHARON, MD†

Provider ID: N/A

☒ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

LEE, SHARON, MD†

Provider ID: N/A

☒ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

LEE, SHARON, MD†

Provider ID: N/A

☒ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

MOYSES, HARRY, MD†

Provider ID: N/A

☒ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

MOYSES, HARRY, MD†

Provider ID: N/A

☒ 24302 PASEO DE
VALENCIA

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

RHEUMATOLOGY

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

☒ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-18

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

☒ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-15

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

☒ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

☒ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

☒ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

☒ 25411 CABOT RD STE 112

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

☒ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-19

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

☒ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

☒ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

☒ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

☒ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

☒ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-21

C1. 网络提供者名单 专科护理医生

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JUL-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JUL-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-APR-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice

Effective as of 01-APR-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

SURGERY COLON SURGERY

BRADY, MATTHEW, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

BRADY, MATTHEW, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

BRADY, MATTHEW, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

BRADY, MATTHEW, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

SYN, GENE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

SYN, GENE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 231
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SURGERY GENERAL

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR

C1. 网络提供者名单 专科护理医生

STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-19

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-14

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

BACON, LOUISE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

BACON, LOUISE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

DEARING, DAVID, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-18

DEARING, DAVID, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

DEARING, DAVID, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

DEARING, DAVID, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

DEARING, DAVID, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

HOLNESS, RONALD, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-19

KLAUSE, ELVIRA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KLAUSE, ELVIRA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KLAUSE, ELVIRA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KLAUSE, ELVIRA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653*
Effective as of 01-JUN-23

KLAUSE, ELVIRA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KLAUSE, ELVIRA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653

C1. 网络提供者名单
专科护理医生

Effective as of 01-MAY-23

KLAUSE, ELVIRA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

KUSHNER, KENNETH, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KUSHNER, KENNETH, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

PHAM, ALEXANDER, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-24

PHAM, ALEXANDER, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-24

PHAM, ALEXANDER, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-24

RAHNEMA, CYRUS, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

RAHNEMA, CYRUS, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

RAHNEMA, CYRUS, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

RAHNEMA, CYRUS, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

ROBERTSON, ELSIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

ROBERTSON, ELSIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

ROBERTSON, ELSIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

ROBERTSON, ELSIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

ROBERTSON, ELSIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

ROBERTSON, ELSIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-23

ROBERTSON, ELSIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

RONA, KAIS, MD

Provider ID: N/A

11 MAREBLU STE 200
LAGUNA HILLS, CA 92656*

Effective as of 01-FEB-23

SHARMA, RAHUL, DO⁺

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-19

SHARMA, RAHUL, DO⁺

C1. 网络提供者名单

专科护理医生

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

SHAVER, JOHN, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

SHAVER, JOHN, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

SHAVER, JOHN, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SHAVER, JOHN, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

TENG, WANG, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

TUNG, SHAWNDEEP, MD

Provider ID: N/A

☐ 24401 CALLE DE LA LOUISA
STE 102

LAGUNA HILLS, CA 92653

Effective as of 01-JUL-21

TUNG, SHAWNDEEP, MD

Provider ID: N/A

☐ 24401 CALLE DE LA LOUISA
STE 102
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

TUNG, SHAWNDEEP, MD

Provider ID: N/A

☐ 24401 CALLE DE LA LOUISA
STE 102
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

TUNG, SHAWNDEEP, MD

Provider ID: N/A

☐ 24401 CALLE DE LA LOUISA
STE 102
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

WALLACE, WILLIAM, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

WALLACE, WILLIAM, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

WALLACE, WILLIAM, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

WALLACE, WILLIAM, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

WALLACE, WILLIAM, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-13

WALLACE, WILLIAM, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

WALLACE, WILLIAM, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

WALLACE, WILLIAM, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

WALLACE, WILLIAM, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

WATANABE, BRIAN, MD†

Provider ID: N/A

☐ 24953 PASCO DE

C1. 网络提供者名单 专科护理医生

VALENCIA
STE 15C
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-21

WATANABE, BRIAN, MD†

Provider ID: N/A
24953 PASCO DE
VALENCIA
STE 15C
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-21

WATANABE, BRIAN, MD†

Provider ID: N/A
24953 PASCO DE
VALENCIA
STE 15C
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-21

WONG, JASON, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

WONG, JASON, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-12

WONG, JASON, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-12

WONG, JASON, MD†

Provider ID: N/A
24411 HEALTH CENTER DR

STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

WONG, JASON, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

WONG, JASON, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

WONG, JASON, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-20

WONG, JASON, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-20

SURGERY GENERAL VASCULAR

DEARING, DAVID, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-19

DEARING, DAVID, MD†

Provider ID: N/A
24411 HEALTH CENTER DR

STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

DEARING, DAVID, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-18

DEARING, DAVID, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-15

SHARMA, RAHUL, DO†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-18

SHARMA, RAHUL, DO†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SHARMA, RAHUL, DO†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-APR-19

SHARMA, RAHUL, DO†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-APR-19

C1. 网络提供者名单 专科护理医生

SHARMA, RAHUL, DO†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SHARMA, RAHUL, DO†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-19

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-12

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

SURGERY HAND ORTHOPEDIC

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-NOV-20

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-NOV-20

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-NOV-20

SURGERY

NEUROLOGICAL

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

C1. 网络提供者名单 专科护理医生

Effective as of 01-OCT-23

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-23

JACKSON, ROBERT, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-23

JACKSON, ROBERT, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-23

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-19

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-19

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-19

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-19

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 504
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-21

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 504
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-18

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 504

LAGUNA HILLS, CA 92653

Effective as of 01-AUG-21

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JAN-21

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-APR-22

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-MAY-20

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-MAY-20

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JAN-21

MASSOUDI, FARZAD, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JUN-24

SURGERY ORTHOPEDIC

GREENBAUM, BRADLEY, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

GREENBAUM, BRADLEY, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

PATEL, AMAR, MD[†]

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637

Effective as of 01-SEP-23

PATEL, AMAR, MD[†]

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637

Effective as of 01-JAN-22

PATEL, AMAR, MD[†]

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637

Effective as of 01-DEC-21

PATEL, AMAR, MD[†]

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637

Effective as of 01-MAY-22

PATEL, AMAR, MD[†]

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637

Effective as of 01-JUL-21

PATEL, AMAR, MD[†]

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637

Effective as of 01-NOV-22

PATEL, AMAR, MD[†]

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637

Effective as of 01-NOV-22

SURGERY THORACIC

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-23

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-23

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

C1. 网络提供者名单 专科护理医生

Effective as of 01-NOV-23

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-23

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-23

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-23

HARGROVE, RACHEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-22

HARGROVE, RACHEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

HARGROVE, RACHEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

HARGROVE, RACHEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

HARGROVE, RACHEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

HARGROVE, RACHEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-19

KANAAN, SAMER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-17

KANAAN, SAMER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-17

LAM, TUAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-APR-19

POWELL, LEDFORD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653

LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

POWELL, LEDFORD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-14

POWELL, LEDFORD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

POWELL, LEDFORD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-20

POWELL, LEDFORD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-16

POWELL, LEDFORD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653

Effective as of 01-APR-16

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-20

C1. 网络提供者名单

专科护理医生

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

SURGICAL ONCOLOGY

BREMNER, AMY, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

BREMNER, AMY, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

BREMNER, AMY, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

BREMNER, AMY, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 102
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-21

BREMNER, AMY, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

UROLOGY

BUI, DON, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA

MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

C1. 网络提供者名单

专科护理医生

ELKHOORY, FUAD, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-21

ELKHOORY, FUAD, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-21

ELKHOORY, FUAD, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

ELKHOORY, FUAD, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

ELKHOORY, FUAD, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-22

ELKHOORY, FUAD, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-22

GRUENENFELDER, JENNIFER, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-22

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500

LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

KIM, MOSES, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

C1. 网络提供者名单 专科护理医生

KIM, MOSES, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500

LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-19

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA

C1. 网络提供者名单 专科护理医生

MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

PASIN, ERIK, MD

Provider ID: N/A

24321 AVENIDA DE LA
CARLOTA STE H7
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

PASIN, ERIK, MD

Provider ID: N/A

24321 AVENIDA DE LA
CARLOTA STE H7
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-21

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO VALENCIA7C
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-12

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO VALENCIA7C
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-15

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
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Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

C1. 网络提供者名单 专科护理医生

SHOURESHI, POONE, MD

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 500
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Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 500
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Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 500
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Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

☞ 23961 CALLE DE LA
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Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

☞ 23961 CALLE DE LA
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Effective as of 01-NOV-23

SINGH, KARAN, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
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Effective as of 01-JAN-23

SINGH, KARAN, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA

MAGDALENA STE 500
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Effective as of 01-JUN-24

SINGH, KARAN, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 500
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Effective as of 01-JAN-21

SINGH, KARAN, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
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Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
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Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
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Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
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Effective as of 01-OCT-23

SINGH, KARAN, MD†

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☞ 23961 CALLE DE LA
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Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

☞ 25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

SPITZ, AARON, MD†

Provider ID: N/A

☞ 25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-14

SPITZ, AARON, MD†

Provider ID: N/A

☞ 25200 LA PAZ RD STE 200
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Effective as of 01-OCT-22

SPITZ, AARON, MD†

Provider ID: N/A

☞ 25200 LA PAZ RD STE 200
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Effective as of 01-OCT-14

SPITZ, AARON, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
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C1. 网络提供者名单 专科护理医生

SPITZ, AARON, MD†

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SPITZ, AARON, MD†

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📄 23961 CALLE DE LA
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SPITZ, AARON, MD†

Provider ID: N/A

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SPITZ, AARON, MD†

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SPITZ, AARON, MD†

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Effective as of 01-FEB-20

SPITZ, AARON, MD†

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SPITZ, AARON, MD†

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Effective as of 01-FEB-20

SPITZ, AARON, MD†

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SPITZ, AARON, MD†

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SPITZ, AARON, MD†

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SPITZ, AARON, MD†

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📄 23961 CALLE DE LA
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SU, DANIEL, MD†

Provider ID: N/A

📄 23961 CALLE DE LA
MAGDALENA STE 500
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SU, DANIEL, MD†

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📄 23961 CALLE DE LA
MAGDALENA STE 500
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SU, DANIEL, MD†

Provider ID: N/A

📄 23961 CALLE DE LA
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SU, DANIEL, MD†

Provider ID: N/A

📄 23961 CALLE DE LA
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SU, DANIEL, MD†

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📄 23961 CALLE DE LA
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SU, DANIEL, MD†

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📄 23961 CALLE DE LA
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SU, DANIEL, MD†

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📄 23961 CALLE DE LA
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SU, DANIEL, MD†

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C1. 网络提供者名单 专科护理医生

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TEBYANI, NEYSSAN, MD†

Provider ID: N/A

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TEBYANI, NEYSSAN, MD†

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23961 CALLE DE LA
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TEBYANI, NEYSSAN, MD†

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23961 CALLE DE LA
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TEBYANI, NEYSSAN, MD†

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23961 CALLE DE LA
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TEBYANI, NEYSSAN, MD†

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23961 CALLE DE LA
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23961 CALLE DE LA
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TEBYANI, NEYSSAN, MD†

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TEBYANI, NEYSSAN, MD†

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23961 CALLE DE LA
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TEBYANI, NEYSSAN, MD†

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23961 CALLE DE LA
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Effective as of 01-MAY-21

TEBYANI, NEYSSAN, MD†

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23961 CALLE DE LA
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Effective as of 01-JAN-23

ALLERGY IMMUNOLOGY

DYER, MARC, MD

Provider ID: N/A

30131 TOWN CENTER DR
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Effective as of 01-JAN-18

DYER, MARC, MD

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Effective as of 01-JAN-13

DYER, MARC, MD

Provider ID: N/A

30131 TOWN CENTER DR
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AUDIOLOGIST

ABRAMSON, MARIA, AuD†

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28985 GOLDEN LANTERN
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ABRAMSON, MARIA, AuD†

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CERTIFIED

ACUPUNCTURIST

PARK, ERIC, LAC†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

30101 TOWN CENTER DR
STE 112
LAGUNA NIGUEL, CA 92677
Effective as of 01-OCT-22

DERMATOLOGY

KLEIN, LORRIE, MD†

Provider ID: N/A
30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677
Effective as of 01-SEP-19

KLEIN, LORRIE, MD†

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30201 GOLDEN LANTERN
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KLEIN, LORRIE, MD†

Provider ID: N/A
30201 GOLDEN LANTERN
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Effective as of 01-SEP-19

KLEIN, LORRIE, MD†

Provider ID: N/A
30201 GOLDEN LANTERN
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LAGUNA NIGUEL, CA 92677
Effective as of 01-JAN-23

KLEIN, LORRIE, MD†

Provider ID: N/A
30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677
Effective as of 01-JUL-21

LANDER, JEFFREY, MD†

Provider ID: N/A

30201 GOLDEN LANTERN
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Effective as of 01-JAN-23

LANDER, JEFFREY, MD†

Provider ID: N/A
30201 GOLDEN LANTERN
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LANDER, JEFFREY, MD†

Provider ID: N/A
30201 GOLDEN LANTERN
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LAGUNA NIGUEL, CA 92677
Effective as of 01-OCT-22

NAMI, NAVID, DO†

Provider ID: N/A
30281 GOLDEN LANTERN
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAR-22

ENDOCRINOLOGY

METABOLISM DIABETES

HAMIDI, AFSHIN, MD

Provider ID: N/A
28202 CABOT RD STE 300
LAGUNA NIGUEL, CA 92677
Effective as of 01-JUL-24

HAMIDI, AFSHIN, MD

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28202 CABOT RD STE 300
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Effective as of 01-JUL-24

NEMATI, MARYAM, MD

Provider ID: N/A
30281 GOLDEN LANTERN
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Effective as of 01-SEP-23

GASTROENTEROLOGY

ARGUELLO, JUAN, MD

Provider ID: N/A
30131 TOWN CENTER DR
STE 215
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-17

ARGUELLO, JUAN, MD

Provider ID: N/A
30131 TOWN CENTER DR
STE 215
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-17

GENERAL PRACTICE

PATEL, JYOTINKUMAR, MD†

Provider ID: N/A
30281 GOLDEN LANTERN
LAGUNA NIGUEL, CA 92677
Effective as of 01-SEP-22

INTERNAL MEDICINE

SHAHIM, ZAHRA, MD

Provider ID: N/A
32341 GOLDEN LANTERN
STE D
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-23

MEDICAL ONCOLOGY

WAGNER, EDWARD, MD

Provider ID: N/A
25500 RANCHO NIGUEL
RD STE 240
LAGUNA NIGUEL, CA 92677
Teleservice
Effective as of 01-OCT-12

NEUROLOGY CHILD

C1. 网络提供者名单 专科护理医生

GARFINKLE, REBECCA, DO

Provider ID: N/A

30131 TOWN CENTER DR
STE 245
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-14

GARFINKLE, REBECCA, DO

Provider ID: N/A

30131 TOWN CENTER DR
STE 245
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAY-14

GARFINKLE, REBECCA, DO

Provider ID: N/A

30131 TOWN CENTER DR
STE 245
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAY-24

GARFINKLE, REBECCA, DO

Provider ID: N/A

30131 TOWN CENTER DR
STE 245
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAY-24

MCINTOSH, ANDREW, MD†

Provider ID: N/A

30131 TOWN CENTER DR
STE 195
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAR-21

MCINTOSH, ANDREW, MD†

Provider ID: N/A

30131 TOWN CENTER DR
STE 195
LAGUNA NIGUEL, CA 92677
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MCINTOSH, ANDREW, MD†

Provider ID: N/A

30131 TOWN CENTER DR

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MCINTOSH, ANDREW, MD†

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30131 TOWN CENTER DR
STE 195
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PRZEKLASA AUTH, MELISSA, MD†

Provider ID: N/A

30131 TOWN CENTER DR
STE 237
LAGUNA NIGUEL, CA 92677
Effective as of 01-SEP-19

PRZEKLASA AUTH, MELISSA, MD†

Provider ID: N/A

30131 TOWN CENTER DR
STE 237
LAGUNA NIGUEL, CA 92677
Effective as of 01-SEP-19

PEDIATRIC ALLERGY / IMMUNOLOGY

DYER, MARC, MD

Provider ID: N/A

30131 TOWN CENTER DR
STE 120
LAGUNA NIGUEL, CA 92677
Effective as of 01-JAN-21

PODIATRIST

COX, MATTHEW, DPM

Provider ID: N/A

30001 TOWN CENTER DR
STE E2
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Effective as of 01-JAN-18

PSYCHOLOGIST

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

30131 TOWN CENTER DR
STE 268
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAR-15

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

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Effective as of 01-MAR-15

ENGELMAN, SUZANNE, PhD

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30100 CROWN VALLEY
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ENGELMAN, SUZANNE, PhD

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30100 CROWN VALLEY
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ENGELMAN, SUZANNE, PhD

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30100 CROWN VALLEY
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ENGELMAN, SUZANNE, PhD

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ENGELMAN, SUZANNE, PhD

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ENGELMAN, SUZANNE, PhD

Provider ID: N/A

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FAMILY PRACTICE SPORTS MEDICINE

GRAHAM, SCOTT, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-FEB-22

VENEZIANO, CHRISTOPHER, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
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92637
Effective as of 01-FEB-23

VENEZIANO, CHRISTOPHER, MD†

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92637
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PHYSICIANS ASSISTANT

BOW, LINDA, PA†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200

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92637

Effective as of 01-SEP-23

NGUYEN, TONY, PA†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-AUG-22

NGUYEN, TONY, PA†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
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Effective as of 01-AUG-22

PODIATRIST

BATHAEE, FARSHAD, DPM

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☐ 24331 EL TORO RD STE 370
LAGUNA WOODS, CA
92637
Effective as of 01-JAN-18

BATHAEE, FARSHAD, DPM

Provider ID: N/A

☐ 24331 EL TORO RD STE 370
LAGUNA WOODS, CA
92637
Effective as of 01-JAN-17

BATHAEE, FARSHAD, DPM

Provider ID: N/A

☐ 24331 EL TORO RD STE 370
LAGUNA WOODS, CA
92637
Effective as of 01-DEC-21

ROOHIAN, ARSHIA, DPM

Provider ID: N/A

☐ 24331 EL TORO RD STE 370
LAGUNA WOODS, CA

92637

Effective as of 01-DEC-21

ROOHIAN, ARSHIA, DPM

Provider ID: N/A

☐ 24331 EL TORO RD STE 370
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92637
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REGISTERED PHYSICAL THERAPIST

FRESHMAN, JANELLE, PT†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-FEB-23

FRESHMAN, JANELLE, PT†

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☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-OCT-23

PARK, JOSEPH, PT

Provider ID: N/A

☐ 24361 EL TORO RD STE 140
LAGUNA WOODS, CA
92637
Effective as of 01-OCT-23

SURGERY HAND ORTHOPEDIC

KIM, ABRAHAM, MD†

Provider ID: N/A

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Effective as of 01-MAY-22

SURGERY ORTHOPEDIC

C1. 网络提供者名单

专科护理医生

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
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Effective as of 01-JUN-24

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
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92637

Effective as of 01-AUG-11

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
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Effective as of 01-OCT-22

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
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92637

Effective as of 01-OCT-22

AMINIAN, ARASH, MD†

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24331 EL TORO RD STE 200
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Effective as of 01-MAY-12

AMINIAN, ARASH, MD†

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24331 EL TORO RD STE 200
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Effective as of 01-NOV-14

AMINIAN, ARASH, MD†

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24331 EL TORO RD STE 200
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Effective as of 01-DEC-21

AMINIAN, ARASH, MD†

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24331 EL TORO RD STE 200
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Effective as of 01-DEC-14

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24331 EL TORO RD STE 200
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GRAHAM, SCOTT, MD†

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Effective as of 01-SEP-23

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Effective as of 01-FEB-21

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-22

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-24

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-24

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-24

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-24

GRAHAM, SCOTT, MD†

C1. 网络提供者名单

专科护理医生

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-18

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-22

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JUN-24

GURBANI, AJAY, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-23

GURBANI, AJAY, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-23

GURBANI, AJAY, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-23

GURBANI, AJAY, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA

92637

Effective as of 01-SEP-23

JOHNSON, BRYCE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

JOHNSON, BRYCE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

JOHNSON, BRYCE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-18

JOHNSON, BRYCE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-21

JOHNSON, BRYCE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JUN-24

JOHNSON, BRYCE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAY-24

JOHNSON, BRYCE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAY-24

JOHNSON, BRYCE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

KADAKIA, NIMISH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JUN-24

KADAKIA, NIMISH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

KADAKIA, NIMISH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

KIM, ABRAHAM, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

KIM, ABRAHAM, MD†

Provider ID: N/A

24331 EL TORO RD STE 200

C1. 网络提供者名单 专科护理医生

LAGUNA WOODS, CA
92637

Effective as of 01-SEP-18

KIM, ABRAHAM, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-20

KIM, ABRAHAM, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-23

KIM, ABRAHAM, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-20

KIM, ABRAHAM, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-18

KIM, ABRAHAM, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

KIM, ABRAHAM, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

KIM, ABRAHAM, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JUN-23

KIM, ABRAHAM, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JUN-23

KIM, ABRAHAM, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JUN-24

KIM, ABRAHAM, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-18

KIM, ABRAHAM, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-23

KIM, ABRAHAM, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

KIM, ABRAHAM, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-APR-24

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-APR-24

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-JUN-24

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-JAN-24

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-JAN-24

C1. 网络提供者名单 专科护理医生

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-JAN-24

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-JAN-24

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA

92637

Teleservice

Effective as of 01-DEC-23

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-11

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-18

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JUN-24

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-APR-11

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAY-22

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAY-12

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAY-22

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

PATEL, AMAR, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

PATEL, AMAR, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

PATEL, AMAR, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

PATEL, AMAR, MD

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

PYRKO, PETER, MD


Provider ID: N/A

 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-23

TOCCI, STEPHEN, MD†


Provider ID: N/A

 24310 MOULTON PKWY
STE O563
LAGUNA WOODS, CA
92637

Effective as of 01-JUL-12

TOCCI, STEPHEN, MD†


Provider ID: N/A

 24310 MOULTON PKWY
STE O563
LAGUNA WOODS, CA
92637

Effective as of 01-JUL-12

VENEZIANO, CHRISTOPHER, MD†


Provider ID: N/A

 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

VENEZIANO, CHRISTOPHER, MD†

Provider ID: N/A


 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-21

VENEZIANO, CHRISTOPHER,

MD†


Provider ID: N/A

 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

VENEZIANO, CHRISTOPHER, MD†


Provider ID: N/A

 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

VENEZIANO, CHRISTOPHER, MD†


Provider ID: N/A

 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-23

VENEZIANO, CHRISTOPHER, MD†


Provider ID: N/A

 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-23

VENEZIANO, CHRISTOPHER, MD†

Provider ID: N/A

 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

VENEZIANO, CHRISTOPHER, MD†

Provider ID: N/A

 24331 EL TORO RD STE 200
LAGUNA WOODS, CA

92637

Effective as of 01-OCT-11

VENEZIANO, CHRISTOPHER, MD†


Provider ID: N/A

 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JUN-24

VENEZIANO, CHRISTOPHER, MD†


Provider ID: N/A

 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-21

VENEZIANO, CHRISTOPHER, MD†


Provider ID: N/A

 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-21

VENEZIANO, CHRISTOPHER, MD†


Provider ID: N/A

 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

VENEZIANO, CHRISTOPHER, MD†

Provider ID: N/A

 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

WONG, JEFFREY, MD†

C1. 网络提供者名单
专科护理医生

Provider ID: N/A  24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-AUG-19	92637 Effective as of 01-MAR-16	LAKE ELSINORE, CA 92532 Effective as of 01-JUN-17
WONG, JEFFREY, MD† Provider ID: N/A  24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-DEC-21	YOUDERIAN, ARI, MD† Provider ID: N/A  24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-MAR-16	QASQAS, SHADI, MD† Provider ID: N/A  31571 CANYON ESTATES DR STE 228 LAKE ELSINORE, CA 92532 Effective as of 01-MAR-21
WONG, JEFFREY, MD† Provider ID: N/A  24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-DEC-21	YOUDERIAN, ARI, MD† Provider ID: N/A  24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-FEB-15	QASQAS, SHADI, MD† Provider ID: N/A  31571 CANYON ESTATES DR STE 228 LAKE ELSINORE, CA 92532 Effective as of 01-JAN-17
WONG, JEFFREY, MD† Provider ID: N/A  24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-DEC-21	YOUDERIAN, ARI, MD† Provider ID: N/A  24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-FEB-21	QASQAS, SHADI, MD† Provider ID: N/A  31571 CANYON ESTATES DR STE 228 LAKE ELSINORE, CA 92532 Effective as of 01-MAY-15
YOUDERIAN, ARI, MD† Provider ID: N/A  24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-JAN-18	YOUDERIAN, ARI, MD† Provider ID: N/A  24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-FEB-15	QASQAS, SHADI, MD† Provider ID: N/A  31571 CANYON ESTATES DR STE 228 LAKE ELSINORE, CA 92532 Effective as of 01-MAY-15
YOUDERIAN, ARI, MD† Provider ID: N/A  24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-DEC-21	YOUDERIAN, ARI, MD† Provider ID: N/A  24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-SEP-23	QASQAS, SHADI, MD† Provider ID: N/A  31571 CANYON ESTATES DR STE 228 LAKE ELSINORE, CA 92532 Effective as of 01-JUL-21
YOUDERIAN, ARI, MD† Provider ID: N/A  24331 EL TORO RD STE 200 LAGUNA WOODS, CA	CARDIOVASCULAR DISEASE QASQAS, SHADI, MD† Provider ID: N/A  31571 CANYON ESTATES DR STE 228	QASQAS, SHADI, MD† Provider ID: N/A  31571 CANYON ESTATES DR STE 228 LAKE ELSINORE, CA 92532 Effective as of 01-JUL-21

C1. 网络提供者名单
专科护理医生

***CERTIFIED NURSE
PRACTITIONER***

AGORRILLA, MARIA, NP

Provider ID: N/A

☐ 31736 MISSION TRL STE G
LAKE ELSINORE, CA 92530
Effective as of 01-OCT-23

HARRIS, PAMELA, NP

Provider ID: N/A

☐ 31361 RIVERSIDE DR
LAKE ELSINORE, CA 92530*
Effective as of 01-OCT-24

HERNANDEZ, JESSICA, NP

Provider ID: N/A

☐ 31361 RIVERSIDE DR
LAKE ELSINORE, CA 92530*
Effective as of 01-OCT-24

HOWELL, AMANDA, NP

Provider ID: N/A

☐ 31361 RIVERSIDE DR
LAKE ELSINORE, CA 92530*
Effective as of 01-OCT-24

HUERTA, STEVEN, NP

Provider ID: N/A

☐ 31361 RIVERSIDE DR
LAKE ELSINORE, CA 92530*
Effective as of 01-OCT-24

VALENZUELA, CANDACE, NP

Provider ID: N/A

☐ 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-24

CHIROPRACTOR

HERNANDEZ, MARCO, DC

Provider ID: N/A

☐ 30195 FRASER DR

LAKE ELSINORE, CA 92530
Effective as of 01-FEB-24

HERNANDEZ, MARCO, DC

Provider ID: N/A

☐ 30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-FEB-24

HERNANDEZ, MARCO, DC

Provider ID: N/A

☐ 30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-FEB-24

HERNANDEZ, MARCO, DC

Provider ID: N/A

☐ 30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-FEB-24

HERNANDEZ, MARCO, DC

Provider ID: N/A

☐ 30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-FEB-24

JU, NATHANIEL, DC†

Provider ID: N/A

☐ 30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

***FEMALE PELVIC MED AND
RECONSTRUCTIVE SURG***

KAAKI, BILAL, MD†

Provider ID: N/A

☐ 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-22

INTERNAL MEDICINE

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

☐ 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-OCT-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

☐ 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-NOV-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

☐ 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-NOV-20

MAHESHWARI, ANOOP, MD†

Provider ID: N/A

☐ 31571 CANYON ESTATES DR
STE 219
LAKE ELSINORE, CA 92532
Effective as of 01-MAY-15

YU, JERRY, MD†

Provider ID: N/A

☐ 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-DEC-23

YU, JERRY, MD†

Provider ID: N/A

☐ 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

YU, JERRY, MD†

Provider ID: N/A

☐ 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

YU, JERRY, MD†

Provider ID: N/A

☐ 425 DIAMOND DR STE 102

C1. 网络提供者名单

专科护理医生

LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

INTERVENTIONAL CARDIOLOGY

ATTIA, NADER, DO[†]

Provider ID: N/A

31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532
Effective as of 01-JAN-19

MESSENGER, BRADLEY, MD[†]

Provider ID: N/A

31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532
Effective as of 01-JAN-19

PAREKH, NIRAJ, MD[†]

Provider ID: N/A

31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532
Effective as of 01-SEP-24

PATANKAR, KAUSTUBH, MD[†]

Provider ID: N/A

31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532
Effective as of 01-JAN-19

SANGODKAR, SANDEEP, DO[†]

Provider ID: N/A

31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532
Effective as of 01-JAN-19

NEPHROLOGY

AKPOROTU, AKPOBO, MD

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-24

ALTRIKI, MOHAMAD, MD[†]

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-FEB-20

ALTRIKI, MOHAMAD, MD[†]

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-JAN-20

CHANG, DAVID, MD[†]

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-DEC-23

CHANG, DAVID, MD[†]

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

CHANG, DAVID, MD[†]

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

CHANG, DAVID, MD[†]

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

OBSTETRICS / GYNECOLOGY

FRANCIS, LARRY, MD

Provider ID: N/A

31361 RIVERSIDE DR
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-24

FRANCIS, LARRY, MD[†]

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-DEC-22

FRANCIS, LARRY, MD[†]

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-DEC-22

FRANCIS, LARRY, MD[†]

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

GOMEZ, GUILLERMO, MD[†]

Provider ID: N/A

141 N MAIN ST
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-21

GOMEZ, GUILLERMO, MD[†]

Provider ID: N/A

141 N MAIN ST
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-21

GOMEZ, GUILLERMO, MD[†]

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-24

GOMEZ, GUILLERMO, MD[†]

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-21

C1. 网络提供者名单

专科护理医生

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-21

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24

KAAKI, BILAL, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-24

REY, RODOLFO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24

REY, RODOLFO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-SEP-23

REY, RODOLFO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-NOV-22

REY, RODOLFO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24

REY, RODOLFO, MD†

Provider ID: N/A

141 N MAIN ST
LAKE ELSINORE, CA 92530
Effective as of 01-JAN-21

VADAPARAMPIL, JANET, MD†

Provider ID: N/A

141 N MAIN ST
LAKE ELSINORE, CA 92530
Effective as of 01-JAN-21

VADAPARAMPIL, JANET, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24

VADAPARAMPIL, JANET, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24

VADAPARAMPIL, JANET, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24

VADAPARAMPIL, JANET, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JAN-21

VADAPARAMPIL, JANET, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-24

OPTOMETRIST

GEE, JENNIFER, OD

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

MORA, WENDY, OD

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

RICH, RYAN, OD

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

TAM, EMILY, OD

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

PHYSICIANS ASSISTANT

FATHI, NAGHMEH, PA

Provider ID: N/A

31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532
Effective as of 01-MAY-19

RUIZ-FLORES, ROSE, PA

Provider ID: N/A

425 DIAMOND DR STE 105

C1. 网络提供者名单 专科护理医生

LAKE ELSINORE, CA 92530
Effective as of 01-SEP-23

PULMONARY DISEASES

MAHESHWARI, ANOOP, MD†

Provider ID: N/A

☞ 31571 CANYON ESTATES DR
STE 219

LAKE ELSINORE, CA 92532
Effective as of 01-MAY-15

MAHESHWARI, ANOOP, MD†

Provider ID: N/A

☞ 31571 CANYON ESTATES DR
STE 219

LAKE ELSINORE, CA 92532
Effective as of 01-JUL-24

MAHESHWARI, ANOOP, MD†

Provider ID: N/A

☞ 31571 CANYON ESTATES DR
STE 219

LAKE ELSINORE, CA 92532
Effective as of 01-AUG-13

MAHESHWARI, ANOOP, MD†

Provider ID: N/A

☞ 31571 CANYON ESTATES DR
STE 219

LAKE ELSINORE, CA 92532
Effective as of 01-AUG-14

REGISTERED PHYSICAL THERAPIST

CASTELLON, SHAWN, PT

Provider ID: N/A

☞ 425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530

Effective as of 01-JUL-23

CASTELLON, SHAWN, PT

Provider ID: N/A

☞ 425 DIAMOND DR STE 101

LAKE ELSINORE, CA 92530
Effective as of 01-JUL-23

DUPLECHAN, LAWRENCE, PT

Provider ID: N/A

☞ 425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530

Effective as of 01-MAY-23

DUPLECHAN, LAWRENCE, PT

Provider ID: N/A

☞ 425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530

Effective as of 01-MAY-23

EDDOW, JIM, PT†

Provider ID: N/A

☞ 425 DIAMOND DR
LAKE ELSINORE, CA 92530

Effective as of 01-MAY-17

EDDOW, JIM, PT†

Provider ID: N/A

☞ 425 DIAMOND DR
LAKE ELSINORE, CA 92530

Effective as of 01-MAY-17

EDDOW, JIM, PT†

Provider ID: N/A

☞ 425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530

Effective as of 01-AUG-20

PLASTER, WHITNEY, PT

Provider ID: N/A

☞ 425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530

Effective as of 01-MAR-23

PLASTER, WHITNEY, PT

Provider ID: N/A

☞ 425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530

Effective as of 01-MAR-23

TSAI, CHIAHONG, PT

Provider ID: N/A

☞ 425 DIAMOND DR STE
101ST

LAKE ELSINORE, CA 92530
Effective as of 01-NOV-23

TSAI, CHIAHONG, PT

Provider ID: N/A

☞ 425 DIAMOND DR STE
101ST

LAKE ELSINORE, CA 92530
Effective as of 01-NOV-23

VARGHESE, ROSHAN, PT

Provider ID: N/A

☞ 425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530

Effective as of 01-MAY-24

VARGHESE, ROSHAN, PT

Provider ID: N/A

☞ 425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530

Effective as of 01-MAY-24

CERTIFIED

ACUPUNCTURIST

KIM, ILWHA, LAC

Provider ID: N/A

☞ 23331 EL TORO RD STE 107
LAKE FOREST, CA 92630

Effective as of 01-AUG-23

WEON, SUK KYENG, LAC

Provider ID: N/A

☞ 23361 EL TORO RD STE 112
LAKE FOREST, CA 92630

Effective as of 01-FEB-22

CERTIFIED NURSE PRACTITIONER

C1. 网络提供者名单 专科护理医生

DO, JOCELYN, NP

Provider ID: N/A

📍 26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-MAY-24

TRAN, STEPHANIE, NP

Provider ID: N/A

📍 26501 RANCHO PKWY S
STE 301
LAKE FOREST, CA 92630
Effective as of 01-MAY-24

TRAN, STEPHANIE, NP

Provider ID: N/A

📍 26501 RANCHO PKWY S
STE 301
LAKE FOREST, CA 92630
Effective as of 01-MAR-24

TRAN, STEPHANIE, NP

Provider ID: N/A

📍 26501 RANCHO PKWY S
STE 301
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DERMATOLOGY

BELL, IRA, MD†

Provider ID: N/A

📍 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-NOV-18

BELL, IRA, MD†

Provider ID: N/A

📍 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BELL, IRA, MD†

Provider ID: N/A

📍 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BELL, IRA, MD†

Provider ID: N/A

📍 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BELL, IRA, MD†

Provider ID: N/A

📍 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BELL, IRA, MD†

Provider ID: N/A

📍 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BELL, IRA, MD†

Provider ID: N/A

📍 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BELL, IRA, MD†

Provider ID: N/A

📍 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-APR-23

BELL, IRA, MD†

Provider ID: N/A

📍 23832 ROCKFIELD BLVD
STE 210

LAKE FOREST, CA 92630
Effective as of 01-DEC-18

BELL, IRA, MD†

Provider ID: N/A

📍 23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

BENIK, KAREN, MD†

Provider ID: N/A

📍 23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

BENIK, KAREN, MD†

Provider ID: N/A

📍 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-APR-23

BENIK, KAREN, MD†

Provider ID: N/A

📍 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

BENIK, KAREN, MD†

Provider ID: N/A

📍 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

BENIK, KAREN, MD†

Provider ID: N/A

📍 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

C1. 网络提供者名单 专科护理医生

BENIK, KAREN, MD[†]

Provider ID: N/A

☒ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

BENIK, KAREN, MD[†]

Provider ID: N/A

☒ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-FEB-19

BENIK, KAREN, MD[†]

Provider ID: N/A

☒ 23832 ROCKFIELD BLVD
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LAKE FOREST, CA 92630
Effective as of 01-JUL-21

BENIK, KAREN, MD[†]

Provider ID: N/A

☒ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

BENIK, KAREN, MD[†]

Provider ID: N/A

☒ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-NOV-18

MESHKINPOUR, AZIN, MD[†]

Provider ID: N/A

☒ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-NOV-18

MESHKINPOUR, AZIN, MD[†]

Provider ID: N/A

☒ 23832 ROCKFIELD BLVD

STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

MESHKINPOUR, AZIN, MD[†]

Provider ID: N/A

☒ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

MESHKINPOUR, AZIN, MD[†]

Provider ID: N/A

☒ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

MESHKINPOUR, AZIN, MD[†]

Provider ID: N/A

☒ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

MESHKINPOUR, AZIN, MD[†]

Provider ID: N/A

☒ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

MESHKINPOUR, AZIN, MD[†]

Provider ID: N/A

☒ 23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

MESHKINPOUR, AZIN, MD[†]

Provider ID: N/A

☒ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD[†]

Provider ID: N/A

☒ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD[†]

Provider ID: N/A

☒ 23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD[†]

Provider ID: N/A

☒ 23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD[†]

Provider ID: N/A

☒ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD[†]

Provider ID: N/A

☒ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD[†]

Provider ID: N/A

☒ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD[†]

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-NOV-19

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630

Effective as of 01-NOV-18

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-SEP-22

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-OCT-18

EMERGENCY MEDICINE

KENNEDY, GREGORY, MD

Provider ID: N/A

23321 EL TORO RD STE F
LAKE FOREST, CA 92630
Effective as of 01-MAY-24

ENDOCRINOLOGY

METABOLISM DIABETES

KRISHNAN, PRIYANKA, MD

Provider ID: N/A

23331 EL TORO RD STE 102
LAKE FOREST, CA 92630
Effective as of 01-AUG-21

KRISHNAN, PRIYANKA, MD

Provider ID: N/A

23331 EL TORO RD STE 102
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

GASTROENTEROLOGY

ASHRAF, HEBA, MD

Provider ID: N/A

25982 PALA
STE 140

LAKE FOREST, CA 92691
Effective as of 01-JUN-24

ASHRAF, HEBA, MD

Provider ID: N/A

25982 PALA
STE 140
LAKE FOREST, CA 92691
Effective as of 01-JUN-24

ASHRAF, HEBA, MD

Provider ID: N/A

25982 PALA
STE 140
LAKE FOREST, CA 92691
Effective as of 01-JUN-24

ASHRAF, HEBA, MD

Provider ID: N/A

25982 PALA
STE 140
LAKE FOREST, CA 92691
Effective as of 01-JUN-24

CHOI, DAVID, DO†

Provider ID: N/A

26672 PORTOLA PKWY STE
104
LAKE FOREST, CA 92610
Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

26672 PORTOLA PKWY STE
104
LAKE FOREST, CA 92610
Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

26672 PORTOLA PKWY STE
104
LAKE FOREST, CA 92610
Effective as of 01-JUL-22

C1. 网络提供者名单 专科护理医生

CHOI, DAVID, DO[†]

Provider ID: N/A

☐ 26672 PORTOLA PKWY STE
104
LAKE FOREST, CA 92610
Effective as of 01-JUL-22

CHOI, DAVID, DO[†]

Provider ID: N/A

☐ 26672 PORTOLA PKWY STE
104
LAKE FOREST, CA 92610
Effective as of 01-JAN-23

CHOI, DAVID, DO[†]

Provider ID: N/A

☐ 26672 PORTOLA PKWY STE
104
LAKE FOREST, CA 92610
Effective as of 01-OCT-23

JAMAL, MOHAMMAD, MD[†]

Provider ID: N/A

☐ 26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-OCT-22

JAMAL, MOHAMMAD, MD[†]

Provider ID: N/A

☐ 26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-JUN-24

JAMAL, MOHAMMAD, MD[†]

Provider ID: N/A

☐ 26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-MAY-24

JAMAL, MOHAMMAD, MD[†]

Provider ID: N/A

☐ 26501 RANCHO PKWY S

STE 103

LAKE FOREST, CA 92630

Effective as of 01-JUN-24

JAMAL, MOHAMMAD, MD[†]

Provider ID: N/A

☐ 26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-APR-23

JAMAL, MOHAMMAD, MD[†]

Provider ID: N/A

☐ 26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-APR-24

JAMAL, MOHAMMAD, MD[†]

Provider ID: N/A

☐ 26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-APR-23

JECMENICA, MLADEN, MD[†]

Provider ID: N/A

☐ 26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-JAN-23

JECMENICA, MLADEN, MD[†]

Provider ID: N/A

☐ 26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-JAN-23

JECMENICA, MLADEN, MD[†]

Provider ID: N/A

☐ 26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-JUN-22

JECMENICA, MLADEN, MD[†]

Provider ID: N/A

☐ 26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-JUN-24

JECMENICA, MLADEN, MD[†]

Provider ID: N/A

☐ 26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-JUN-24

JECMENICA, MLADEN, MD[†]

Provider ID: N/A

☐ 26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-MAY-24

JECMENICA, MLADEN, MD[†]

Provider ID: N/A

☐ 26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-DEC-23

JECMENICA, MLADEN, MD[†]

Provider ID: N/A

☐ 26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-DEC-23

JECMENICA, MLADEN, MD[†]

Provider ID: N/A

☐ 26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-DEC-23

JECMENICA, MLADEN, MD[†]

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-APR-23

JECMENICA, MLADEN, MD†
Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-DEC-23

JECMENICA, MLADEN, MD†
Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-DEC-23

JECMENICA, MLADEN, MD†
Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-DEC-23

SZU, ERIC, MD

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-MAY-24

SZU, ERIC, MD

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

SZU, ERIC, MD

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630

Effective as of 01-OCT-23

SZU, ERIC, MD

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-FEB-23

GYNECOLOGY

WALLACE, PATRICIA, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY
STE 381
LAKE FOREST, CA 92691
Effective as of 01-FEB-24

INTERNAL MEDICINE

CHEN, MAY, MD

Provider ID: N/A

22621 LAKE FOREST DR STE
D1
LAKE FOREST, CA 92630
Effective as of 01-APR-23

CHEN, MAY, MD

Provider ID: N/A

22621 LAKE FOREST DR STE
D1
LAKE FOREST, CA 92630
Effective as of 01-APR-23

NEUROLOGY

NIK, ANDREW, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY
STE 320
LAKE FOREST, CA 92691
Effective as of 01-MAY-24

NIK, ANDREW, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY
STE 320
LAKE FOREST, CA 92691
Effective as of 01-MAY-24

OPHTHALMOLOGY

FAZILAT, GOLAREH, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 150
LAKE FOREST, CA 92630
Effective as of 01-NOV-18

FAZILAT, GOLAREH, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 150
LAKE FOREST, CA 92630
Effective as of 01-JAN-21

FAZILAT, GOLAREH, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 150
LAKE FOREST, CA 92630
Effective as of 01-APR-21

FAZILAT, GOLAREH, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 150
LAKE FOREST, CA 92630
Effective as of 01-APR-21

OPTOMETRIST

WELLS, MARY, OD†

Provider ID: N/A

23591 EL TORO RD STE 145
LAKE FOREST, CA 92630
Effective as of 01-JAN-18

C1. 网络提供者名单 专科护理医生

WELLS, MARY, OD[†]

Provider ID: N/A

23591 EL TORO RD STE 145
LAKE FOREST, CA 92630
Effective as of 01-JAN-17

PHYSICIANS ASSISTANT

ANASTASIU, DANIELLE, PA[†]

Provider ID: N/A

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

ANASTASIU, DANIELLE, PA[†]

Provider ID: N/A

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

ANASTASIU, DANIELLE, PA[†]

Provider ID: N/A

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

DELEON, ROBERT, PA[†]

Provider ID: N/A

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

DELEON, ROBERT, PA[†]

Provider ID: N/A

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

DELEON, ROBERT, PA[†]

Provider ID: N/A

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

KIM, JANE, PA

Provider ID: N/A

25982 PALA
STE 140
LAKE FOREST, CA 92691
Effective as of 01-JUN-24

VU, BAO-KHOI, PA

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-MAY-24

WHITNEY, LESLIE, PA

Provider ID: N/A

25982 PALA
STE 140
LAKE FOREST, CA 92691
Effective as of 01-JUN-24

WHITNEY, LESLIE, PA

Provider ID: N/A

25982 PALA
STE 140
LAKE FOREST, CA 92691
Effective as of 01-AUG-24

WHITNEY, LESLIE, PA

Provider ID: N/A

25982 PALA
STE 140
LAKE FOREST, CA 92691
Effective as of 01-AUG-24

WU, VANNA, PA

Provider ID: N/A

25982 PALA
STE 140
LAKE FOREST, CA 92691

Effective as of 01-JUN-24

PSYCHIATRY

DESILVA, GAYANI, MD[†]

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

DESILVA, GAYANI, MD[†]

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

DESILVA, GAYANI, MD[†]

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD[†]

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD[†]

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD[†]

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

C1. 网络提供者名单 专科护理医生

DESILVA, GAYANI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

JAKKULA, JAGAN, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-SEP-19

JAKKULA, JAGAN, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-SEP-19

JAKKULA, JAGAN, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD

STE 131
LAKE FOREST, CA 92630
Effective as of 01-MAR-21

JAKKULA, JAGAN, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-SEP-19

JAKKULA, JAGAN, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-SEP-19

JAKKULA, JAGAN, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-MAR-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-NOV-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-NOV-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

RAJPOOT, DEEPAK, MD[†]

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-FEB-22

RAJPOOT, DEEPAK, MD[†]

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-FEB-22

RAJPOOT, DEEPAK, MD[†]

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-FEB-22

RAJPOOT, DEEPAK, MD[†]

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-FEB-22

PSYCHOLOGIST

KANG, EILEEN, PhD

Provider ID: N/A

13 ORCHARD STE 103
LAKE FOREST, CA 92630
Effective as of 01-MAY-15

KANG, EILEEN, PhD

Provider ID: N/A

13 ORCHARD STE 103
LAKE FOREST, CA 92630

Effective as of 01-MAY-15

REGISTERED PHYSICAL THERAPIST

BECKER GALUSHA, JANE, PT

Provider ID: N/A

22821 LAKE FOREST DR STE
100
LAKE FOREST, CA 92630
Effective as of 01-MAY-20

SPEECH PATHOLOGIST

MARSDEN, CLAIRE, SP

Provider ID: N/A

22672 LAMBERT ST STE 611
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP

Provider ID: N/A

22672 LAMBERT ST STE 611
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP

Provider ID: N/A

22672 LAMBERT ST STE 612
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP

Provider ID: N/A

22672 LAMBERT ST STE 612
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP

Provider ID: N/A

22672 LAMBERT ST STE 611
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP

Provider ID: N/A

22672 LAMBERT ST STE 612
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP

Provider ID: N/A

22672 LAMBERT ST STE 612
LAKE FOREST, CA 92630
Effective as of 01-JUN-24

MARSDEN, CLAIRE, SP

Provider ID: N/A

22672 LAMBERT ST STE 611
LAKE FOREST, CA 92630
Effective as of 01-JUN-24

UROLOGY

CHUANG, KAI-WEN, MD

Provider ID: N/A

26691 PLAZA
STE 130
LAKE FOREST, CA 92691
Effective as of 01-JAN-24

CHIROPRACTOR

CASTRO, DAVID, DC

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-JAN-23

FULKS, ZACKARY, DC

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-MAY-23

MANSOUR, RASHAD, DC

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-MAR-23

C1. 网络提供者名单 专科护理医生

MCCOWN, BARRY, DC

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-DEC-23

ZECHA, RONALD, DC

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-JUL-22

FAMILY PRACTICE

PATEL, RAKESH, MD

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-AUG-24

PSYCHIATRY

LIU-BARBARO, DOROTHY, MD

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-JAN-24

LIU-BARBARO, DOROTHY, MD

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-NOV-22

LIU-BARBARO, DOROTHY, MD

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-NOV-22

LIU-BARBARO, DOROTHY, MD

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040

Effective as of 01-JAN-24

PSYCHOLOGIST

BRUNETTO, HEIDI, PSYD

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040*
Effective as of 01-JAN-24

BRUNETTO, HEIDI, PSYD

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040*
Effective as of 01-JAN-24

ANESTHESIOLOGY

GUIANG, RAINIER, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-SEP-19

HYUN, SUZANNE, MD

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAR-24

PANG, GARY, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAR-24

PANG, GARY, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-SEP-19

ANESTHESIOLOGY PAIN MANAGEMENT

CHEN, HAMILTON, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-SEP-19

CHEN, HAMILTON, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAY-21

CHEN, HAMILTON, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-SEP-19

GUIANG, RAINIER, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAR-24

GUIANG, RAINIER, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAY-21

GUIANG, RAINIER, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-JUL-24

HYUN, SUZANNE, MD

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-JUL-24

PANG, GARY, MD†

Provider ID: N/A

27990 SHERMAN RD

C1. 网络提供者名单 专科护理医生

MENIFEE, CA 92585
Effective as of 01-JUL-24

PANG, GARY, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAY-21

CARDIOVASCULAR DISEASE

ALFAY, WISAM, MD

Provider ID: N/A

26960 CHERRY HILLS
BLVD STE C
MENIFEE, CA 92586
Effective as of 01-JAN-22

ALFAY, WISAM, MD

Provider ID: N/A

26960 CHERRY HILLS
BLVD STE C
MENIFEE, CA 92586
Effective as of 01-MAR-22

TIWARI, RATAN, MD

Provider ID: N/A

26960 CHERRY HILLS
BLVD STE A
MENIFEE, CA 92586
Effective as of 01-JUL-24

CERTIFIED NURSE PRACTITIONER

LUCACI, BIANCA, NP

Provider ID: N/A

29826 HAUN RD STE 300
MENIFEE, CA 92586
Effective as of 01-APR-23

MELOT, KAREN, NP

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-DEC-20

MELOT, KAREN, NP

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-20

MELOT, KAREN, NP

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-20

NGUYEN, ANDY, NP

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-23

NGUYEN, ANDY, NP

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-23

NGUYEN, ANDY, NP

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-23

PAULHUS, PATRICIA, NP†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

PAULHUS, PATRICIA, NP†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-DEC-20

PAULHUS, PATRICIA, NP†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-MAR-21

PAULHUS, PATRICIA, NP†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

PAULHUS, PATRICIA, NP†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

PAULHUS, PATRICIA, NP†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

SERAILE, KIRSTEN, NP

Provider ID: N/A

29826 HAUN RD STE 204
MENIFEE, CA 92586
Effective as of 01-MAY-22

SERAILE, KIRSTEN, NP

Provider ID: N/A

29826 HAUN RD STE 204
MENIFEE, CA 92586
Effective as of 01-MAY-22

VAHDAT, VALERIE, NP

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-JUN-24

VIERA, LIANA, NP†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

☒ 29826 HAUN RD STE 300
MENIFEE, CA 92586
Effective as of 01-JAN-22

VIERA, LIANA, NP†

Provider ID: N/A

☒ 29826 HAUN RD STE 300
MENIFEE, CA 92586
Effective as of 01-JAN-22

CHIROPRACTOR

FARSHLER, ANTHONY, DC†

Provider ID: N/A

☒ 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-JUL-22

SHERIDAN, SHANE, DC

Provider ID: N/A

☒ 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-JUL-22

DERMATOLOGY

JACOBS, RANDOLPH, MD

Provider ID: N/A

☒ 28120 BRADLEY RD
MENIFEE, CA 92586
Effective as of 01-DEC-18

JACOBS, RANDOLPH, MD

Provider ID: N/A

☒ 28120 BRADLEY RD
MENIFEE, CA 92586
Effective as of 01-AUG-24

JACOBS, RANDOLPH, MD

Provider ID: N/A

☒ 28120 BRADLEY RD
MENIFEE, CA 92586

Effective as of 01-JAN-18

JACOBS, RANDOLPH, MD

Provider ID: N/A

☒ 28120 BRADLEY RD
MENIFEE, CA 92586
Effective as of 01-JAN-18

JACOBS, RANDOLPH, MD

Provider ID: N/A

☒ 28120 BRADLEY RD
MENIFEE, CA 92586
Effective as of 01-AUG-24

KOUPAIE, JAFAR, MD

Provider ID: N/A

☒ 29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-JUL-24

KOUPAIE, JAFAR, MD

Provider ID: N/A

☒ 29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-MAY-24

MITCHELL, JESSE, MD†

Provider ID: N/A

☒ 29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-JUL-21

MITCHELL, JESSE, MD†

Provider ID: N/A

☒ 29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-JUL-21

MITCHELL, JESSE, MD†

Provider ID: N/A

☒ 29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-AUG-18

MITCHELL, JESSE, MD†

Provider ID: N/A

☒ 29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-JUL-24

MITCHELL, JESSE, MD†

Provider ID: N/A

☒ 29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-AUG-18

MITCHELL, JESSE, MD†

Provider ID: N/A

☒ 29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-AUG-18

MITCHELL, JESSE, MD†

Provider ID: N/A

☒ 29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-AUG-18

ENDOCRINOLOGY

METABOLISM DIABETES

HAIDER, UZMA, MD†

Provider ID: N/A

☒ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-DEC-20

HAIDER, UZMA, MD†

Provider ID: N/A

☒ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JUL-21

HAIDER, UZMA, MD†

Provider ID: N/A

☒ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-DEC-20

HAIDER, UZMA, MD†

C1. 网络提供者名单

专科护理医生

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-23

HAIDER, UZMA, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-APR-24

HAIDER, SHANZAY, MD

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-MAR-24

HAIDER, SHANZAY, MD

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-MAR-24

HAIDER, SHANZAY, MD

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-MAR-24

HAIDER, SHANZAY, MD

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-MAR-24

FAMILY PRACTICE

ZURITA, DANIELA, MD†

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-NOV-22

GASTROENTEROLOGY

FLANNERY, CHRISTOPHER, MD

Provider ID: N/A

29826 HAUN RD STE 308
MENIFEE, CA 92586
Effective as of 01-APR-23

FLANNERY, CHRISTOPHER, MD

Provider ID: N/A

29826 HAUN RD STE 308
MENIFEE, CA 92586
Effective as of 01-APR-23

INTERNAL MEDICINE

JACOBS, NATALIA, MD

Provider ID: N/A

28120 BRADLEY RD
MENIFEE, CA 92586
Effective as of 01-MAY-23

LAC, PETER, MD†

Provider ID: N/A

29878 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JAN-22

NAGASUNDER, ARABHI, DO

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-SEP-23

INTERVENTIONAL CARDIOLOGY

GOKHROO, RAHUL, MD†

Provider ID: N/A

26960 CHERRY HILLS
BLVD STE A
MENIFEE, CA 92586
Effective as of 01-DEC-22

GOKHROO, RAHUL, MD†

Provider ID: N/A

26960 CHERRY HILLS
BLVD STE A
MENIFEE, CA 92586
Effective as of 01-DEC-22

LICENSED CLINICAL SOCIAL WORKER

SIERRAS, KELLI, LCSW

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B AND C
MENIFEE, CA 92586
Effective as of 01-MAY-24

SIERRAS, KELLI, LCSW

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B AND C
MENIFEE, CA 92586

C1. 网络提供者名单 专科护理医生

Effective as of 01-MAY-24

TABIL-GALAPON, BERNICE, LCSW

Provider ID: N/A

☒ 26926 CHERRY HILLS
BLVD STE C
MENIFEE, CA 92586

Effective as of 01-JUL-23

NEPHROLOGY

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-OCT-20

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-JUN-19

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-JUN-19

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-JUN-19

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☒ 27851 BRADLEY RD STE 125

MENIFEE, CA 92586

Effective as of 01-JUN-19

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☒ 29878 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-SEP-17

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☒ 29878 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-SEP-17

LAC, PETER, MD†

Provider ID: N/A

☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-DEC-23

LAC, PETER, MD†

Provider ID: N/A

☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-JUN-19

LAC, PETER, MD†

Provider ID: N/A

☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-JUN-19

LAC, PETER, MD†

Provider ID: N/A

☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-JUN-19

LAC, PETER, MD†

Provider ID: N/A

☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-JUN-19

LAC, PETER, MD†

Provider ID: N/A

☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-NOV-19

LAC, PETER, MD†

Provider ID: N/A

☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-MAR-21

NAGASUNDER, ARABHI, DO

Provider ID: N/A

☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-NOV-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-OCT-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-OCT-23

NATH, ASHOK, MD†

Provider ID: N/A

☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-JUN-19

NATH, ASHOK, MD†

Provider ID: N/A

☒ 27851 BRADLEY RD STE 125

C1. 网络提供者名单 专科护理医生

MENIFEE, CA 92586
Effective as of 01-JUN-19

NATH, ASHOK, MD†

Provider ID: N/A
☒ 29878 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-MAR-19

YAN, ERIC, MD†

Provider ID: N/A
☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-JUN-19

YAN, ERIC, MD†

Provider ID: N/A
☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-MAY-20

YAN, ERIC, MD†

Provider ID: N/A
☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-JUL-23

YAN, ERIC, MD†

Provider ID: N/A
☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-JUN-19

YAN, ERIC, MD†

Provider ID: N/A
☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-JUN-19

YAN, ERIC, MD†

Provider ID: N/A
☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-JUN-19

YAN, ERIC, MD†

Provider ID: N/A
☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-JUN-19

YOUSSEF, AMR, DO†

Provider ID: N/A
☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-22

YOUSSEF, AMR, DO†

Provider ID: N/A
☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-SEP-22

YOUSSEF, AMR, DO†

Provider ID: N/A
☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-SEP-22

NEUROLOGY

TALANKI, VARUN, MD

Provider ID: N/A
☒ 29826 HAUN RD STE 209
MENIFEE, CA 92586
Effective as of 01-DEC-22

OBSTETRICS / GYNECOLOGY

HOM, KATHERINE, MD†

Provider ID: N/A

☒ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JUL-23

RIZVI, SYED, MD†

Provider ID: N/A
☒ 27174 NEWPORT RD STE 2
MENIFEE, CA 92584
Effective as of 01-MAR-22

URSO, MARY JO, DO†

Provider ID: N/A
☒ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-20

URSO, MARY JO, DO†

Provider ID: N/A
☒ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-21

URSO, MARY JO, DO†

Provider ID: N/A
☒ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-20

URSO, MARY JO, DO†

Provider ID: N/A
☒ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JUL-23

OCCUPATIONAL THERAPIST

MERCADO, ROBIN, MD

Provider ID: N/A
☒ 30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-MAY-24

MERCADO, ROBIN, MD

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-MAY-24

STOTLER, APRIL, OT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-24

STOTLER, APRIL, OT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-24

ZECHA, RICHARD, OT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-21

ZECHA, RICHARD, OT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-21

OPHTHALMOLOGY

CHAWLA, ANUJ, MD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-JUL-23

CHAWLA, ANUJ, MD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-JUN-16

CHOW, JASON, MD†

Provider ID: N/A

27168 NEWPORT RD STE 4
MENIFEE, CA 92584
Effective as of 01-JUL-23

CULOTTA, ANTHONY, MD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Teleservice
Effective as of 01-JUL-23

CULOTTA, ANTHONY, MD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Teleservice
Effective as of 01-NOV-20

DAVIS, MICHAEL, MD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Teleservice
Effective as of 01-SEP-24

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-OCT-17

LAZZARINI, THOMAS, MD

Provider ID: N/A

29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-FEB-24

LEE, JOHN, MD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-JUL-23

LIN, THEODORE, MD†

Provider ID: N/A

29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-APR-24

LIN, THEODORE, MD†

Provider ID: N/A

29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-APR-24

LIN, THEODORE, MD†

Provider ID: N/A

29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-17

LOBUE, THOMAS, MD

Provider ID: N/A

29950 HAUN RD STE 206
MENIFEE, CA 92586
Effective as of 01-APR-14

SAMUEL, MICHAEL, MD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Teleservice

C1. 网络提供者名单 专科护理医生

Effective as of 01-JUL-23

SKINNER, ANTHONY, MD

Provider ID: N/A

📄 29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-APR-24

SKINNER, ANTHONY, MD

Provider ID: N/A

📄 29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-APR-24

SKINNER, ANTHONY, MD

Provider ID: N/A

📄 29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-APR-24

SKINNER, ANTHONY, MD

Provider ID: N/A

📄 29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-JUN-24

SKINNER, ANTHONY, MD

Provider ID: N/A

📄 29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-JUN-24

ZHOU, SIWEI, MD†

Provider ID: N/A

📄 27168 NEWPORT RD STE 4
MENIFEE, CA 92584

Effective as of 01-JUL-23

OPTOMETRIST

ARCHIBALD, JOHN, OD†

Provider ID: N/A

📄 27168 NEWPORT RD STE 4
MENIFEE, CA 92584

Effective as of 01-DEC-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

📄 27168 NEWPORT RD STE 4
MENIFEE, CA 92584

Effective as of 01-JUL-23

BARR, AUSTIN, OD

Provider ID: N/A

📄 29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-MAR-23

BARR, AUSTIN, OD

Provider ID: N/A

📄 29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

📄 29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

📄 29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-NOV-22

FENNEMA, ERIC, OD†

Provider ID: N/A

📄 27168 NEWPORT RD STE 4
MENIFEE, CA 92584

Effective as of 01-SEP-22

FENNEMA, ERIC, OD†

Provider ID: N/A

📄 27168 NEWPORT RD STE 4
MENIFEE, CA 92584

Effective as of 01-FEB-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

📄 29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-NOV-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

📄 29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-NOV-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

📄 29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-NOV-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

📄 29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-NOV-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

📄 29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-NOV-21

HAMOUIE, JUDY, OD†

Provider ID: N/A

📄 29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-JUL-23

MCINTYRE, DEBRA, OD†

Provider ID: N/A

📄 29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-DEC-17

MCINTYRE, DEBRA, OD†

Provider ID: N/A

📄 29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-DEC-17

C1. 网络提供者名单

专科护理医生

MCINTYRE, DEBRA, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-DEC-17

MILLER, RYAN, OD

Provider ID: N/A

29950 HAUN RD STE 206
MENIFEE, CA 92586
Effective as of 01-APR-14

TO, BRITTANY, OD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-JUL-23

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-JUL-23

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-JAN-22

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-AUG-15

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-AUG-15

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-AUG-15

PHYS MED/ REHAB PAIN MEDICINE

CHEN, HAMILTON, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-JUL-24

PHYSICAL MEDICINE / REHABILITATION

CHEN, HAMILTON, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAR-24

PHYSICIANS ASSISTANT

BUSTAMANTE, ANGEL, PA†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

BUSTAMANTE, ANGEL, PA†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-AUG-20

HUNSAKER, NALANI, PA†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-DEC-20

HUNSAKER, NALANI, PA†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-23

HUNSAKER, NALANI, PA†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-DEC-20

LOPEZ, MARIA, PA†

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-AUG-21

PSYCHIATRY

ANDERSEN, CLAIRE, MD

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-DEC-20

ANDERSEN, CLAIRE, MD

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-DEC-20

PERSAUD, PRIA, MD

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-AUG-20

PERSAUD, PRIA, MD

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586

C1. 网络提供者名单 专科护理医生

Effective as of 01-AUG-20

PERSAUD, PRIA, MD

Provider ID: N/A

📍 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586

Effective as of 01-AUG-20

PERSAUD, PRIA, MD

Provider ID: N/A

📍 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586

Effective as of 01-AUG-20

SUNDER, RAJAGOPAL, MD

Provider ID: N/A

📍 28400 MCCALL BLVD
MENIFEE, CA 92585

Effective as of 01-JUL-24

SUNDER, RAJAGOPAL, MD

Provider ID: N/A

📍 28400 MCCALL BLVD
MENIFEE, CA 92585

Effective as of 01-JUL-24

PSYCHIATRY CHILD

ANDERSEN, CLAIRE, MD

Provider ID: N/A

📍 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586

Effective as of 01-DEC-20

ANDERSEN, CLAIRE, MD

Provider ID: N/A

📍 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586

Effective as of 01-DEC-20

RADIOLOGY DIAGNOSTIC

BENZL, ROBERT, MD

Provider ID: N/A

📍 27168 NEWPORT RD STE B
MENIFEE, CA 92584

Effective as of 01-JUL-24

REGISTERED PHYSICAL THERAPIST

ALEXANDER, AUSTIN, PT

Provider ID: N/A

📍 30141 ANTELOPE RD STE A
MENIFEE, CA 92584

Effective as of 01-DEC-20

ALEXANDER, AUSTIN, PT

Provider ID: N/A

📍 30141 ANTELOPE RD STE A
MENIFEE, CA 92584

Effective as of 01-DEC-20

ALEXANDER, AUSTIN, PT

Provider ID: N/A

📍 29798 HAUN RD STE 201
MENIFEE, CA 92586

Effective as of 01-DEC-20

ALEXANDER, AUSTIN, PT

Provider ID: N/A

📍 29798 HAUN RD STE 201
MENIFEE, CA 92586

Effective as of 01-DEC-20

BARI, MONICA, PT

Provider ID: N/A

📍 30141 ANTELOPE RD STE A
MENIFEE, CA 92584

Effective as of 01-DEC-23

BARI, MONICA, PT

Provider ID: N/A

📍 30141 ANTELOPE RD STE A
MENIFEE, CA 92584

Effective as of 01-DEC-23

COBURN, PIERRE, PT

Provider ID: N/A

📍 30141 ANTELOPE RD STE A
MENIFEE, CA 92584

Effective as of 01-JAN-24

COBURN, PIERRE, PT

Provider ID: N/A

📍 30141 ANTELOPE RD STE A
MENIFEE, CA 92584

Effective as of 01-JAN-24

FOX, DELANIE, PT

Provider ID: N/A

📍 30141 ANTELOPE RD STE A
MENIFEE, CA 92584

Effective as of 01-OCT-23

FOX, DELANIE, PT

Provider ID: N/A

📍 30141 ANTELOPE RD STE A
MENIFEE, CA 92584

Effective as of 01-OCT-23

GARCIA, JASON, PT†

Provider ID: N/A

📍 29798 HAUN RD STE 201
MENIFEE, CA 92586

Effective as of 01-JAN-23

GARCIA, JASON, PT†

Provider ID: N/A

📍 29798 HAUN RD STE 201
MENIFEE, CA 92586

Effective as of 01-JAN-23

HARMAN, JACY, PT†

Provider ID: N/A

📍 29798 HAUN RD STE 201
MENIFEE, CA 92586

Effective as of 01-JAN-22

HARMAN, JACY, PT†

Provider ID: N/A

📍 29798 HAUN RD STE 201

C1. 网络提供者名单 专科护理医生

MENIFEE, CA 92586
Effective as of 01-JAN-22

HARMAN, JACY, PT†

Provider ID: N/A

☐ 30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-22

HARMAN, JACY, PT†

Provider ID: N/A

☐ 30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-22

HIGGINS, DAWN, PT†

Provider ID: N/A

☐ 29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JUL-22

HIGGINS, DAWN, PT†

Provider ID: N/A

☐ 29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JUL-22

KESEL, KELSEY, PT

Provider ID: N/A

☐ 29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-MAR-24

KESEL, KELSEY, PT

Provider ID: N/A

☐ 29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-MAR-24

KESEL, KELSEY, PT

Provider ID: N/A

☐ 30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-MAR-24

KESEL, KELSEY, PT

Provider ID: N/A

☐ 30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-MAR-24

PATEL, BINOY, PT†

Provider ID: N/A

☐ 29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-SEP-17

PATEL, BINOY, PT†

Provider ID: N/A

☐ 29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-SEP-17

REED, SAVONNA, PT†

Provider ID: N/A

☐ 29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JAN-21

REED, SAVONNA, PT†

Provider ID: N/A

☐ 29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JAN-21

REED, SAVONNA, PT†

Provider ID: N/A

☐ 30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-21

REED, SAVONNA, PT†

Provider ID: N/A

☐ 30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-21

SABIN, SCOTT, PT†

Provider ID: N/A

☐ 29798 HAUN RD STE 201

MENIFEE, CA 92586
Effective as of 01-FEB-19

SABIN, SCOTT, PT†

Provider ID: N/A

☐ 29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-FEB-19

SABIN, SCOTT, PT†

Provider ID: N/A

☐ 30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-FEB-19

SABIN, SCOTT, PT†

Provider ID: N/A

☐ 30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-FEB-19

SANCHEZ, EMILY, PT

Provider ID: N/A

☐ 29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JUN-23

SANCHEZ, EMILY, PT

Provider ID: N/A

☐ 29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JUN-23

SANCHEZ, EMILY, PT

Provider ID: N/A

☐ 30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JUN-23

SANCHEZ, EMILY, PT

Provider ID: N/A

☐ 30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JUN-23

C1. 网络提供者名单 专科护理医生

RHEUMATOLOGY

BRAVO, ARLENE, MD†

Provider ID: N/A

☒ 29798 HAUN RD
MENIFEE, CA 92586
Effective as of 01-APR-21

COLBURN, KEITH, MD†

Provider ID: N/A

☒ 29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

☒ 29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-SEP-18

MEHTA, AMAL, MD†

Provider ID: N/A

☒ 29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

☒ 29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-OCT-09

MEHTA, AMAL, MD†

Provider ID: N/A

☒ 29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-SEP-18

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

☒ 29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

MEHTA, AMAL, MD†

Provider ID: N/A

☒ 29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-JUL-23

RAMASWAMY, DHARMARAJAN, MD†

Provider ID: N/A

☒ 29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAY-21

RAMASWAMY, DHARMARAJAN, MD†

Provider ID: N/A

☒ 29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

TRIVEDI, JANKI, MD†

Provider ID: N/A

☒ 29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

TRIVEDI, JANKI, MD†

Provider ID: N/A

☒ 29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-AUG-20

TRIVEDI, JANKI, MD†

Provider ID: N/A

☒ 29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-SEP-18

SURGERY GENERAL

IGWE, DANIEL, MD†

Provider ID: N/A

☒ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

IGWE, DANIEL, MD†

Provider ID: N/A

☒ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

IGWE, DANIEL, MD†

Provider ID: N/A

☒ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

SURGERY ORTHOPEDIC

CHAUDHURI, KALI, MD†

Provider ID: N/A

☒ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-21

CHAUDHURI, KALI, MD†

Provider ID: N/A

☒ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-21

CHAUDHURI, KALI, MD†

Provider ID: N/A

☒ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-21

DAVENPORT, STEPHEN, MD

Provider ID: N/A

☒ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JUL-23

GANDE, ABHIRAM, MD†

Provider ID: N/A

☒ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-22

GANDE, ABHIRAM, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-22

GANDE, ABHIRAM, MD[†]

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-22

GANDE, ABHIRAM, MD[†]

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JUL-23

PANSE, MILIND, MD[†]

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

PANSE, MILIND, MD[†]

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

PANSE, MILIND, MD[†]

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

UROLOGY

CRISELL, MONISHA, MD[†]

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586*
Effective as of 01-JUL-23

LARSON, BENJAMIN, MD[†]

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-JUN-17

LARSON, BENJAMIN, MD[†]

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-JUN-17

LUTTGE, SCOTT, MD

Provider ID: N/A

29826 HAUN RD STE 209
MENIFEE, CA 92586
Effective as of 01-MAY-23

ALLERGY IMMUNOLOGY

BASEN, TYLER, MD[†]

Provider ID: N/A

26691 PLAZA STE 170
MISSION VIEJO, CA 92691
Teleservice

Effective as of 01-SEP-22

BASEN, TYLER, MD[†]

Provider ID: N/A

26691 PLAZA STE 170
MISSION VIEJO, CA 92691
Teleservice

Effective as of 01-SEP-22

BASEN, TYLER, MD[†]

Provider ID: N/A

26691 PLAZA STE 170
MISSION VIEJO, CA 92691
Teleservice

Effective as of 01-DEC-20

BASEN, TYLER, MD[†]

Provider ID: N/A

26691 PLAZA STE 170
MISSION VIEJO, CA 92691
Teleservice

Effective as of 01-DEC-20

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-JUN-08

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-DEC-13

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21

CARR, WARNER, MD

C1. 网络提供者名单

专科护理医生

Provider ID: N/A

☒ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

☒ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

☒ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

☒ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

☒ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

☒ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

☒ 27800 MEDICAL CENTER
RD STE 244

MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

☒ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

MEHTA, VINAY, MD

Provider ID: N/A

☒ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

MEHTA, VINAY, MD

Provider ID: N/A

☒ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☒ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☒ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☒ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☒ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

VENKAT, GEETA, MD†

Provider ID: N/A

☒ 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-17

VENKAT, GEETA, MD†

Provider ID: N/A

☒ 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-17

ANESTHESIOLOGY

GERAYLI, AFSHIN, MD†

Provider ID: N/A

☒ 25982 PALA STE 280
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-AUG-22

GERAYLI, AFSHIN, MD†

Provider ID: N/A

☒ 25982 PALA STE 280
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-AUG-22

ANESTHESIOLOGY PAIN MANAGEMENT

BESHAI, ALFRED, MD

Provider ID: N/A

☒ 26691 PLAZA STE 170
MISSION VIEJO, CA 92691

C1. 网络提供者名单 专科护理医生

Effective as of 01-MAY-16

GERAYLI, AFSHIN, MD†

Provider ID: N/A

📍 25982 PALA STE 280
MISSION VIEJO, CA 92691

Teleservice

Effective as of 01-OCT-08

GERAYLI, AFSHIN, MD†

Provider ID: N/A

📍 25982 PALA STE 280
MISSION VIEJO, CA 92691

Teleservice

Effective as of 01-JAN-16

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

📍 25982 PALA STE 280
MISSION VIEJO, CA 92691

Effective as of 01-JUL-22

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

📍 25982 PALA STE 280
MISSION VIEJO, CA 92691

Effective as of 01-OCT-16

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

📍 25982 PALA STE 280
MISSION VIEJO, CA 92691

Effective as of 01-OCT-16

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

📍 25982 PALA STE 280
MISSION VIEJO, CA 92691

Effective as of 01-AUG-20

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

📍 25982 PALA STE 280
MISSION VIEJO, CA 92691

Effective as of 01-JUL-22

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

📍 25982 PALA STE 280
MISSION VIEJO, CA 92691

Effective as of 01-JAN-18

AUDIOLOGIST

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

📍 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-NOV-22

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

📍 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-NOV-22

PANEK, KRISTI, AuD

Provider ID: N/A

📍 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-NOV-22

PANEK, KRISTI, AuD

Provider ID: N/A

📍 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-NOV-22

CARDIAC

ELECTROPHYSIOLOGY

DESAI, ASEEM, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-SEP-10

HUNG, LYNNE, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-NOV-12

TIONGSON, JAY, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 103
MISSION VIEJO, CA 92691

Effective as of 01-OCT-13

TIONGSON, JAY, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 103
MISSION VIEJO, CA 92691

Effective as of 01-OCT-13

CARDIOVASCULAR DISEASE

ALOMARI, IHAB, MD

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-SEP-23

ALOMARI, IHAB, MD

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-SEP-23

CUA, BENNETT, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

C1. 网络提供者名单 专科护理医生

Effective as of 01-AUG-18

CUA, BENNETT, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-AUG-18

DESAI, ASEEM, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-NOV-05

EUBANY, JACQUELINE, MD[†]

Provider ID: N/A

27525 PUERTA REAL STE
300
MISSION VIEJO, CA 92691

Effective as of 01-OCT-20

EUBANY, JACQUELINE, MD[†]

Provider ID: N/A

27525 PUERTA REAL STE
300
MISSION VIEJO, CA 92691

Effective as of 01-OCT-20

HEPNER, ABSALOM, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-NOV-12

HEPNER, ABSALOM, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-DEC-14

KULICK, DANIEL, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691

Effective as of 01-JAN-15

KULICK, DANIEL, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-MAY-12

KULICK, DANIEL, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-NOV-12

KULICK, DANIEL, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-OCT-99

LOUSSARARIAN, ARTHUR, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-OCT-99

LOUSSARARIAN, ARTHUR, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-NOV-12

LOUSSARARIAN, ARTHUR, MD[†]

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691

Effective as of 01-NOV-12

REDIKER, DONALD, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-OCT-12

REDIKER, DONALD, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-MAY-12

REDIKER, DONALD, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-OCT-99

REDIKER, DONALD, MD[†]

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691

Effective as of 01-SEP-10

CERTIFIED NURSE PRACTITIONER

CARR, CHERYL, NP

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

CARR, CHERYL, NP

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

☞ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

CARR, CHERYL, NP

Provider ID: N/A

☞ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

CARR, CHERYL, NP

Provider ID: N/A

☞ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

CARR, CHERYL, NP

Provider ID: N/A

☞ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

CHAN, JUDY, NPF

Provider ID: N/A

☞ 30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-JAN-24

CHAN, JUDY, NPF

Provider ID: N/A

☞ 30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-JAN-24

DAVID, MARY LOU, NP†

Provider ID: N/A

☞ 23512 MADERO
MISSION VIEJO, CA 92691

Effective as of 01-AUG-21

PARK, SE, NP

Provider ID: N/A

☞ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

☞ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

☞ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

PARK, SE, NP

Provider ID: N/A

☞ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

☞ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

PASICOLAN, MARI, NP

Provider ID: N/A

☞ 26012 MARGUERITE PKWY
STE H
MISSION VIEJO, CA 92692
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

☞ 26012 MARGUERITE PKWY
STE H
MISSION VIEJO, CA 92692
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

☞ 26012 MARGUERITE PKWY
STE H
MISSION VIEJO, CA 92692
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

☞ 30897 GATEWAY PL STE F
MISSION VIEJO, CA 92694
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

☞ 30897 GATEWAY PL STE F
MISSION VIEJO, CA 92694
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

☞ 30897 GATEWAY PL STE F
MISSION VIEJO, CA 92694
Effective as of 01-DEC-22

CERTIFIED REGISTERED NURSE MIDWIFE

MCDANIEL-DAVIS, SHAYNA, CRNM

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

MCDANIEL-DAVIS, SHAYNA, CRNM

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

C1. 网络提供者名单 专科护理医生

CLINICAL

NEUROPSYCHOLOGIST

FAHIMI, GOLSHAN, MD

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-SEP-24

FAHIMI, GOLSHAN, MD

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-SEP-24

FAHIMI, GOLSHAN, MD

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-SEP-24

DERMATOLOGY

BISUNA, BLANCA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 170
MISSION VIEJO, CA 92691*
Effective as of 01-MAR-16

DICESARE, DANIEL, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691
Effective as of 01-NOV-19

DICESARE, DANIEL, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691
Effective as of 01-NOV-19

LEVIN, JACQUELINE, DO†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 220
MISSION VIEJO, CA 92691
Effective as of 01-NOV-15

LONGBERG, AUSTIN, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 435
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

LONGBERG, AUSTIN, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 435
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

NGUYEN, TUYET, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 435
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

NGUYEN, TUYET, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 435
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

ZHAN, FRANK, MD†

Provider ID: N/A

26691 PLAZA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

ZHAN, FRANK, MD†

Provider ID: N/A

26691 PLAZA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

ZHAN, FRANK, MD†

Provider ID: N/A

26691 PLAZA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

EMERGENCY MEDICINE

ELPEDES, BERNARD, DO†

Provider ID: N/A

23962 ALICIA PKWY STE 11
MISSION VIEJO, CA 92691
Effective as of 01-JAN-24

ENDOCRINOLOGY

METABOLISM DIABETES

BARRERA, JOSEPH, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691*
Effective as of 01-NOV-12

BARRERA, JOSEPH, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-DEC-02

BUI, AMY-VAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-FEB-15

BUI, AMY-VAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

C1. 网络提供者名单 专科护理医生

CHAN, JESSICA, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

CHAN, JESSICA, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

DAO, LISA, MD

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

FRANKWICH, KAREN, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-14

FRANKWICH, KAREN, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-14

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

📄 25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

📄 25982 PALA STE 140

MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

📄 25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

📄 25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

📄 25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

📄 25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

📄 25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

📄 25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-MAR-22

MULFORD, MIM, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-OCT-99

MULFORD, MIM, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

MULFORD, MIM, MD†

Provider ID: N/A

📄 26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

TRAN, NEIL, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-07

TRAN, NEIL, MD†

Provider ID: N/A

📄 26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

TRAN, NEIL, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

TRUONG, MICHAEL, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

TRUONG, MICHAEL, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-99

FAMILY PRACTICE **SPORTS MEDICINE**

CUENCA, ARNOLD, DO[†]

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21

CUENCA, ARNOLD, DO[†]

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21

MARANDOLA, MICHAEL, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUL-12

MARANDOLA, MICHAEL, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-APR-12

GASTROENTEROLOGY

BAE, WANJUN, MD[†]

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

BAE, WANJUN, MD[†]

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

BEMANIAN, SHAHROOZ, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

BEMANIAN, SHAHROOZ, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

BEMANIAN, SHAHROOZ, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

BEMANIAN, SHAHROOZ, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

BLOCK, EDWARD, MD[†]

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

BLOCK, EDWARD, MD[†]

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691

Effective as of 01-APR-21

CHANG, ELMER, MD[†]

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

CHANG, ELMER, MD[†]

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

C1. 网络提供者名单 专科护理医生

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

CHOI, DAVID, DO

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

CHOI, DAVID, DO

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

CHOI, DAVID, DO

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

CHOI, DAVID, DO

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

CHU, ERIC, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 240
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

CHU, ERIC, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 240
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

CHU, ERIC, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

CHU, ERIC, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

KIM, DANIEL, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

KIM, DANIEL, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

LEE, PAUL, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

LEE, PAUL, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

LEE, PAUL, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24

LEE, PAUL, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24

LEE, PAUL, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

LEE, PAUL, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

NGUYEN, DOUGLAS, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

C1. 网络提供者名单

专科护理医生

NGUYEN, DOUGLAS, MD[†]

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

OMAN, MATTHEW, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

OMAN, MATTHEW, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

OMAN, MATTHEW, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

OMAN, MATTHEW, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

RAHMAN, HABIB, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 475
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

RAHMAN, HABIB, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 475
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

RAHMAN, HABIB, MD

Provider ID: N/A

26691 PLAZA STE 150
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

RODRIGUES, DANIALD, MD[†]

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

RODRIGUES, DANIALD, MD[†]

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

YU, VICTOR, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

YU, VICTOR, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

YU, VICTOR, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

YU, VICTOR, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691

Effective as of 01-JUN-24

ZABIHI, RAMIN, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-JAN-12

ZABIHI, RAMIN, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

ZABIHI, RAMIN, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

ZABIHI, RAMIN, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

ZABIHI, RAMIN, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

GYNECOLOGIC ONCOLOGY

MENDIVIL, ALBERTO, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691

C1. 网络提供者名单

专科护理医生

Effective as of 01-MAY-24

GYNECOLOGY

KANALY, KIM, MD

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691

Effective as of 01-APR-11

KANALY, KIM, MD


Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691

Effective as of 01-MAY-12

WALLACE, PATRICIA, MD†


Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691

Effective as of 01-DEC-08

WALLACE, PATRICIA, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691

Effective as of 01-APR-11

WALLACE, PATRICIA, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691

Effective as of 01-MAY-12

HEMATOLOGY / ONCOLOGY

HU, JOHN, MD†

Provider ID: N/A

 27799 MEDICAL CENTER

RD


STE 460

MISSION VIEJO, CA 92691

Effective as of 01-SEP-20

HU, JOHN, MD†

Provider ID: N/A


 27799 MEDICAL CENTER
RD
STE 460

MISSION VIEJO, CA 92691

Effective as of 01-SEP-20

HUANG, DANIEL, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691

Effective as of 01-JUL-21

HUANG, DANIEL, MD†


Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691

Effective as of 01-FEB-21

HUANG, DANIEL, MD†


Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691

Effective as of 01-JUL-21

LAZO, NELLY, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691

Effective as of 01-NOV-18

LAZO, NELLY, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 271

MISSION VIEJO, CA 92691

Effective as of 01-NOV-18

LAZO, NELLY, MD†


Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691

Effective as of 01-JUL-21

LAZO, NELLY, MD†


Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691

Effective as of 01-JAN-23

LAZO, NELLY, MD†


Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

LI, MING, MD†

Provider ID: N/A


 27799 MEDICAL CENTER
RD
STE 460

MISSION VIEJO, CA 92691

Effective as of 01-APR-20

LI, MING, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 460

MISSION VIEJO, CA 92691

Effective as of 01-APR-20

INFECTIOUS DISEASE

REDDY, JAGADEESH, MD

Provider ID: N/A

 26732 CROWN VALLEY

C1. 网络提供者名单 专科护理医生

PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-16

REDDY, JAGADEESH, MD

Provider ID: N/A

📍 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

REDDY, JAGADEESH, MD

Provider ID: N/A

📍 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-16

WAYNE, EDGAR, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

WAYNE, EDGAR, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

INTERNAL MEDICINE

AZAD, HABIB, MD†

Provider ID: N/A

📍 27800 MEDICAL CENTER
RD STE 220
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

CASTRO RUEDA, HERNAN, MD†

Provider ID: N/A

📍 26732 CROWN VALLEY

PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-AUG-17

CHEN, MAY, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

CHEN, MAY, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

GEE, JOEY, DO†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

GOLDBERG, ROBERT, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

JIANG, FEN, MD†

Provider ID: N/A

📍 27799 MEDICAL CENTER
RD
STE 460
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

JIANG, FEN, MD†

Provider ID: N/A

📍 27799 MEDICAL CENTER
RD
STE 460

MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

KOVACS, DAVID, MD†

Provider ID: N/A

📍 26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-APR-16

MIEL, RUFINAPAMELA, MD†

Provider ID: N/A

📍 26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-APR-19

MIEL, RUFINAPAMELA, MD†

Provider ID: N/A

📍 26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-APR-19

QURESHI, TAUSEEF, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-JUL-15

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

📍 26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691
Effective as of 01-MAY-17

INTERNAL MEDICINE CRITICAL CARE MEDICINE

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 205

C1. 网络提供者名单 专科护理医生

MISSION VIEJO, CA 92691
Effective as of 01-MAY-17

INTERVENTIONAL CARDIOLOGY

DANON, SAAR, MD[†]

Provider ID: N/A

📍 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-AUG-20

DANON, SAAR, MD[†]

Provider ID: N/A

📍 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-MAY-21

DANON, SAAR, MD[†]

Provider ID: N/A

📍 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-MAY-21

HUNG, LYNNE, MD[†]

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

KOPLIK, SHERI, MD[†]

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-16

KOPLIK, SHERI, MD[†]

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 250

MISSION VIEJO, CA 92691
Effective as of 01-MAY-16

LOUSSARARIAN, ARTHUR, MD[†]

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

LOUSSARARIAN, ARTHUR, MD[†]

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

LOUSSARARIAN, ARTHUR, MD[†]

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

SUK, DAVID, MD

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

SUK, DAVID, MD

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

MARRIAGE FAMILY THERAPIST

ORTIZ, TINA, MFT[†]

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 325
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

ORTIZ, TINA, MFT[†]

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 325
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

MEDICAL ONCOLOGY

BENDER, RICHARD, MD[†]

Provider ID: N/A

📍 26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

BENDER, RICHARD, MD[†]

Provider ID: N/A

📍 26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

MIEL, RUFINAPAMELA, MD[†]

Provider ID: N/A

📍 26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24

NEPHROLOGY

ALLAMEHZADEH, REZA, MD[†]

Provider ID: N/A

📍 25982 PALA STE 170
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD[†]

C1. 网络提供者名单

专科护理医生

Provider ID: N/A

25982 PALA STE 170
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD[†]

Provider ID: N/A

25982 PALA STE 170
MISSION VIEJO, CA 92691^{*}
Effective as of 01-JAN-18

ALLAMEHZADEH, REZA, MD[†]

Provider ID: N/A

25982 PALA STE 170
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD[†]

Provider ID: N/A

25982 PALA
MISSION VIEJO, CA 92691
Effective as of 01-AUG-16

ALLAMEHZADEH, REZA, MD[†]

Provider ID: N/A

25982 PALA STE 170
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD[†]

Provider ID: N/A

25982 PALA
MISSION VIEJO, CA 92691
Effective as of 01-AUG-16

AZAD, HABIB, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

AZAD, HABIB, MD[†]

Provider ID: N/A

26800 CROWN VALLEY

PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

AZAD, HABIB, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

CHEN, MAY, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

CHEN, MAY, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

DORRIZ, PARSHAW, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 320
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

NAWAR, MAGDY, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 485
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

NAWAR, MAGDY, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 485
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

NAWAR, MAGDY, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 485
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

RAVIKUMAR, ASHA, MD[†]

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

TEACHER, THEODORE, MD[†]

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

TEACHER, THEODORE, MD[†]

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

TRAN, STEVE, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

TRAN, STEVE, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

TRAN, STEVE, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250

C1. 网络提供者名单 专科护理医生

MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

TRAN, STEVE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

NEUROLOGY

DORRIZ, PARSHAW, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

FAHIMI, GOLSHAN, MD

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-SEP-24

GEE, JOEY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

GEE, JOEY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

GEE, JOEY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

KESARI, SANTOSH, MD

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 110
MISSION VIEJO, CA 92691
Effective as of 01-MAR-24

LOPEZ VIZCARRA, MARCO, MD

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

NIK, ANDREW, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

NIK, ANDREW, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

RAHIM, BASIT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-AUG-19

RAHIM, BASIT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-AUG-19

SALEHI, HAMID, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-AUG-11

SALEHI, HAMID, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-DEC-14

SALEHI, HAMID, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-DEC-20

SALEHI, HAMID, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-NOV-14

SALEHI, HAMID, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-JAN-18

SPOKOYNY, ELEONORA, MD†

Provider ID: N/A

25982 PALA STE 150
MISSION VIEJO, CA 92691
Effective as of 01-DEC-08

SPOKOYNY, ELEONORA, MD†

Provider ID: N/A

25982 PALA STE 150
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

C1. 网络提供者名单

专科护理医生

SPOKOYNY, ELEONORA, MD†

Provider ID: N/A

25982 PALA STE 150
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

SPOKOYNY, ELEONORA, MD†

Provider ID: N/A

25982 PALA STE 150
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

SPOKOYNY, ELEONORA, MD†

Provider ID: N/A

25982 PALA STE 150
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

TEACHER, THEODORE, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

TEACHER, THEODORE, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

VORA, RONAK, DO

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 320
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

VORA, RONAK, DO

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 320
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

NEUROLOGY CHILD

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691

C1. 网络提供者名单 专科护理医生

Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691

Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691

Effective as of 01-DEC-16

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691

Effective as of 01-JAN-20

KAYYAL, SIMON, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691

Effective as of 01-MAY-24

MEGERIAN, JONATHAN, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691

Effective as of 01-MAY-24

PEARSON, RACHEL, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691

Effective as of 01-MAY-24

SHREY, DANIEL, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691

Effective as of 01-MAY-24

THOMAS, JULIAN, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691

Effective as of 01-MAY-24

OBSTETRICS / GYNECOLOGY

ABRAVESH, SOODABEH, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 310
MISSION VIEJO, CA 92691

Effective as of 01-JAN-18

BAGINSKI, LEON, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 310
MISSION VIEJO, CA 92691

Effective as of 01-JUL-20

BAGINSKI, LEON, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 310
MISSION VIEJO, CA 92691

Effective as of 01-AUG-20

BAGINSKI, LEON, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 310
MISSION VIEJO, CA 92691

Effective as of 01-JUL-20

BAILEY, THOMAS, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691

Effective as of 01-MAR-99

BAILEY, THOMAS, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691

Effective as of 01-JUL-14

BENZL, JERRY, MD†

Provider ID: N/A

26902 OSO PKWY STE 180
MISSION VIEJO, CA 92691

Effective as of 01-JUN-11

BENZL, JERRY, MD†

Provider ID: N/A

26902 OSO PKWY STE 180
MISSION VIEJO, CA 92691

Effective as of 01-MAY-12

BENZL, JERRY, MD†

Provider ID: N/A

26902 OSO PKWY STE 180
MISSION VIEJO, CA 92691

Effective as of 01-JUL-03

BENZL, JERRY, MD†

Provider ID: N/A

26902 OSO PKWY STE 180
MISSION VIEJO, CA 92691

Effective as of 01-SEP-10

CHANG, JEREMY, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691

Effective as of 01-JUL-24

CHANG, JEREMY, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691

Effective as of 01-JUL-24

C1. 网络提供者名单 专科护理医生

CVAR, KATHRYN, MD†

Provider ID: N/A

☒ 26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

CVAR, KATHRYN, MD†

Provider ID: N/A

☒ 26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

CVAR, KATHRYN, MD†

Provider ID: N/A

☒ 26732 CROWN VALLEY
PKWY STE 443
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

EDMUNDSON, MORIAH, DO†

Provider ID: N/A

☒ 26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21

EDMUNDSON, MORIAH, DO†

Provider ID: N/A

☒ 26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21

FARAZ ESLAMI, PARASTOO, MD

Provider ID: N/A

☒ 30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-FEB-24

FARAZ ESLAMI, PARASTOO, MD

Provider ID: N/A

☒ 30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-FEB-24

FARAZ ESLAMI, PARASTOO, MD

Provider ID: N/A

☒ 30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-JAN-24

FARAZ ESLAMI, PARASTOO, MD†

Provider ID: N/A

☒ 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-JUL-20

FARAZ ESLAMI, PARASTOO, MD†

Provider ID: N/A

☒ 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-JUL-20

GRANESE, MARSHA, MD†

Provider ID: N/A

☒ 26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691
Effective as of 01-JUL-18

GRANESE, MARSHA, MD†

Provider ID: N/A

☒ 26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691
Effective as of 01-JUL-18

KANALY, KIM, MD

Provider ID: N/A

☒ 26732 CROWN VALLEY
PKWY STE 381
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

KANALY, KIM, MD

Provider ID: N/A

☒ 26732 CROWN VALLEY
PKWY STE 381
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

LEAVITT, JAMIE, MD†

Provider ID: N/A

☒ 26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

LEAVITT, JAMIE, MD†

Provider ID: N/A

☒ 26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

MELKONIAN, VIKEN, MD†

Provider ID: N/A

☒ 26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

MELKONIAN, VIKEN, MD†

Provider ID: N/A

☒ 26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

MELKONIAN, VIKEN, MD†

Provider ID: N/A

☒ 26800 CROWN VALLEY
PKWY STE 440

C1. 网络提供者名单 专科护理医生

MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

MILLER, KURT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

MILLER, KURT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

POLLOCK, KATHLEEN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-JUN-05

POLLOCK, KATHLEEN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

RAMIREZ, SARA, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

RAMIREZ, SARA, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

SALCIDO, CRAIG, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-DEC-07

SALCIDO, CRAIG, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

STADLER, EDWARD, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

STADLER, EDWARD, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

TRAN, TIFFANY, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 144
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

TRAN, BRYAN, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 144
MISSION VIEJO, CA 92691
Teleservice

Effective as of 01-SEP-22

TRAN, TIFFANY, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 144
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

OPHTHALMOLOGY

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-NOV-21

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-NOV-21

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY

C1. 网络提供者名单 专科护理医生

PKWY
MISSION VIEJO, CA 92691
Effective as of 01-NOV-21

AMRA, NOOR, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

AMRA, NOOR, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

AMRA, NOOR, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

AMRA, NOOR, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-DEC-22

AMRA, NOOR, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-DEC-22

BANUELOS, LYDIA, MD†

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-DEC-22

BANUELOS, LYDIA, MD†

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

CUNNINGHAM-AHUMADA, ROSE, DO†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

CUNNINGHAM-AHUMADA, ROSE, DO†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

CUNNINGHAM-AHUMADA, ROSE, DO†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

CUNNINGHAM-AHUMADA, ROSE, DO†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

CUNNINGHAM-AHUMADA, ROSE, DO†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691

Effective as of 01-DEC-11

CUNNINGHAM-AHUMADA, ROSE, DO†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-AUG-19

CUNNINGHAM-AHUMADA, ROSE, DO†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-FEB-08

C1. 网络提供者名单
专科护理医生

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
 PKWY
 MISSION VIEJO, CA 92691
 Effective as of 01-JUN-24

JOSON, PETER, MD

Provider ID: N/A

26691 PLAZA STE 250
 MISSION VIEJO, CA 92691
 Effective as of 01-MAR-23

JOSON, PETER, MD

Provider ID: N/A

26691 PLAZA STE 250
 MISSION VIEJO, CA 92691
 Effective as of 01-MAY-23

JOSON, PETER, MD

Provider ID: N/A

26691 PLAZA STE 250
 MISSION VIEJO, CA 92691
 Effective as of 01-MAY-23

JOSON, PETER, MD

Provider ID: N/A

26726 CROWN VALLEY
 PKWY STE 220
 MISSION VIEJO, CA 92691
 Effective as of 01-OCT-17

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
 STE 120
 MISSION VIEJO, CA 92691
 Effective as of 01-MAY-22

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
 STE 120
 MISSION VIEJO, CA 92691

Effective as of 01-NOV-14

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
 STE 120
 MISSION VIEJO, CA 92691
 Effective as of 01-JAN-18

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
 STE 120
 MISSION VIEJO, CA 92691
 Effective as of 01-JUN-23

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
 STE 120
 MISSION VIEJO, CA 92691
 Effective as of 01-MAR-12

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
 STE 120
 MISSION VIEJO, CA 92691
 Effective as of 01-AUG-19

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
 STE 120
 MISSION VIEJO, CA 92691
 Effective as of 01-DEC-14

SALEHI-HAD, HANI, MD

Provider ID: N/A

27871 MEDICAL CENTER RD
 STE 120
 MISSION VIEJO, CA 92691

SALEHI-HAD, HANI, MD†

Provider ID: N/A

26726 CROWN VALLEY
 PKWY STE 220
 MISSION VIEJO, CA 92691

Effective as of 01-JUN-21

SALEHI-HAD, HANI, MD†

Provider ID: N/A

26726 CROWN VALLEY
 PKWY STE 220
 MISSION VIEJO, CA 92691

Effective as of 01-JUN-21

TAI, AUDREY, DO†

Provider ID: N/A

26800 CROWN VALLEY
 PKWY STE 340
 MISSION VIEJO, CA 92691

Effective as of 01-SEP-22

TAI, AUDREY, DO†

Provider ID: N/A

26800 CROWN VALLEY
 PKWY STE 340
 MISSION VIEJO, CA 92691

Effective as of 01-SEP-22

TAYANI, RAMIN, MD†

Provider ID: N/A

26726 CROWN VALLEY
 PKWY STE 250
 MISSION VIEJO, CA 92691

Effective as of 01-SEP-12

TAYANI, RAMIN, MD

Provider ID: N/A

26691 PLAZA STE 250
 MISSION VIEJO, CA 92691
 Effective as of 01-MAY-23

TAYANI, RAMIN, MD

Provider ID: N/A

26691 PLAZA STE 250
 MISSION VIEJO, CA 92691
 Effective as of 01-MAY-23

C1. 网络提供者名单 专科护理医生

TAYANI, RAMIN, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

OPTOMETRIST

ANSARI, SHORA, OD

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

HWANG, DONNA, OD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

KHAN, CEMONE, OD

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

NG, REBECCA, OD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

NG, REBECCA, OD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

SAKO, AARON, OD

Provider ID: N/A

27724 SANTA MARGARITA

PKWY
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

WONG, RANDALL, OD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

WONG, RANDALL, OD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-FEB-04

OTOLARYNGOLOGY

BHATT, JAY, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

BREDENKAMP, JAMES, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-14

BREDENKAMP, JAMES, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

BREDENKAMP, JAMES, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-JAN-18

BREDENKAMP, JAMES, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-SEP-99

BREDENKAMP, JAMES, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-16

CHO, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

CHO, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

CHO, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

CHO, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-08

CROCKETT, DENNIS, MD†

C1. 网络提供者名单

专科护理医生

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-08

CROCKETT, DENNIS, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

CROCKETT, DENNIS, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

CROCKETT, DENNIS, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

CROCKETT, DENNIS, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

CROCKETT, DENNIS, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

FEINBERG, STEVEN, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200

MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-99

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-24

HUOH, KEVIN, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-04

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200

C1. 网络提供者名单 专科护理医生

MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

LUU, QUANG, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

LUU, QUANG, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-18

LUU, QUANG, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

LUU, QUANG, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

MUNDI, JAGMEET, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

MUNDI, JAGMEET, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-14

MUNDI, JAGMEET, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-14

MUNDI, JAGMEET, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-13

MUNDI, JAGMEET, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-13

MUNDI, JAGMEET, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

PHAM, NGUYEN, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-FEB-16

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-FEB-16

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-FEB-16

ZHONG, QIU, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

PEDIATRIC CARDIOLOGY

CHUN, DAVID, MD†


Provider ID: N/A

26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-MAY-15

CHUN, DAVID, MD†


Provider ID: N/A

C1. 网络提供者名单 专科护理医生

 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-FEB-15


DOSHI, NITA, MD

Provider ID: N/A

 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


ELLINI, AHMAD, MD†

Provider ID: N/A

 26691 PLAZA STE 120A
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

GANDY, JODIE, MD†

Provider ID: N/A

 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14


GANDY, JODIE, MD†

Provider ID: N/A

 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14


GANDY, JODIE, MD†

Provider ID: N/A

 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14


GANDY, JODIE, MD†

Provider ID: N/A

 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14


GANDY, JODIE, MD

Provider ID: N/A

 26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


GANDY, JODIE, MD

Provider ID: N/A

 26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


GANDY, JODIE, MD

Provider ID: N/A

 26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


GANDY, JODIE, MD†

Provider ID: N/A

 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-SEP-15


GANDY, JODIE, MD†

Provider ID: N/A

 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21


GANDY, JODIE, MD†

Provider ID: N/A

 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21


GANDY, JODIE, MD

Provider ID: N/A

 26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


HORENSTEIN, MARIA, MD

Provider ID: N/A

 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


LAI, WYMAN, MD

Provider ID: N/A

 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


MORCHI, GIRA, MD

Provider ID: N/A

 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


MUHONEN, LINDA, MD

Provider ID: N/A

 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23


RAHIMI, MOHAMMAD, MD†

Provider ID: N/A

 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-DEC-20


RAHIMI, MOHAMMAD, MD†

Provider ID: N/A

 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-DEC-20


RAHIMI, MOHAMMAD, MD†

Provider ID: N/A

 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-DEC-20

RAHIMI, MOHAMMAD, MD†

Provider ID: N/A

 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-JAN-21

RAHIMI, MOHAMMAD, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-JAN-21

RAHIMI, MOHAMMAD, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-JAN-21

RECTO, MICHAEL, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

RENELLA, PIERANGELO, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

WEINER, KEITH, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 264
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

WEINER, KEITH, MD†

Provider ID: N/A

26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

WEINER, KEITH, MD†

Provider ID: N/A

26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

WEINER, KEITH, MD

Provider ID: N/A

26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

WEINER, KEITH, MD

Provider ID: N/A

26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

WEINER, KEITH, MD

Provider ID: N/A

26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

WEINER, KEITH, MD

Provider ID: N/A

26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

PEDIATRIC ENDOCRINOLOGY

BHANGOO, AMRIT, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

PEDIATRIC GASTROENTEROLOGY

WANG, MICHAEL, DO

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

YOUNES, BASSAM, MD

Provider ID: N/A

26691 PLAZA STE 130

MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

PEDIATRIC INFECTIOUS DISEASES

ARRIETA, ANTONIO, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 138 BLDG 2
MISSION VIEJO, CA 92691
Effective as of 01-FEB-17

ARRIETA, ANTONIO, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 138 BLDG 2
MISSION VIEJO, CA 92691
Effective as of 01-FEB-17

ARRIETA, ANTONIO, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 138 BLDG 2
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

PEDIATRIC NEPHROLOGY

NGUYEN, JOHN, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

ZAMAN, RUMINA, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

PEDIATRIC PULMONOLOGY

CHIN, CHANA, MD

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

GAGE, SUSAN, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

HONG, HANNA, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

KAMATH, SUNIL, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

TIRAKITSOONTORN,

PORNCHAI, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

PEDIATRIC SPORTS MEDICINE

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-18

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-18

PEDIATRIC SURGERY ORTHOPEDIC

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-05

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-12

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

CAO, LISA, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

CAO, LISA, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

CAO, LISA, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

DOBYNS, JEFFREY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-15

DOBYNS, JEFFREY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-15

DOBYNS, JEFFREY, MD†

Provider ID: N/A

25982 PALA STE 230

C1. 网络提供者名单 专科护理医生

MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

LALONDE, FRANCOIS, MD†

Provider ID: N/A

📍 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-MAR-10

MCMICHAEL, JESSICA, MD†

Provider ID: N/A

📍 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

MISAGHI, AMIRHOSSEIN, MD†

Provider ID: N/A

📍 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-20

ROSENFELD, SAMUEL, MD†

Provider ID: N/A

📍 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-05

SCHLECHTER, JOHN, DO†

Provider ID: N/A

📍 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-FEB-09

WEINERT, CARL, MD†

Provider ID: N/A

📍 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-05

PEDIATRICS

CHAMBERLIN, JOSHUA, MD†

Provider ID: N/A

📍 27800 MEDICAL CENTER
RD STE 110

MISSION VIEJO, CA 92691
Effective as of 01-FEB-21

PHYS MED/ REHAB PAIN MEDICINE

DEDES, HOWARD, MD

Provider ID: N/A

📍 26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

📍 26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

📍 26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

📍 26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

📍 26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

📍 26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

PHYSICAL MEDICINE / REHABILITATION

CUSHING, JAMES, MD

Provider ID: N/A

📍 27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

CUSHING, JAMES, MD

Provider ID: N/A

📍 27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

CUSHING, JAMES, MD

Provider ID: N/A

📍 27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

FADAVI, HAMID, DO

Provider ID: N/A

📍 26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

FADAVI, HAMID, DO

Provider ID: N/A

📍 26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-NOV-21

FADAVI, HAMID, DO

Provider ID: N/A

📍 26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-NOV-21

FADAVI, HAMID, DO

Provider ID: N/A

📍 26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-DEC-21

C1. 网络提供者名单 专科护理医生

FADAVI, HAMID, DO

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691

Effective as of 01-DEC-14

HANJAN, TIVA, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-FEB-18

KIM, BONNIE, MD†

Provider ID: N/A

26302 LA PAZ RD STE 106
MISSION VIEJO, CA 92691

Effective as of 01-OCT-21

KIM, BONNIE, MD†

Provider ID: N/A

26302 LA PAZ RD STE 106
MISSION VIEJO, CA 92691

Effective as of 01-SEP-21

KIM, BONNIE, MD†

Provider ID: N/A

26302 LA PAZ RD STE 106
MISSION VIEJO, CA 92691

Effective as of 01-SEP-21

KING, FRANK, MD

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691

Teleservice

Effective as of 01-APR-23

KING, FRANK, MD

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691

Teleservice

Effective as of 01-JAN-16

RANJBARAN, ZIBA, MD†

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691

Effective as of 01-MAY-12

RANJBARAN, ZIBA, MD†

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691

Effective as of 01-APR-11

WASHBURN, NEAL, DO

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-JAN-24

WASHBURN, NEAL, DO

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-JAN-24

PHYSICIANS ASSISTANT

CARR, OLIVIA, PA

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-APR-24

CARR, OLIVIA, PA

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-APR-24

KENNEDY, KATHRYN, PA

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691

Effective as of 01-NOV-22

KISCADEN, LAUREN, PA

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-DEC-23

KISCADEN, LAUREN, PA

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-DEC-23

KISCADEN, LAUREN, PA

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-DEC-23

KISCADEN, LAUREN, PA

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

KISCADEN, LAUREN, PA

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

KISCADEN, LAUREN, PA

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-DEC-23

KISCADEN, LAUREN, PA†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

☞ 26051 ACERO STE 100
MISSION VIEJO, CA 92691*
Effective as of 01-FEB-22

KISCADEN, LAUREN, PA†

Provider ID: N/A

☞ 26051 ACERO STE 100
MISSION VIEJO, CA 92691*
Effective as of 01-FEB-22

LONAPPAN, HENA, PA

Provider ID: N/A

☞ 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-JUL-24

LONAPPAN, HENA, PA

Provider ID: N/A

☞ 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-JUL-24

NOJAN, JOSEPH, PA

Provider ID: N/A

☞ 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

NOJAN, JOSEPH, PA

Provider ID: N/A

☞ 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

NOJAN, JOSEPH, PA

Provider ID: N/A

☞ 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340

MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

☞ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-24

TAYLOR, ERIC, PA

Provider ID: N/A

☞ 26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUL-24

TAYLOR, ERIC, PA

Provider ID: N/A

☞ 26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUL-24

TERRERI, NATALIE, PA

Provider ID: N/A

☞ 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

PODIATRIST

DAL PORTO-KUJANPAA, STEPHANIE, DPM

Provider ID: N/A

☞ 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691

Effective as of 01-JAN-23

DAL PORTO-KUJANPAA, STEPHANIE, DPM

Provider ID: N/A

☞ 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 420
MISSION VIEJO, CA 92691
Effective as of 01-JUN-20

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 420
MISSION VIEJO, CA 92691
Effective as of 01-JUN-20

GOLSHAHI, BAHAR, DPM

Provider ID: N/A

☞ 26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

GOLSHAHI, BAHAR, DPM

Provider ID: N/A

☞ 26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

HAIDER, SANDRA, DPM


Provider ID: N/A

☞ 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

HAIDER, SANDRA, DPM


Provider ID: N/A

C1. 网络提供者名单 专科护理医生

 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24


HEHE, KYLE, DPM

Provider ID: N/A

 26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-AUG-23


HEHE, KYLE, DPM

Provider ID: N/A

 26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-AUG-23


MCCANN, JAN, DPM

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 485
MISSION VIEJO, CA 92691
Effective as of 01-AUG-19


MCGRATH, BENJAMIN, DPM

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23


MCGRATH, BENJAMIN, DPM

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23


MCGRATH, BENJAMIN, DPM

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23


MCGRATH, BENJAMIN, DPM

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23


MCGRATH, BENJAMIN, DPM

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23


MCGRATH, BENJAMIN, DPM

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23


MCGRATH, BENJAMIN, DPM

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23


NGUYEN, HAN, DPM†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

NGUYEN, HAN, DPM†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

NGUYEN, HAN, DPM†


Provider ID: N/A

 26732 CROWN VALLEY

PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20


NOSRATI, SAM, DPM†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 420
MISSION VIEJO, CA 92691
Effective as of 01-NOV-19


NOSRATI, SAM, DPM†

Provider ID: N/A

 26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21


NOSRATI, SAM, DPM†

Provider ID: N/A

 26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21


PENERA, KEITH, DPM†

Provider ID: N/A

 26991 CROWN VALLEY
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21


RAMBACHER, THOMAS, DPM†

Provider ID: N/A

 26302 LA PAZ RD STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

RAMBACHER, THOMAS, DPM†

Provider ID: N/A

 26302 LA PAZ RD STE 101
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

RAMBACHER, THOMAS, DPM†

Provider ID: N/A

 26302 LA PAZ RD STE 101


C1. 网络提供者名单

专科护理医生

MISSION VIEJO, CA 92691
Effective as of 01-JUN-19


SCHMALHAUS, MONTE, DPM

Provider ID: N/A

 26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

SCHMALHAUS, MONTE, DPM


Provider ID: N/A

 26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

PSYCHIATRY


ANOSHIVANI, ARDE, MD†

Provider ID: N/A

 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22


ANOSHIVANI, ARDE, MD†

Provider ID: N/A

 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22


BENESCH, ERIN, DO†

Provider ID: N/A

 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

BENESCH, ERIN, DO†

Provider ID: N/A

 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

DENNIS, TSHEKEDI, MD†


Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691

Effective as of 01-AUG-24


DENNIS, TSHEKEDI, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24


DENNIS, TSHEKEDI, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

DENNIS, TSHEKEDI, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


DENNIS, TSHEKEDI, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


DENNIS, TSHEKEDI, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22


DENNIS, TSHEKEDI, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24


DENNIS, TSHEKEDI, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24


PLOESSER, MARKUS, MD

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


PLOESSER, MARKUS, MD

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


PLOESSER, MARKUS, MD

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


PLOESSER, MARKUS, MD

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


SCOGGIN, MERLYN, MD

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24


SCOGGIN, MERLYN, MD

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24

SCOGGIN, MERLYN, MD

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

SCOGGIN, MERLYN, MD

Provider ID: N/A


 26024 ACERO
MISSION VIEJO, CA 92691

C1. 网络提供者名单 专科护理医生

Effective as of 01-JUN-24


SCOGGIN, MERLYN, MD

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24


SCOGGIN, MERLYN, MD

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

SCOGGIN, MERLYN, MD

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24


SCOGGIN, MERLYN, MD

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24


SHREIBA, MOHAMMED, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22


SHREIBA, MOHAMMED, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

SHREIBA, MOHAMMED, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

SHREIBA, MOHAMMED, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22


SHREIBA, MOHAMMED, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


SHREIBA, MOHAMMED, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


SHREIBA, MOHAMMED, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

SHREIBA, MOHAMMED, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22


SHREIBA, MOHAMMED, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

SHREIBA, MOHAMMED, MD†


Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

PSYCHOLOGIST


FRANCIS, CATHERINE, PSYD

Provider ID: N/A

 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22


FRANCIS, CATHERINE, PSYD

Provider ID: N/A

 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21


FRANCIS, CATHERINE, PSYD

Provider ID: N/A

 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22


FRANCIS, CATHERINE, PSYD

Provider ID: N/A

 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21


FRANCIS, CATHERINE, PSYD

Provider ID: N/A

 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22


FRANCIS, CATHERINE, PSYD

Provider ID: N/A

 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

HAMILTON, JOANNE, PhD

Provider ID: N/A

 29122 RANCHO VIEJO RD
STE 102G
MISSION VIEJO, CA 92675
Effective as of 01-MAR-24

HAMILTON, JOANNE, PhD

Provider ID: N/A

 29122 RANCHO VIEJO RD
STE 102G

C1. 网络提供者名单 专科护理医生

MISSION VIEJO, CA 92675
Effective as of 01-MAR-24

HAMILTON, JOANNE, PhD

Provider ID: N/A

29122 RANCHO VIEJO RD
STE 102G
MISSION VIEJO, CA 92675
Effective as of 01-MAR-24

HAMILTON, JOANNE, PhD

Provider ID: N/A

29122 RANCHO VIEJO RD
STE 102G
MISSION VIEJO, CA 92675
Effective as of 01-MAR-24

HANDLEY, KAREN, PhD

Provider ID: N/A

26441 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

HANDLEY, KAREN, PhD

Provider ID: N/A

26441 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

HANDLEY, KAREN, PhD

Provider ID: N/A

26441 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

HANDLEY, KAREN, PhD

Provider ID: N/A

26441 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

KIENZLE, HELEN, PhD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

KIENZLE, HELEN, PhD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

KUECHLE, RALPH, PhD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

KUECHLE, RALPH, PhD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

KUECHLE, RALPH, PhD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

KUECHLE, RALPH, PhD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

MARCUS, DEKE, PhD

Provider ID: N/A

27201 PUERTA REAL STE
300
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

MARCUS, DEKE, PhD

Provider ID: N/A

27201 PUERTA REAL STE
300
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

MELE, ANTHONY, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MELE, ANTHONY, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MELE, ANTHONY, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21

MELE, ANTHONY, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21

MELE, ANTHONY, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MELE, ANTHONY, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MONTEL, SEBASTIEN, PhD†

Provider ID: N/A

27201 PUERTA REAL STE
300

C1. 网络提供者名单 专科护理医生

MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

MONTEL, SEBASTIEN, PhD†

Provider ID: N/A

📍 27201 PUERTA REAL STE
300

MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

MONTEL, SEBASTIEN, PhD†

Provider ID: N/A

📍 27201 PUERTA REAL STE
300

MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

MONTEL, SEBASTIEN, PhD†

Provider ID: N/A

📍 27201 PUERTA REAL STE
300

MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

REZNICK, HARRELL, PSYD†

Provider ID: N/A

📍 26051 ACERO STE 100
MISSION VIEJO, CA 92691

Effective as of 01-JUN-22

REZNICK, HARRELL, PSYD†

Provider ID: N/A

📍 26051 ACERO STE 100
MISSION VIEJO, CA 92691

Effective as of 01-JUN-22

ZAYAT, DINA, PSYD

Provider ID: N/A

📍 26051 ACERO STE 100
MISSION VIEJO, CA 92691

Effective as of 01-JUL-22

ZAYAT, DINA, PSYD

Provider ID: N/A

📍 26051 ACERO STE 100

MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

ZAYAT, DINA, PSYD

Provider ID: N/A

📍 26051 ACERO STE 100
MISSION VIEJO, CA 92691

Effective as of 01-JUL-22

ZAYAT, DINA, PSYD

Provider ID: N/A

📍 26051 ACERO STE 100
MISSION VIEJO, CA 92691

Effective as of 01-JUL-22

PULMONARY DISEASES

GOLDBERG, ROBERT, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691

Effective as of 01-DEC-14

GOMEZ, GABRIEL, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691

Effective as of 01-OCT-18

GOMEZ, GABRIEL, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691

Effective as of 01-OCT-18

QURESHI, TAUSEEF, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691

Effective as of 01-JUL-15

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691

Effective as of 01-MAY-12

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691

Effective as of 01-APR-11

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691

Effective as of 01-OCT-99

TAMMELIN, BRUCE, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-NOV-12

TAMMELIN, BRUCE, MD†

Provider ID: N/A

📍 26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691

Effective as of 01-SEP-10

TAMMELIN, BRUCE, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-MAR-08

RADIATION ONCOLOGY

CHOU, WILLIAM, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

CHOU, WILLIAM, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

CHOU, WILLIAM, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

CHOU, WILLIAM, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

CHOU, WILLIAM, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-20

CHOU, WILLIAM, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 160
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

FENG, CHU-PEI, MD†

Provider ID: N/A

27700 MEDICAL CENTER
RD STE 2
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

FENG, CHU-PEI, MD†

Provider ID: N/A

27700 MEDICAL CENTER
RD STE 2
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

FENG, CHU-PEI, MD†

Provider ID: N/A

27700 MEDICAL CENTER
RD STE 2
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

FENG, CHU-PEI, MD†

Provider ID: N/A

27700 MEDICAL CENTER
RD STE 2
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

LEE, SHARON, MD†

Provider ID: N/A

27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

LIU, GENE FU, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

LIU, GENE FU, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

LIU, GENE FU, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21

LIU, GENE FU, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

YOUNG, CAROLYN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

YOUNG, CAROLYN, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 160
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

RHEUMATOLOGY

CASTRO RUEDA, HERNAN, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151

C1. 网络提供者名单 专科护理医生

MISSION VIEJO, CA 92691
Effective as of 01-AUG-17

DRIVER, CATHERINE, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151

MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

DRIVER, CATHERINE, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151

MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

JAFARI FARSHAMI, FATEMEH, MD

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-SEP-23

KOVACS, DAVID, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691

Effective as of 01-APR-16

PHILIPOSE, JAYA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691

Effective as of 01-APR-16

PHILIPOSE, JAYA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691

Effective as of 01-APR-16

SINGH, SIMRANJIT, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691

Effective as of 01-SEP-19

SINGH, SIMRANJIT, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691

Effective as of 01-SEP-19

SURGERY COLON SURGERY

BRADY, MATTHEW, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691

Effective as of 01-MAR-21

BRADY, MATTHEW, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

BRADY, MATTHEW, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

BRADY, MATTHEW, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440

MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

BRADY, MATTHEW, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691

Effective as of 01-JUN-21

BRADY, MATTHEW, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691

Effective as of 01-JUN-21

BRADY, MATTHEW, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691

Effective as of 01-JUN-21

BRADY, MATTHEW, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691

Effective as of 01-MAR-21

SURGERY CRITICAL CARE

YU, PETER, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691

Effective as of 01-MAR-23

SURGERY GENERAL

ABOU ABBASS, AHMAD, MD†

C1. 网络提供者名单

专科护理医生

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JAN-22

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691

Effective as of 01-JUN-21

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

ANDERSON, MARLA, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

ANDERSON, MARLA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ANDERSON, MARLA, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

ANDERSON, MARLA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

ANDERSON, MARLA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

ANDERSON, MARLA, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

ANDERSON, MARLA, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

ANDERSON, MARLA, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

BACON, LOUISE, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

BACON, LOUISE, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

BACON, LOUISE, MD†

Provider ID: N/A


27799 MEDICAL CENTER

C1. 网络提供者名单 专科护理医生

RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23


BACON, LOUISE, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


BACON, LOUISE, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18


BACON, LOUISE, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21


BACON, LOUISE, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


BRADY, MATTHEW, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21


BRADY, MATTHEW, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22


BRADY, MATTHEW, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21


KUSHNER, KENNETH, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23


KUSHNER, KENNETH, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23


KUSHNER, KENNETH, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18


KUSHNER, KENNETH, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


KUSHNER, KENNETH, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


KUSHNER, KENNETH, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

KUSHNER, KENNETH, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


LAM, VINH, MD†

Provider ID: N/A

 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-DEC-18


ROBERTSON, ELSIE, MD

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

ROBERTSON, ELSIE, MD

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

C1. 网络提供者名单 专科护理医生

ROBERTSON, ELSIE, MD

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

ROBERTSON, ELSIE, MD

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

ROBERTSON, ELSIE, MD

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD

STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

SHAVER, JOHN, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

SURGERY

NEUROLOGICAL

KIM, KEUN-YOUNG, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-15

KIM, KEUN-YOUNG, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-15

KIM, KEUN-YOUNG, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-15

KIM, KEUN-YOUNG, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-15

LIAUW, JASON, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 561
MISSION VIEJO, CA 92691
Effective as of 01-APR-16

MEHTA, VIVEK, MD†

C1. 网络提供者名单

专科护理医生

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21

MUHONEN, MICHAEL, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

NWAGWU, CHIEDOZIE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

NWAGWU, CHIEDOZIE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-AUG-23

NWAGWU, CHIEDOZIE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-AUG-23

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-DEC-22

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-NOV-16

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-NOV-16

TAGHVA, ALEXANDER, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-AUG-15

TAGHVA, ALEXANDER, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-AUG-15

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541

C1. 网络提供者名单 专科护理医生

MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

SURGERY ORTHOPEDIC

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-NOV-07

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

BURDI, MICHAEL, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

BURDI, MICHAEL, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-APR-12

CHEN, JAMES, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

CHEN, JAMES, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

CLAVERIA, RICHARD, MD

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-MAR-20

CLAVERIA, RICHARD, MD

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-MAR-20

DOBYNS, JEFFREY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-15

DUGGAN, DANIEL, DO†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

C1. 网络提供者名单

专科护理医生

DUGGAN, DANIEL, DO[†]

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

DUGGAN, DANIEL, DO[†]

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

DUGGAN, DANIEL, DO[†]

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

DUGGAN, DANIEL, DO[†]

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

DUGGAN, DANIEL, DO[†]

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

ELZIK, MARK, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

ELZIK, MARK, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-23

ELZIK, MARK, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

FITZPATRICK, MICHAEL, MD[†]

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

FITZPATRICK, MICHAEL, MD[†]

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUL-07

FITZPATRICK, MICHAEL, MD[†]

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

FITZPATRICK, MICHAEL, MD[†]

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

GARDNER, STEPHEN, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-DEC-14

GARDNER, STEPHEN, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

GUERRERO, EVAN, MD[†]

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-NOV-21

GUERRERO, EVAN, MD[†]

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-NOV-21

GVOZDYEV, BORYS, MD[†]

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD[†]

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD[†]

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

HANJAN, TIVA, MD[†]

C1. 网络提供者名单

专科护理医生

Provider ID: N/A

☐ 26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-FEB-18

HUO, KEUN-HENG, MD†

Provider ID: N/A

☐ 27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

☐ 27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

☐ 27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

☐ 27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

☐ 27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

LALONDE, FRANCOIS, MD†

Provider ID: N/A

☐ 25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-SEP-19

LALONDE, FRANCOIS, MD†

Provider ID: N/A

☐ 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-12

LALONDE, FRANCOIS, MD†

Provider ID: N/A

☐ 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

LALONDE, FRANCOIS, MD†

Provider ID: N/A

☐ 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

LALONDE, FRANCOIS, MD†

Provider ID: N/A

☐ 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

LALONDE, FRANCOIS, MD†

Provider ID: N/A

☐ 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-08

MAJUMDAR, ADITI, MD†

Provider ID: N/A

☐ 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

MAJUMDAR, ADITI, MD†

Provider ID: N/A

☐ 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

MARANGI, KENT, MD†

Provider ID: N/A

☐ 26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUL-12

MARANGI, KENT, MD†

Provider ID: N/A

☐ 26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-APR-12

MISAGHI, AMIRHOSSEIN, MD†

Provider ID: N/A

☐ 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

MISAGHI, AMIRHOSSEIN, MD†

Provider ID: N/A

☐ 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

MISAGHI, AMIRHOSSEIN, MD†

Provider ID: N/A

☐ 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

MORRIS, JOHN, MD†

Provider ID: N/A

☐ 26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-APR-12

MORRIS, JOHN, MD†

Provider ID: N/A

☐ 26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUL-12

C1. 网络提供者名单 专科护理医生

PARK, SAMUEL, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

PARK, SAMUEL, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

PARK, SAMUEL, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

PARK, SAMUEL, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

PODOLSKY, ANATOL, MD†

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

PODOLSKY, ANATOL, MD†

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

PODOLSKY, ANATOL, MD†

Provider ID: N/A

26921 CROWN VALLEY

PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

PODOLSKY, ANATOL, MD†

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21

ROSENFELD, SAMUEL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

ROSENFELD, SAMUEL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-12

ROSENFELD, SAMUEL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-MAR-20

ROSENFELD, SAMUEL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-08

SCHLECHTER, JOHN, DO†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-20

C1. 网络提供者名单 专科护理医生

TOCCI, STEPHEN, MD

Provider ID: N/A

📍 26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

TOCCI, STEPHEN, MD

Provider ID: N/A

📍 26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

WANG, WILLIAM, MD†

Provider ID: N/A

📍 26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-18

WANG, WILLIAM, MD†

Provider ID: N/A

📍 26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-18

WEINERT, CARL, MD†

Provider ID: N/A

📍 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-12

WEINERT, CARL, MD†

Provider ID: N/A

📍 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

WEINERT, CARL, MD†

Provider ID: N/A

📍 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-08

SURGERY PEDIATRIC

GERMAN, JOHN, MD†

Provider ID: N/A

📍 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAR-18

LAM, VINH, MD†

Provider ID: N/A

📍 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

LAM, VINH, MD†

Provider ID: N/A

📍 27800 MEDICAL CENTER
RD STE 138
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

LAM, VINH, MD†

Provider ID: N/A

📍 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JUL-17

LAM, VINH, MD†

Provider ID: N/A

📍 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-SEP-17

LAM, VINH, MD†

Provider ID: N/A

📍 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-SEP-17

SURGERY PLASTIC

LEE, MICHAEL, MD

Provider ID: N/A

📍 26800 CROWN VALLEY

PKWY STE 410
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

SURGERY THORACIC

FOWLER, AARON, MD†

Provider ID: N/A

📍 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A

📍 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A

📍 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A

📍 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A

📍 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A


📍 26732 CROWN VALLEY
PKWY STE 226

C1. 网络提供者名单 专科护理医生

MISSION VIEJO, CA 92691
Effective as of 01-OCT-20


SAFFARZADEH, AREO, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


SAFFARZADEH, AREO, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


SAFFARZADEH, AREO, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21


SAFFARZADEH, AREO, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21


TANG, TAYLOR, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-NOV-16


TANG, TAYLOR, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-NOV-16


TANG, TAYLOR, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-NOV-16


TANG, TAYLOR, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-NOV-16


TANG, TAYLOR, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 461
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19


TANG, TAYLOR, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 461
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19


THIBAUT, WILLIAM, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-19

THIBAUT, WILLIAM, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-19

THIBAUT, WILLIAM, MD†


Provider ID: N/A

 26732 CROWN VALLEY

PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-19


THIBAUT, WILLIAM, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-19


THIBAUT, WILLIAM, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-21


THIBAUT, WILLIAM, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-21


WON, EUGENE, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


WON, EUGENE, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

WON, EUGENE, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

C1. 网络提供者名单 专科护理医生

WON, EUGENE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

WON, EUGENE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

WON, EUGENE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

WON, EUGENE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

WON, EUGENE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

WON, EUGENE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

UROLOGY

BUI, DON, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

BUI, DON, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

BUI, DON, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

BUI, DON, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

BUI, DON, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

CHAMBERLIN, DAVID, MD

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

CHAMBERLIN, DAVID, MD

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

GRUENENFELDER, JENNIFER, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

HO, TAMMY, MD†

Provider ID: N/A

26800 CROWN VALLEY

C1. 网络提供者名单 专科护理医生

PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

HO, TAMMY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

HO, TAMMY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

HO, TAMMY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

HO, TAMMY, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

HO, TAMMY, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

HO, TAMMY, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

HO, TAMMY, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

KIM, MOSES, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

KIM, MOSES, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

KIM, MOSES, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

KIM, MOSES, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

KIM, MOSES, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

KIM, MOSES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

KIM, MOSES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340

MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

MEAGLIA, JAMES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

MEAGLIA, JAMES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

MEAGLIA, JAMES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

MEAGLIA, JAMES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

MEAGLIA, JAMES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

MEAGLIA, JAMES, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

NAKAMURA, LEAH, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

NAKAMURA, LEAH, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

NAKAMURA, LEAH, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

NAKAMURA, LEAH, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

NAKAMURA, LEAH, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

NAKAMURA, LEAH, MD

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

NAKAMURA, LEAH, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

NAKAMURA, LEAH, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

NAKAMURA, LEAH, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JUN-24

NAKAMURA, LEAH, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

NAKAMURA, LEAH, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

PASIN, ERIK, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 445
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

RANDALL, JOSH, MD

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

RANDALL, JOSH, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

RANDALL, JOSH, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

RANDALL, JOSH, MD†

Provider ID: N/A

26691 PLAZA STE 120

C1. 网络提供者名单 专科护理医生

MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

RANDALL, JOSH, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

RANDALL, JOSH, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

RANDALL, JOSH, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

SHOURESHI, POONE, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-24

SINGH, KARAN, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

SINGH, KARAN, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

SINGH, KARAN, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

SINGH, KARAN, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

SINGH, KARAN, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

SINGH, KARAN, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

SINGH, KARAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

SINGH, KARAN, MD†

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

SINGH, KARAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

SINGH, KARAN, MD†

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

SINGH, KARAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

SINGH, KARAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

SINGH, KARAN, MD†

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

SINGH, KARAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

SPITZ, AARON, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

SPITZ, AARON, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

SPITZ, AARON, MD†

Provider ID: N/A

C1. 网络提供者名单

专科护理医生

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

SPITZ, AARON, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

SPITZ, AARON, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

SPITZ, AARON, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

SPITZ, AARON, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

SPITZ, AARON, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

SPITZ, AARON, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

STEPHANY, HEIDI, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JAN-24

SU, DANIEL, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

SU, DANIEL, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

SU, DANIEL, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

SU, DANIEL, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

SU, DANIEL, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

SU, DANIEL, MD

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

SU, DANIEL, MD

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

SU, DANIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

SU, DANIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

C1. 网络提供者名单 专科护理医生

Effective as of 01-MAY-21

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-JAN-23

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JAN-23

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JUN-18

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

ALLERGY IMMUNOLOGY

IMAM, ASIF, MD

Provider ID: N/A

40680 CALIFORNIA OAKS
RD STE 1A
MURRIETA, CA 92562

Effective as of 01-MAR-23

IMAM, ASIF, MD

Provider ID: N/A

40680 CALIFORNIA OAKS
RD STE 1A
MURRIETA, CA 92562

Effective as of 01-MAR-23

IMAM, ASIF, MD

Provider ID: N/A

40680 CALIFORNIA OAKS
RD STE 1A
MURRIETA, CA 92562

Effective as of 01-MAR-23

ANESTHESIOLOGY

BAKER, BRUCE, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-AUG-22

DRUET, JACK, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 102
MURRIETA, CA 92562

Effective as of 01-JUL-23

KRAUSE, MARTIN, MD†

Provider ID: N/A

25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

Effective as of 01-FEB-22

ANESTHESIOLOGY PAIN MANAGEMENT

AUSTIN, MARK, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 102
MURRIETA, CA 92562

Effective as of 01-JUL-23

BETTS, ANDRES, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-NOV-23

BETTS, ANDRES, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-NOV-23

KELLING, JONATHAN, MD†

Provider ID: N/A

38860 SKY CANYON DR
BLDG A
MURRIETA, CA 92563

Effective as of 01-DEC-18

KELLING, JONATHAN, MD†

Provider ID: N/A

38860 SKY CANYON DR
BLDG A
MURRIETA, CA 92563

Effective as of 01-JUL-23

C1. 网络提供者名单 专科护理医生

KHATIBI, NIKAN, DO[†]

Provider ID: N/A

☞ 24910 LAS BRISAS RD STE
121
MURRIETA, CA 92562
Effective as of 01-SEP-22

CARDIAC ELECTROPHYSIOLOGY

OSHODI, GANIYU, MD[†]

Provider ID: N/A

☞ 40700 CALIFORNIA OAKS
RD STE 208
MURRIETA, CA 92562*
Effective as of 01-JUL-23

OSHODI, GANIYU, MD[†]

Provider ID: N/A

☞ 40700 CALIFORNIA OAKS
RD STE 208
MURRIETA, CA 92562
Effective as of 01-FEB-19

CARDIOVASCULAR DISEASE

ALTURJUMAN, AHMAD, MD[†]

Provider ID: N/A

☞ 29995 TECHNOLOGY DR
STE 302
MURRIETA, CA 92563
Effective as of 01-JUL-22

ALTURJUMAN, AHMAD, MD[†]

Provider ID: N/A

☞ 29995 TECHNOLOGY DR
STE 302
MURRIETA, CA 92563
Effective as of 01-MAR-22

ALTURJUMAN, AHMAD, MD[†]

Provider ID: N/A

☞ 29995 TECHNOLOGY DR

STE 302
MURRIETA, CA 92563
Effective as of 01-MAR-22

ALTURJUMAN, AHMAD, MD[†]

Provider ID: N/A

☞ 40700 CALIFORNIA OAKS
RD STE 208
MURRIETA, CA 92562
Effective as of 01-NOV-22

AMIN, JATIN, MD[†]

Provider ID: N/A

☞ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-JUL-24

AMIN, JATIN, MD[†]

Provider ID: N/A

☞ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-AUG-20

ATTIA, NADER, DO[†]

Provider ID: N/A

☞ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-AUG-24

ATTIA, NADER, DO[†]

Provider ID: N/A

☞ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-MAR-20

ATTIA, NADER, DO[†]

Provider ID: N/A

☞ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice

Effective as of 01-MAY-21

ATTIA, NADER, DO[†]

Provider ID: N/A

☞ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-JUL-22

ATTIA, NADER, DO[†]

Provider ID: N/A

☞ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-SEP-18

BISWAS, MIMI, MD[†]

Provider ID: N/A

☞ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-FEB-17

BISWAS, MIMI, MD[†]

Provider ID: N/A

☞ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-FEB-17

BISWAS, MIMI, MD[†]

Provider ID: N/A

☞ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice

C1. 网络提供者名单 专科护理医生

Effective as of 01-FEB-17

BISWAS, MIMI, MD[†]

Provider ID: N/A

☐ 39755 MURRIETA HOT SPRINGS RD BLDG G MURRIETA, CA 92563

Teleservice

Effective as of 01-FEB-17

BISWAS, MIMI, MD[†]

Provider ID: N/A

☐ 39755 MURRIETA HOT SPRINGS RD BLDG G MURRIETA, CA 92563

Teleservice

Effective as of 01-FEB-17

COLLINS, BRIAN, MD[†]

Provider ID: N/A

☐ 40700 CALIFORNIA OAKS RD STE 208 MURRIETA, CA 92562

Effective as of 01-NOV-22

MESSENGER, BRADLEY, MD[†]

Provider ID: N/A

☐ 39755 MURRIETA HOT SPRINGS RD BLDG G MURRIETA, CA 92563

Teleservice

Effective as of 01-AUG-20

MUKHERJEE, ASHIS, MD[†]

Provider ID: N/A

☐ 28078 BAXTER RD STE 110 MURRIETA, CA 92563*

Effective as of 01-JUL-23

OSHODI, GANIYU, MD

Provider ID: N/A

☐ 40770 CALIFORNIA OAKS RD STE A MURRIETA, CA 92562

Effective as of 01-MAR-23

OSHODI, GANIYU, MD[†]

Provider ID: N/A

☐ 40700 CALIFORNIA OAKS RD STE 208 MURRIETA, CA 92562

Effective as of 01-JAN-21

PATANKAR, KAUSTUBH, MD[†]

Provider ID: N/A

☐ 39755 MURRIETA HOT SPRINGS RD BLDG G MURRIETA, CA 92563

Effective as of 01-FEB-22

PATANKAR, KAUSTUBH, MD[†]

Provider ID: N/A

☐ 39755 MURRIETA HOT SPRINGS RD BLDG G MURRIETA, CA 92563

Effective as of 01-SEP-18

SCHWARZ, ERNST, MD[†]

Provider ID: N/A

☐ 25470 MEDICAL CENTER DR STE 201 MURRIETA, CA 92562

Effective as of 01-SEP-21

SCHWARZ, ERNST, MD[†]

Provider ID: N/A

☐ 25470 MEDICAL CENTER DR STE 201 MURRIETA, CA 92562

Effective as of 01-FEB-21

SCHWARZ, ERNST, MD[†]

Provider ID: N/A

☐ 39755 DATE ST STE 205 MURRIETA, CA 92563

Effective as of 01-AUG-22

SCHWARZ, ERNST, MD[†]

Provider ID: N/A

☐ 39755 DATE ST STE 205

MURRIETA, CA 92563

Effective as of 01-AUG-22

CERTIFIED NURSE PRACTITIONER

ANDERSON, TRACEY, NP[†]

Provider ID: N/A

☐ 25150 HANCOCK AVE STE 210 MURRIETA, CA 92562

Effective as of 01-FEB-20

ANDERSON, TRACEY, NP[†]

Provider ID: N/A

☐ 25150 HANCOCK AVE STE 210 MURRIETA, CA 92562

Effective as of 01-FEB-20

ANDERSON, TRACEY, NP[†]

Provider ID: N/A

☐ 25150 HANCOCK AVE STE 210 MURRIETA, CA 92562

Effective as of 01-FEB-20

ANDERSON, TRACEY, NP[†]

Provider ID: N/A

☐ 25150 HANCOCK AVE STE 210 MURRIETA, CA 92562

Effective as of 01-FEB-20

ANDERSON, TRACEY, NP[†]

Provider ID: N/A

☐ 25150 HANCOCK AVE STE 210 MURRIETA, CA 92562

Effective as of 01-DEC-20

BARBOZA, GEORGE, NP

Provider ID: N/A

☐ 39755 MURRIETA HOT SPRINGS RD

C1. 网络提供者名单 专科护理医生

MURRIETA, CA 92563
Effective as of 01-SEP-22

BARBOZA, GEORGE, NP

Provider ID: N/A

📍 39755 MURRIETA HOT
SPRINGS RD
MURRIETA, CA 92563
Effective as of 01-SEP-22

BASA, GRACIOUS, NPF

Provider ID: N/A

📍 41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JUN-24

BEDFORD, RONALD, NP†

Provider ID: N/A

📍 25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-SEP-22

BEDFORD, RONALD, NP†

Provider ID: N/A

📍 25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-SEP-22

BEDFORD, RONALD, NP†

Provider ID: N/A

📍 25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-MAY-22

BEDFORD, RONALD, NP†

Provider ID: N/A

📍 25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-MAY-22

BEDFORD, RONALD, NP†

Provider ID: N/A

📍 25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-MAY-22

CAMPBELL, AMBER, NP

Provider ID: N/A

📍 25470 MEDICAL CENTER
DR STE 102
MURRIETA, CA 92562
Effective as of 01-JAN-22

CORCORAN, KIMBERLY, NP

Provider ID: N/A

📍 24910 LAS BRISAS RD STE
105
MURRIETA, CA 92562
Effective as of 01-OCT-19

DAO, NU, NP†

Provider ID: N/A

📍 28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-MAR-21

DONLON, RYAN, NPF

Provider ID: N/A

📍 24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

📍 24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

📍 24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

📍 24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-MAR-24

FAIQ, JAMILA, NP†

Provider ID: N/A

📍 25405 HANCOCK AVE STE
206
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-22

GUTIERREZ, CRYSTAL, NP†

Provider ID: N/A

📍 25109 JEFFERSON AVE STE
100
MURRIETA, CA 92562
Effective as of 01-AUG-20

HARTMAN, JULIE, NPF

Provider ID: N/A

📍 25470 MEDICAL CENTER
DR STE 102
MURRIETA, CA 92562
Effective as of 01-SEP-23

HASAN, BUSHRA, NP

Provider ID: N/A

📍 25470 MEDICAL CENTER
DR STE 102
MURRIETA, CA 92562
Effective as of 01-OCT-22

HUERTA, CARMEN, NP†

Provider ID: N/A

📍 25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-OCT-22

HUERTA, CARMEN, NP†

Provider ID: N/A

📍 25405 HANCOCK AVE STE
200

C1. 网络提供者名单 专科护理医生

MURRIETA, CA 92562
Effective as of 01-DEC-22

KLEWEIN, CRYSTAL, NPF

Provider ID: N/A

40770 CALIFORNIA OAKS
RD STE A
MURRIETA, CA 92562
Effective as of 01-MAY-23

KULJIAN, NANCY, NP

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD STE E
MURRIETA, CA 92563
Effective as of 01-AUG-21

MOONEY, PATRICIA, NP†

Provider ID: N/A

25405 HANCOCK AVE STE
206
MURRIETA, CA 92562
Teleservice
Effective as of 01-MAY-21

MWAURA, WAIRIMU, NP†

Provider ID: N/A

25405 HANCOCK AVE STE
206
MURRIETA, CA 92562
Teleservice
Effective as of 01-JUN-21

PIZZIFRED, TIFFINY, NP†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-JAN-18

PIZZIFRED, TIFFINY, NP†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562

Effective as of 01-JAN-18

SHEIKH, SARAH, NP

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-MAY-23

SHEIKH, SARAH, NP

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-OCT-16

SHEIKH, SARAH, NP

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-MAY-23

SICKELS, JENNIFER, NP

Provider ID: N/A

24910 LAS BRISAS RD STE
105
MURRIETA, CA 92562
Effective as of 01-NOV-19

VIERA, LIANA, NP†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD
MURRIETA, CA 92563
Effective as of 01-JAN-22

VIERA, LIANA, NP†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD
MURRIETA, CA 92563
Effective as of 01-JAN-22

WILLEY, MARTI, NP†

Provider ID: N/A

25405 HANCOCK AVE STE
206

MURRIETA, CA 92562
Teleservice

Effective as of 01-JUN-21

DERMATOLOGY

AWADALLA, FARAH, MD†

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-JUL-24

BROWN, REGINA, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562
Effective as of 01-AUG-24

FOWLER, VINCENT, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-FEB-24

FOWLER, VINCENT, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-FEB-24

KHERADMAND, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-MAY-22

KHERADMAND, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200

C1. 网络提供者名单 专科护理医生

MURRIETA, CA 92562
Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-MAY-23

KHERADMAND, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-MAY-22

KOUPAIE, JAFAR, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

KOUPAIE, JAFAR, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

KOUPAIE, JAFAR, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

KOUPAIE, JAFAR, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

MEHDI, RAZA, MD

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-JUL-24

MITCHELL, JESSE, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

MITCHELL, JESSE, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

MITCHELL, JESSE, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

MITCHELL, JESSE, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

ROSHDIEH, BABAK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200

MURRIETA, CA 92562
Effective as of 01-MAY-23

ROSHDIEH, BABAK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-JUL-23

SAIED, NAGI, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-18

SAIED, NAGI, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Teleservice
Effective as of 01-MAY-23

SAIED, NAGI, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-21

SAIED, NAGI, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Teleservice
Effective as of 01-DEC-19

SHAPIRO, STEVEN, MD

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-JUL-24

SHAPIRO, STEVEN, MD

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-MAR-24

SHAPIRO, STEVEN, MD

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-MAR-24

SIRICHOTIRATANA, MELISSA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562
Effective as of 01-JUL-22

TAHERI, DANIEL, MD†

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Teleservice
Effective as of 01-DEC-21

TAHERI, DANIEL, MD†

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Teleservice
Effective as of 01-APR-21

TAHERI, DANIEL, MD†

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562

Teleservice

Effective as of 01-APR-21

TANG, NIKKI, MD

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-JUL-24

THIELE, JENS, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562
Effective as of 01-JUL-22

VENKAT, ARUN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562
Effective as of 01-FEB-21

WILLETT, MATTHEW, MD

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-AUG-24

WILLETT, MATTHEW, MD

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-AUG-24

WILLETT, MATTHEW, MD

Provider ID: N/A

25405 HANCOCK AVE STE
200

MURRIETA, CA 92562
Effective as of 01-AUG-24

WILLETT, MATTHEW, MD

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-JUL-24

WINKELMANN, RICHARD, DO

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-JUL-24

ENDOCRINOLOGY

METABOLISM DIABETES

BUI, AMY-VAN, MD†

Provider ID: N/A

39765 DATE ST STE 102
MURRIETA, CA 92563
Effective as of 01-NOV-13

FAMILY PRACTICE

FARZIN, ABDUL, MD

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE A
MURRIETA, CA 92562
Effective as of 01-MAR-24

MEMON, TALHA, MD†

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563
Effective as of 01-OCT-18

MEMON, TALHA, MD†

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563

C1. 网络提供者名单 专科护理医生

Effective as of 01-OCT-18

GASTROENTEROLOGY

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Effective as of 01-FEB-18

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Effective as of 01-SEP-15

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Effective as of 01-JUL-23

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 101
MURRIETA, CA 92562

Effective as of 01-AUG-20

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Effective as of 01-APR-20

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Effective as of 01-APR-17

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Effective as of 01-MAR-21

ARDIGO, GREGORY, MD†

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-JUL-23

ARDIGO, GREGORY, MD†

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-DEC-08

DINH, JACK, MD†

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-OCT-07

DINH, JACK, MD†

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-DEC-08

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAR-21

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-APR-20

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-APR-17

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-AUG-15

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-JUL-23

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-JUL-15

FLANNERY, CHRISTOPHER, MD

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C1
MURRIETA, CA 92562

C1. 网络提供者名单 专科护理医生

Effective as of 01-APR-23

FLANNERY, CHRISTOPHER, MD

Provider ID: N/A

📄 40663 MURRIETA HOT SPRINGS RD STE C1
MURRIETA, CA 92562

Effective as of 01-APR-23

FLANNERY, CHRISTOPHER, MD

Provider ID: N/A

📄 28078 BAXTER RD STE 530
MURRIETA, CA 92563

Effective as of 01-APR-23

FLANNERY, CHRISTOPHER, MD

Provider ID: N/A

📄 28078 BAXTER RD STE 530
MURRIETA, CA 92563

Effective as of 01-APR-23

NAKKA, SREENIVASA, MD†

Provider ID: N/A

📄 25495 MEDICAL CENTER DR STE 306
MURRIETA, CA 92562

Effective as of 01-OCT-16

NAKKA, SREENIVASA, MD†

Provider ID: N/A

📄 25495 MEDICAL CENTER DR STE 306
MURRIETA, CA 92562

Effective as of 01-OCT-16

NAKKA, SREENIVASA, MD†

Provider ID: N/A

📄 25495 MEDICAL CENTER DR STE 306
MURRIETA, CA 92562

Effective as of 01-OCT-16

OJURI, ADEBAMBO, MD†

Provider ID: N/A

📄 25495 MEDICAL CENTER DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-APR-17

OJURI, ADEBAMBO, MD†

Provider ID: N/A

📄 25495 MEDICAL CENTER DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-JUL-23

OJURI, ADEBAMBO, MD†

Provider ID: N/A

📄 25495 MEDICAL CENTER DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAR-21

OJURI, ADEBAMBO, MD†

Provider ID: N/A

📄 25495 MEDICAL CENTER DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-JUL-24

OJURI, ADEBAMBO, MD†

Provider ID: N/A

📄 25495 MEDICAL CENTER DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAY-21

OJURI, ADEBAMBO, MD†

Provider ID: N/A

📄 25495 MEDICAL CENTER DR STE 302

MURRIETA, CA 92562

Teleservice

Effective as of 01-MAY-15

OJURI, ADEBAMBO, MD†

Provider ID: N/A

📄 25495 MEDICAL CENTER DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAY-15

RAGHUWANSHI, NAISHADH, MD†

Provider ID: N/A

📄 25495 MEDICAL CENTER DR STE 306
MURRIETA, CA 92562

Effective as of 01-MAY-18

RAGHUWANSHI, NAISHADH, MD†

Provider ID: N/A

📄 25495 MEDICAL CENTER DR STE 306
MURRIETA, CA 92562

Effective as of 01-OCT-16

RAGHUWANSHI, NAISHADH, MD†

Provider ID: N/A

📄 25495 MEDICAL CENTER DR STE 306
MURRIETA, CA 92562

Effective as of 01-OCT-16

TEYMOORIAN, ARIAN, MD†

Provider ID: N/A

📄 40404 CALIFORNIA OAKS RD STE C
MURRIETA, CA 92562

Effective as of 01-FEB-20

TEYMOORIAN, ARIAN, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562
Effective as of 01-SEP-19

GENETICS CLINICAL

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE
210
MURRIETA, CA 92562
Effective as of 01-JUL-19

HEMATOLOGY / ONCOLOGY

AGAJANIAN, RICHY, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-JUL-23

ANDREY, JEFFREY, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-JUL-23

ANDREY, JEFFREY, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-JUL-24

BASERI, BABAK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
203
MURRIETA, CA 92562
Effective as of 01-JUL-24

BASERI, BABAK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
203
MURRIETA, CA 92562
Effective as of 01-JUL-21

BASERI, BABAK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
203
MURRIETA, CA 92562
Effective as of 01-JUL-21

BASERI, BABAK, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-FEB-24

BASERI, BABAK, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-APR-24

BASERI, BABAK, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-APR-23

BASERI, BABAK, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-JAN-24

BASERI, BABAK, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-AUG-24

BELLO, OSAGIE, MD

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-OCT-23

BELLO, OSAGIE, MD

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-OCT-23

BELLO, OSAGIE, MD

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-OCT-23

BESSUDO, ALBERTO, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
206
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-21

LEE, BYUNG, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-JUL-21

LEE, BYUNG, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
211

C1. 网络提供者名单 专科护理医生

MURRIETA, CA 92562
Effective as of 01-JUL-21

LEE, BYUNG, DO†

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-JUL-21

MARJON, PHILIP, MD

Provider ID: N/A
25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-APR-23

MASIELLO, DAVID, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-MAR-21

MOST, CAROLE, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-MAR-21

MOST, CAROLE, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-SEP-18

MOST, CAROLE, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-SEP-18

MOST, CAROLE, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-SEP-18

NAIK, RAHUL, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-MAR-21

SARWARI, NAWID, MD

Provider ID: N/A
25405 HANCOCK AVE STE
101
MURRIETA, CA 92562*
Effective as of 01-APR-23

SAUNDERS, PHILLIP, DO

Provider ID: N/A
25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-APR-23

SAUNDERS, PHILLIP, DO†

Provider ID: N/A
25405 HANCOCK AVE STE
203
MURRIETA, CA 92562
Effective as of 01-DEC-20

SCHWERKOSKE, JOHN, MD

Provider ID: N/A
25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-JUL-23

SCHWERKOSKE, JOHN, MD

Provider ID: N/A
25405 HANCOCK AVE STE

101
MURRIETA, CA 92562
Effective as of 01-JUL-24

SHUM, MERRILL, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
203
MURRIETA, CA 92562
Effective as of 01-JUL-23

TSANG, WALTER, MD†

Provider ID: N/A
25404 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-FEB-20

TSANG, WALTER, MD†

Provider ID: N/A
25404 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-FEB-20

TSANG, WALTER, MD†

Provider ID: N/A
25404 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-FEB-20

WANG, AMY, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-JUN-21

WANG, AMY, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-JUN-21

C1. 网络提供者名单 专科护理医生

WANG, AMY, MD†

Provider ID: N/A

📍 25405 HANCOCK AVE STE 211
MURRIETA, CA 92562
Effective as of 01-JUN-21

WANG, AMY, MD†

Provider ID: N/A

📍 25405 HANCOCK AVE STE 211
MURRIETA, CA 92562
Effective as of 01-JUN-21

INFECTIOUS DISEASE

HARFOUCH, CHAWKI, MD†

Provider ID: N/A

📍 28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAY-13

HARFOUCH, CHAWKI, MD†

Provider ID: N/A

📍 28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-JUL-23

KIM, EMILY, MD

Provider ID: N/A

📍 28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAR-24

KIM, EMILY, MD

Provider ID: N/A

📍 28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAR-24

KIM, EMILY, MD

Provider ID: N/A

📍 28078 BAXTER RD STE 320
MURRIETA, CA 92563

Effective as of 01-MAR-24

LE, THUAN, MD†

Provider ID: N/A

📍 28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAY-09

LE, THUAN, MD†

Provider ID: N/A

📍 28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAY-13

LE, THUAN, MD†

Provider ID: N/A

📍 28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-SEP-09

LE, THUAN, MD†

Provider ID: N/A

📍 28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-JAN-11

LE, THUAN, MD†

Provider ID: N/A

📍 28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-SEP-09

INTERNAL MEDICINE

BASERI, BABAK, MD†

Provider ID: N/A

📍 25405 HANCOCK AVE STE 203
MURRIETA, CA 92562
Effective as of 01-APR-24

HADDADIN, HASSAN, MD†

Provider ID: N/A

📍 28078 BAXTER RD STE 324
MURRIETA, CA 92563

Effective as of 01-SEP-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

📍 28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-SEP-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

📍 28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-SEP-22

HARFOUCH, CHAWKI, MD†

Provider ID: N/A

📍 28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-JUN-17

MONTANA, WILBUR, DO†

Provider ID: N/A

📍 25405 HANCOCK AVE STE 203
MURRIETA, CA 92562
Effective as of 01-NOV-18

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

PATEL, SAGAR, MD†

Provider ID: N/A

📍 25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Effective as of 01-AUG-21

INTERVENTIONAL CARDIOLOGY

AL KHIAMI, BELAL, MD†

Provider ID: N/A

📍 28062 BAXTER RD
MURRIETA, CA 92563

C1. 网络提供者名单 专科护理医生

Effective as of 01-JAN-21

AMIN, JATIN, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-JAN-19

ATTIA, NADER, DO†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-JAN-19

ATTIA, NADER, DO†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-APR-17

GAGLANI, RAHUL, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
230
MURRIETA, CA 92562

Effective as of 01-AUG-21

MESSINGER, BRADLEY, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-FEB-22

MESSINGER, BRADLEY, MD†

Provider ID: N/A

39755 MURRIETA HOT

SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-JAN-19

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Effective as of 01-JAN-19

SCHWARZ, ERNST, MD†

Provider ID: N/A

39755 DATE ST STE 205
MURRIETA, CA 92563

Effective as of 01-SEP-22

SCHWARZ, ERNST, MD†

Provider ID: N/A

39755 DATE ST STE 205
MURRIETA, CA 92563

Effective as of 01-SEP-22

MATERNAL AND FETAL MEDICINE

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE
210
MURRIETA, CA 92562

Effective as of 01-DEC-10

MEDICAL ONCOLOGY

PARSI, HOOMAN, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562

Effective as of 01-MAY-23

SHAIKH, ANWER, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101

MURRIETA, CA 92562

Effective as of 01-JUL-23

NEPHROLOGY

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE
108

MURRIETA, CA 92562

Effective as of 01-JUL-20

NEUROLOGY

ALVAREZ, PAMELA, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE
115

MURRIETA, CA 92562

Effective as of 01-MAR-15

ALVAREZ, PAMELA, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE
115

MURRIETA, CA 92562

Effective as of 01-MAY-14

NUNE, SUNITHA, MD†

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563

Effective as of 01-FEB-22

TALANKI, VARUN, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204

MURRIETA, CA 92562

Effective as of 01-DEC-22

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

24910 LAS BRISAS RD STE 108
MURRIETA, CA 92562
Effective as of 01-AUG-20

UDDIN, MOHAMMAD, MD†
Provider ID: N/A

24910 LAS BRISAS RD STE 108
MURRIETA, CA 92562
Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†
Provider ID: N/A

24910 LAS BRISAS RD STE 108
MURRIETA, CA 92562
Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†
Provider ID: N/A

24910 LAS BRISAS RD STE 108
MURRIETA, CA 92562
Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†
Provider ID: N/A

24910 LAS BRISAS RD STE 108
MURRIETA, CA 92562
Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†
Provider ID: N/A

24910 LAS BRISAS RD STE 108
MURRIETA, CA 92562
Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†
Provider ID: N/A

24910 LAS BRISAS RD STE 108
MURRIETA, CA 92562

Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE 108
MURRIETA, CA 92562
Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE 108
MURRIETA, CA 92562
Effective as of 01-JUL-20

NEUROLOGY CHILD

NUNE, SUNITHA, MD†

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563
Effective as of 01-APR-21

OBSTETRICS / GYNECOLOGY

ANDERSEN, MICHAEL, MD†

Provider ID: N/A

24619 WASHINGTON AVE
STE 104
MURRIETA, CA 92562
Effective as of 01-JAN-21

BINDER, PRATIBHA, MD†

Provider ID: N/A

25405 HANCOCK AVE STE 217
MURRIETA, CA 92562
Effective as of 01-JUL-21

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE 210

MURRIETA, CA 92562
Effective as of 01-NOV-08

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE 210
MURRIETA, CA 92562
Effective as of 01-JUL-11

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE 210
MURRIETA, CA 92562
Effective as of 01-SEP-23

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE 210
MURRIETA, CA 92562
Effective as of 01-SEP-23

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE 210
MURRIETA, CA 92562
Effective as of 01-SEP-23

CHIODI, MARTINA, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE 113
MURRIETA, CA 92562
Effective as of 01-MAR-20

DIMMETTE, PATTIE, MD

Provider ID: N/A

25405 HANCOCK AVE STE 203
MURRIETA, CA 92562
Effective as of 01-SEP-23

C1. 网络提供者名单

专科护理医生

ELFELT, TIMOTHY, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562
Effective as of 01-AUG-10

HAYTON, TAMMY, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562
Teleservice
Effective as of 01-AUG-10

HAYTON, TAMMY, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-22

JONES, KENDRA, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-22

JONES, KENDRA, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-22

LEBO, DEBRA, DO†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562

Effective as of 01-AUG-10

LEBO, DEBRA, DO†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562
Effective as of 01-SEP-22

LOCASCIO, ELIZABETH, DO†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562
Teleservice
Effective as of 01-FEB-18

LOCASCIO, ELIZABETH, DO†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-22

NEAL, JAMES, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 300
MURRIETA, CA 92562
Effective as of 01-JUL-23

QUINATA, FLORENCE, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 300
MURRIETA, CA 92562
Effective as of 01-JUL-23

SHAH, NEMI, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Teleservice

Effective as of 01-FEB-24

SHEHATA, HANNAH, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-OCT-21

THOMSON, EMILY, DO

Provider ID: N/A

25460 MEDICAL CENTER
DR
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-22

THOMSON, EMILY, DO

Provider ID: N/A

25460 MEDICAL CENTER
DR
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-22

TODD, CHRISTINE, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 300
MURRIETA, CA 92562
Effective as of 01-JUL-23

TRAN, THERESA, DO

Provider ID: N/A

24910 LAS BRISAS RD STE
113
MURRIETA, CA 92562
Effective as of 01-MAR-20

YANG, CHARLES, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562
Teleservice

C1. 网络提供者名单 专科护理医生

Effective as of 01-SEP-22

YANG, CHARLES, MD†

Provider ID: N/A

☒ 25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562

Teleservice

Effective as of 01-AUG-10

OCCUPATIONAL THERAPIST

BAST, SIDNEY, OT†

Provider ID: N/A

☒ 24671 MONROE AVE STE
101
MURRIETA, CA 92562

Effective as of 01-OCT-19

BAST, SIDNEY, OT†

Provider ID: N/A

☒ 24671 MONROE AVE STE
101
MURRIETA, CA 92562

Effective as of 01-OCT-19

CATIPON, GABRIELLE, OT

Provider ID: N/A

☒ 24671 MONROE AVE STE
C101
MURRIETA, CA 92562

Effective as of 01-MAY-23

CATIPON, GABRIELLE, OT

Provider ID: N/A

☒ 24671 MONROE AVE STE
C101
MURRIETA, CA 92562

Effective as of 01-MAY-23

DIMEGLIO, PAUL, OT†

Provider ID: N/A

☒ 24671 MONROE AVE STE
101

MURRIETA, CA 92562

Effective as of 01-FEB-21

DIMEGLIO, PAUL, OT†

Provider ID: N/A

☒ 24671 MONROE AVE STE
101

MURRIETA, CA 92562

Effective as of 01-FEB-21

MERCADO, ROBIN, MD

Provider ID: N/A

☒ 24671 MONROE AVE BLDG
C101
MURRIETA, CA 92562

Effective as of 01-MAY-24

MERCADO, ROBIN, MD

Provider ID: N/A

☒ 24671 MONROE AVE BLDG
C101
MURRIETA, CA 92562

Effective as of 01-MAY-24

STOTLER, APRIL, OT

Provider ID: N/A

☒ 24671 MONROE AVE STE
C201
MURRIETA, CA 92562

Effective as of 01-JAN-24

STOTLER, APRIL, OT

Provider ID: N/A

☒ 24671 MONROE AVE STE
C201
MURRIETA, CA 92562

Effective as of 01-JAN-24

ZECHA, RICHARD, OT†

Provider ID: N/A

☒ 24671 MONROE AVE STE
101 BLDG C
MURRIETA, CA 92562

Effective as of 01-JAN-21

ZECHA, RICHARD, OT†

Provider ID: N/A

☒ 24671 MONROE AVE STE
101 BLDG C
MURRIETA, CA 92562

Effective as of 01-JAN-21

OPHTHALMOLOGY

ABBOUD, JEAN-PAUL, MD†

Provider ID: N/A

☒ 40700 CALIFORNIA OAKS
RD STE 106
MURRIETA, CA 92562

Effective as of 01-MAR-18

CARLSON, JOHN, MD†

Provider ID: N/A

☒ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-FEB-21

CARLSON, JOHN, MD†

Provider ID: N/A

☒ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-FEB-21

CHAWLA, ANUJ, MD†

Provider ID: N/A

☒ 40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562

Effective as of 01-JUL-23

CHIN, ERIC, MD†

Provider ID: N/A

☒ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-FEB-21

CHIN, ERIC, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

☒ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-FEB-21

CHIN, ERIC, MD†

Provider ID: N/A

☒ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JAN-22

CHIN, ERIC, MD†

Provider ID: N/A

☒ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JUL-19

CHIN, ERIC, MD†

Provider ID: N/A

☒ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JUN-23

CHOW, JASON, MD†

Provider ID: N/A

☒ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JUL-23

CHOW, JASON, MD†

Provider ID: N/A

☒ 25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JUL-23

CHOW, JASON, MD†

Provider ID: N/A

☒ 25395 HANCOCK AVE STE
100

MURRIETA, CA 92562
Effective as of 01-FEB-24

CHOW, JASON, MD†

Provider ID: N/A

☒ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-OCT-22

CHOW, JASON, MD†

Provider ID: N/A

☒ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-SEP-22

CULOTTA, ANTHONY, MD†

Provider ID: N/A

☒ 40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-18

CULOTTA, ANTHONY, MD†

Provider ID: N/A

☒ 40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-18

CULOTTA, ANTHONY, MD†

Provider ID: N/A

☒ 40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-20

CULOTTA, ANTHONY, MD†

Provider ID: N/A

☒ 40690 CALIFORNIA OAKS
RD STE B

MURRIETA, CA 92562
Teleservice
Effective as of 01-MAY-21

CULOTTA, ANTHONY, MD†

Provider ID: N/A

☒ 40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-18

CULOTTA, ANTHONY, MD†

Provider ID: N/A

☒ 40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-18

DAVIS, MICHAEL, MD†

Provider ID: N/A

☒ 40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-24

DONALDSON, JARED, MD†

Provider ID: N/A

☒ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-SEP-22

DONALDSON, JARED, MD†

Provider ID: N/A

☒ 25395 HANCOCK AVE
MURRIETA, CA 92562
Effective as of 01-DEC-22

DONALDSON, JARED, MD†

Provider ID: N/A

☒ 25395 HANCOCK AVE STE

C1. 网络提供者名单 专科护理医生

100
MURRIETA, CA 92562
Effective as of 01-MAY-21

DONALDSON, JARED, MD†

Provider ID: N/A
25395 HANCOCK AVE
MURRIETA, CA 92562
Effective as of 01-JAN-23

DONALDSON, JARED, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JUL-21

DONALDSON, JARED, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JUL-21

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A
40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Effective as of 01-OCT-17

JOHNSON, ROGER, MD†

Provider ID: N/A
25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JUL-23

JOHNSON, ROGER, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JAN-22

JOHNSON, ROGER, MD†

Provider ID: N/A
25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JAN-22

JOHNSON, ROGER, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JAN-17

JOHNSON, ROGER, MD†

Provider ID: N/A
25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-FEB-22

JOHNSON, ROGER, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-FEB-22

JOSEPH, JEFFREY, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-AUG-19

JOSEPH, JEFFREY, MD†

Provider ID: N/A
25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-AUG-19

JOSEPH, JEFFREY, MD†

Provider ID: N/A
25395 HANCOCK AVE STE

100
MURRIETA, CA 92562
Effective as of 01-AUG-18

JOSEPH, JEFFREY, MD†

Provider ID: N/A
25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-DEC-21

JOSEPH, JEFFREY, MD†

Provider ID: N/A
25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JAN-22

JOSEPH, JEFFREY, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JUL-23

LOBUE, THOMAS, MD

Provider ID: N/A
40700 CALIFORNIA OAKS
RD STE 106
MURRIETA, CA 92562
Effective as of 01-OCT-09

NAWAZISH, SABA, MD†

Provider ID: N/A
40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Effective as of 01-JUL-23

PHILLIPS, BARRATT, MD†

Provider ID: N/A
25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JAN-22

C1. 网络提供者名单 专科护理医生

PHILLIPS, BARRATT, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-AUG-18

PHILLIPS, BARRATT, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-MAY-17

SORENSEN, ROBERT, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-DEC-21

SORENSEN, ROBERT, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JAN-22

VIDOR, IRA, MD†

Provider ID: N/A

40700 CALIFORNIA OAKS
RD
MURRIETA, CA 92562
Effective as of 01-JUL-19

OPTOMETRIST

ARCHIBALD, JOHN, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-DEC-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JUL-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-DEC-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JUL-23

COLEMAN, BROOKE, OD†

Provider ID: N/A

25395 HANCOCK AVE STE

100
MURRIETA, CA 92562
Effective as of 01-AUG-20

COOPER, MICHAEL, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-SEP-22

COOPER, MICHAEL, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-FEB-22

EVANS, RYAN, OD

Provider ID: N/A

40700 CALIFORNIA OAKS
RD STE 106
MURRIETA, CA 92562
Effective as of 01-APR-14

LARSON, BRETT, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-FEB-22

LARSON, BRETT, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-AUG-20

LARSON, BRETT, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-AUG-18

C1. 网络提供者名单 专科护理医生

LARSON, BRETT, OD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562

Effective as of 01-DEC-21

MC DIARMID, JOHN, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-JAN-11

MC DIARMID, JOHN, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-FEB-22

SCOTT, JEFFREY, OD†

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562

Effective as of 01-JAN-22

SCOTT, JEFFREY, OD†

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562

Effective as of 01-JAN-23

OTOLARYNGOLOGY

ABDOU, RAMI, MD†

Provider ID: N/A

39755 DATE ST STE 106
MURRIETA, CA 92563*

Effective as of 01-JUL-23

ABDOU, RAMI, MD†

Provider ID: N/A

39755 DATE ST STE 105
MURRIETA, CA 92563*

Effective as of 01-JUL-23

BANTHIA, VISHAL, MD†

Provider ID: N/A

39755 DATE ST STE 105
MURRIETA, CA 92563*

Teleservice

Effective as of 01-JUL-23

DATE, AMIT, MD

Provider ID: N/A

39755 DATE ST STE 105-106
MURRIETA, CA 92563

Teleservice

Effective as of 01-JUL-23

FORRESTER, MICHAEL, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
204
MURRIETA, CA 92562

Effective as of 01-JUN-05

FORRESTER, MICHAEL, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
204
MURRIETA, CA 92562

Effective as of 01-JUL-23

ROBERTS, TODD, DO

Provider ID: N/A

25150 HANCOCK AVE STE
204
MURRIETA, CA 92562

Effective as of 01-JUL-23

ROBERTS, BENJAMIN, DO

Provider ID: N/A

25150 HANCOCK AVE STE
204
MURRIETA, CA 92562

Effective as of 01-FEB-23

ROBERTS, BENJAMIN, DO

Provider ID: N/A

25150 HANCOCK AVE STE
204
MURRIETA, CA 92562

Effective as of 01-JUL-23

ROBERTS, TODD, DO

Provider ID: N/A

25150 HANCOCK AVE STE
204
MURRIETA, CA 92562

Effective as of 01-DEC-15

TIAN, QING, MD†

Provider ID: N/A

39755 DATE ST STE 105-106
MURRIETA, CA 92563*

Effective as of 01-JUL-23

PEDIATRIC CARDIOLOGY

CHU, JAMES, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562

Effective as of 01-APR-18

CHU, JAMES, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562

Effective as of 01-APR-18

CHU, JAMES, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562

Effective as of 01-APR-18

C1. 网络提供者名单 专科护理医生

CHU, JAMES, MD

Provider ID: N/A

☒ 39755 DATE ST STE 205
MURRIETA, CA 92563
Effective as of 01-JAN-23

CHU, JAMES, MD

Provider ID: N/A

☒ 39755 DATE ST STE 205
MURRIETA, CA 92563
Effective as of 01-JAN-23

CHU, JAMES, MD

Provider ID: N/A

☒ 39755 DATE ST STE 205
MURRIETA, CA 92563
Effective as of 01-JAN-23

ELLINI, AHMAD, MD†

Provider ID: N/A

☒ 25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

ELLINI, AHMAD, MD†

Provider ID: N/A

☒ 25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

ELLINI, AHMAD, MD†

Provider ID: N/A

☒ 25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

ELLINI, AHMAD, MD†

Provider ID: N/A

☒ 25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

PHYSICIANS ASSISTANT

ARROYO, ARIANNA, PA

Provider ID: N/A

☒ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-JUN-23

ARROYO, ARIANNA, PA

Provider ID: N/A

☒ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-JUN-23

ARROYO, ARIANNA, PA

Provider ID: N/A

☒ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-JUN-23

ARROYO, ARIANNA, PA

Provider ID: N/A

☒ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-JUN-23

BASIN, NATALIE, PA

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562
Teleservice

Effective as of 01-AUG-23

FRYER, KEVIN, PA

Provider ID: N/A

☒ 28078 BAXTER RD STE
330-340
MURRIETA, CA 92563
Effective as of 01-AUG-23

GAUSEPOHL, MARY, PA†

Provider ID: N/A

☒ 25470 MEDICAL CENTER
DR STE 102
MURRIETA, CA 92562*
Effective as of 01-SEP-21

GAUSEPOHL, MARY, PA†

Provider ID: N/A

☒ 24910 LAS BRISAS RD STE
116
MURRIETA, CA 92562*
Effective as of 01-SEP-21

HILLER, ASHLEY, PA

Provider ID: N/A

☒ 28078 BAXTER RD STE
300-340
MURRIETA, CA 92563
Effective as of 01-AUG-23

KAUFMAN, TIFFANY, PA†

Provider ID: N/A

☒ 24910 LAS BRISAS RD STE
105
MURRIETA, CA 92562
Effective as of 01-NOV-16

KAUFMAN, BRITNEY, PA†

Provider ID: N/A

☒ 25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-NOV-18

LANCASTER, MICHELLE, PA†

Provider ID: N/A

☒ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-DEC-22

LANCASTER, MICHELLE, PA†

Provider ID: N/A

☒ 25150 HANCOCK AVE STE

C1. 网络提供者名单 专科护理医生

210
MURRIETA, CA 92562
Effective as of 01-SEP-22

LANCASTER, MICHELLE, PA†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-22

LANCASTER, MICHELLE, PA†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-22

LANCASTER, MICHELLE, PA†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-22

LEE, WILLIAM, PA†

Provider ID: N/A
40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-APR-21

LEE, WILLIAM, PA†

Provider ID: N/A
40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-APR-21

LIN, RAY, PA†

Provider ID: N/A
25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-AUG-17

LIN, RAY, PA†

Provider ID: N/A
25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-AUG-17

LUCATERO, JENNIFER, PA†

Provider ID: N/A
25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-JAN-18

LUCATERO, JENNIFER, PA†

Provider ID: N/A
25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-JAN-18

LUCATERO, JENNIFER, PA†

Provider ID: N/A
25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-NOV-18

PATEL, JENNIE, PA

Provider ID: N/A
28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-AUG-24

QUEROL, CYRUS, PA

Provider ID: N/A
28078 BAXTER RD STE 312
MURRIETA, CA 92563
Effective as of 01-APR-24

QUISMORIO, DEMETRIO, PA†

Provider ID: N/A
28078 BAXTER RD STE 330
MURRIETA, CA 92563

Effective as of 01-NOV-20

QUISMORIO, DEMETRIO, PA†

Provider ID: N/A
28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-DEC-16

RUIZ-FLORES, ROSE, PA

Provider ID: N/A
24703 MONROE AVE
MURRIETA, CA 92562
Effective as of 01-SEP-23

ST JULES, JESSICA, PA†

Provider ID: N/A
25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-AUG-17

ST JULES, JESSICA, PA†

Provider ID: N/A
25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-NOV-18

TAYLOR, ISHA, PA

Provider ID: N/A
24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

TAYLOR, ISHA, PA

Provider ID: N/A
24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

TAYLOR, ISHA, PA

Provider ID: N/A
24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

C1. 网络提供者名单

专科护理医生

TAYLOR, ISHA, PA

Provider ID: N/A

📍 24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

WOOLEY, LAURA, PA†

Provider ID: N/A

📍 25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-NOV-18

YU, JUDITH, PA

Provider ID: N/A

📍 25405 HANCOCK AVE STE
108
MURRIETA, CA 92562
Effective as of 01-JUL-24

PODIATRIST

EVANS, RICHARD, DPM

Provider ID: N/A

📍 39755 MURRIETA HOT
SPRINGS RD STE D130
MURRIETA, CA 92563
Effective as of 01-MAR-15

EVANS, RICHARD, DPM

Provider ID: N/A

📍 39755 MURRIETA HOT
SPRINGS RD STE D130
MURRIETA, CA 92563
Effective as of 01-APR-24

EVANS, RICHARD, DPM

Provider ID: N/A

📍 39755 MURRIETA HOT
SPRINGS RD STE D130
MURRIETA, CA 92563
Effective as of 01-APR-06

MILLER, JULIE, DPM

Provider ID: N/A

📍 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-JUL-24

NGUYEN, THO, DPM†

Provider ID: N/A

📍 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-AUG-16

NGUYEN, THO, DPM†

Provider ID: N/A

📍 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-NOV-16

SCOTT, SUSAN, DPM†

Provider ID: N/A

📍 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-JUL-23

SCOTT, SUSAN, DPM†

Provider ID: N/A

📍 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-DEC-17

SCOTT, SUSAN, DPM†

Provider ID: N/A

📍 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-DEC-16

SHIN, CHRISTOPHER, DPM†

Provider ID: N/A

📍 24640 JEFFERSON AVE
STE 109

MURRIETA, CA 92562

Effective as of 01-MAY-21

SHIN, CHRISTOPHER, DPM†

Provider ID: N/A

📍 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-JAN-23

SHIN, CHRISTOPHER, DPM†

Provider ID: N/A

📍 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-SEP-22

TRANSFIGURACION SHIN, CHRISTIANNE, DPM†

Provider ID: N/A

📍 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-DEC-17

TRANSFIGURACION SHIN, CHRISTIANNE, DPM†

Provider ID: N/A

📍 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-DEC-16

TRANSFIGURACION SHIN, CHRISTIANNE, DPM†

Provider ID: N/A

📍 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-JUL-23

WELLS, JOSEPH, DPM†

Provider ID: N/A

📍 24640 JEFFERSON AVE
STE 109

C1. 网络提供者名单 专科护理医生

MURRIETA, CA 92562
Effective as of 01-JUL-23

WELLS, JOSEPH, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109

MURRIETA, CA 92562
Effective as of 01-NOV-16

WELLS, JOSEPH, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109

MURRIETA, CA 92562
Effective as of 01-SEP-16

PULMONARY DISEASES

HADDADIN, HASSAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563

Effective as of 01-JUL-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563

Effective as of 01-APR-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563

Effective as of 01-APR-22

HENNINGER, DELMER, MD

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563

Effective as of 01-SEP-09

HENNINGER, DELMER, MD

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563*

Effective as of 01-JUL-23

HENNINGER, DELMER, MD

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563

Effective as of 01-SEP-09

KUMAR, AVNEE, MD

Provider ID: N/A

25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

Effective as of 01-JUL-23

SALEK, MUNIF, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563

Effective as of 01-JAN-12

SALEK, MUNIF, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563

Effective as of 01-SEP-09

SALEK, MUNIF, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563

Effective as of 01-MAR-06

SALEK, MUNIF, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563

Effective as of 01-NOV-10

SALEK, MUNIF, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563

Effective as of 01-SEP-09

SIEN, STEFAN, DO†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563

Effective as of 01-NOV-12

SIEN, STEFAN, DO†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563

Effective as of 01-FEB-15

SURI, RAJAT, MD†

Provider ID: N/A

25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

Effective as of 01-AUG-21

VEGA, RICARDO, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563

Effective as of 01-AUG-22

VEGA, RICARDO, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563

Effective as of 01-AUG-22

VEGA, RICARDO, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563

Effective as of 01-AUG-22

RADIATION ONCOLOGY

GREENE, DAVID, MD

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3

C1. 网络提供者名单 专科护理医生

MURRIETA, CA 92562
Effective as of 01-JUL-24

QUANG, TONY, MD

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 101
MURRIETA, CA 92562
Effective as of 01-OCT-23

RADIOLOGY DIAGNOSTIC

GRIFFETH, BRADLEY, MD

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 101
MURRIETA, CA 92562
Effective as of 01-SEP-24

GRIFFETH, BRADLEY, MD

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 101
MURRIETA, CA 92562
Effective as of 01-SEP-24

GRIFFETH, BRADLEY, MD

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 101
MURRIETA, CA 92562
Effective as of 01-SEP-24

GRIFFETH, BRADLEY, MD

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 101
MURRIETA, CA 92562
Effective as of 01-SEP-24

PATEL, NIKHIL, MD†

Provider ID: N/A
25485 MEDICAL CENTER
DR STE 106
MURRIETA, CA 92562

Effective as of 01-AUG-22

PATEL, NIKHIL, MD†

Provider ID: N/A
25485 MEDICAL CENTER
DR STE 106
MURRIETA, CA 92562
Effective as of 01-AUG-22

PATEL, NIKHIL, MD†

Provider ID: N/A
25485 MEDICAL CENTER
DR STE 106
MURRIETA, CA 92562
Effective as of 01-JAN-24

REGISTERED DIETITIAN / NUTRITIONIST

BLUCHER, CHERI, RD

Provider ID: N/A
29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-JUN-21

BRENDECKE, LORIE, RDN

Provider ID: N/A
29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-FEB-22

BRENDECKE, LORIE, RDN

Provider ID: N/A
29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-JUL-22

BRENDECKE, LORIE, RDN

Provider ID: N/A
29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563

Effective as of 01-JUL-22

JACKSON, ALLYSON, RD

Provider ID: N/A
29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-JUN-21

JACKSON, ALLYSON, RD

Provider ID: N/A
29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-JUL-21

ROBERTS, LISA, RD

Provider ID: N/A
29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-JUN-21

WAYNE, DIANE, RD

Provider ID: N/A
29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Teleservice
Effective as of 01-DEC-23

WAYNE, DIANE, RD

Provider ID: N/A
29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Teleservice
Effective as of 01-DEC-23

REGISTERED PHYSICAL THERAPIST

AGENA, CYAN, PT†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-MAY-22

AGENA, CYAN, PT†

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-MAY-22

ALEXANDER, AUSTIN, PT

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 304
MURRIETA, CA 92562
Effective as of 01-DEC-20

ALEXANDER, AUSTIN, PT

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 304
MURRIETA, CA 92562
Effective as of 01-DEC-20

ALY, DILYANA, PT†

Provider ID: N/A

27722 CLINTON KEITH RD
STE B-C
MURRIETA, CA 92562
Effective as of 01-JUL-19

ALY, DILYANA, PT†

Provider ID: N/A

27722 CLINTON KEITH RD
STE B-C
MURRIETA, CA 92562
Effective as of 01-JUL-19

ATKINS, WILLIAM, PT

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-JUN-23

ATKINS, WILLIAM, PT

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-JUN-23

ATKINS, CHEYENNE, PT†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 304
MURRIETA, CA 92562
Effective as of 01-NOV-18

ATKINS, CHEYENNE, PT†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 304
MURRIETA, CA 92562
Effective as of 01-NOV-18

BARI, MONICA, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C201
MURRIETA, CA 92562
Effective as of 01-DEC-23

BARI, MONICA, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C201
MURRIETA, CA 92562
Effective as of 01-DEC-23

COBURN, PIERRE, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C201
MURRIETA, CA 92562
Effective as of 01-JAN-24

COBURN, PIERRE, PT

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-JAN-24

COBURN, PIERRE, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C201
MURRIETA, CA 92562
Effective as of 01-JAN-24

COBURN, PIERRE, PT

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-JAN-24

FOX, DELANIE, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C101
MURRIETA, CA 92562
Effective as of 01-OCT-23

FOX, DELANIE, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C101
MURRIETA, CA 92562
Effective as of 01-OCT-23

FOX, DELANIE, PT

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-OCT-23

FOX, DELANIE, PT

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-OCT-23

KESEL, KELSEY, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C101
MURRIETA, CA 92562

C1. 网络提供者名单 专科护理医生

Effective as of 01-MAR-24

KESEL, KELSEY, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C101
MURRIETA, CA 92562
Effective as of 01-MAR-24

SABIN, SCOTT, PT†

Provider ID: N/A

24671 MONROE AVE BLDG
C-101
MURRIETA, CA 92562
Effective as of 01-MAY-22

SABIN, SCOTT, PT†

Provider ID: N/A

24671 MONROE AVE BLDG
C-101
MURRIETA, CA 92562
Effective as of 01-MAY-22

RHEUMATOLOGY

FREYNE, BRIGID, MD†

Provider ID: N/A

39755 MURRIETA HT SP
F110
MURRIETA, CA 92563
Effective as of 01-MAY-14

SPEECH PATHOLOGIST

PEDERSEN, ERICA, SP

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD
MURRIETA, CA 92563
Effective as of 01-MAY-23

PEDERSEN, ERICA, SP

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD

MURRIETA, CA 92563
Effective as of 01-MAY-23

SURGERY COLON SURGERY

MOORE, PATRICK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-JUN-20

MOORE, PATRICK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-JUL-23

SURGERY GENERAL

BATRA, MUNISH, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-SEP-17

BERNSTEIN, DAVID, MD

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-23

BIANCHI, CHRISTIAN, MD

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-23

BIANCHI, CHRISTIAN, MD

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-FEB-23

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JUL-24

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

DADA, STEPHEN, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-18

DADA, FESTUS, MD†

Provider ID: N/A

25470 MEDICAL CENTER

DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-23

DADA, FESTUS, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUN-17

DADA, STEPHEN, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-MAY-14

DADA, FESTUS, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-AUG-20

DADA, FESTUS, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-DEC-22

IGWE, DANIEL, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-DEC-22

KRAHN, DOUGLAS, MD

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-MAR-23

LIEN, CHRISTINA, DO

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-OCT-22

LIEN, CHRISTINA, DO

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-MAR-23

MARTIN, DAVID, MD

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-MAR-23

MARTIN, DAVID, MD

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-23

MEHTA, PRATIK, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-OCT-22

POLLACK, JAMES, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-FEB-23

POLLACK, JAMES, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JUL-24

C1. 网络提供者名单 专科护理医生

POLLACK, JAMES, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-22

POLLACK, JAMES, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

POLLACK, JAMES, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-21

SAMIMI, KIAN, MD

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-APR-23

SUH, DAVID, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-DEC-12

SUH, DAVID, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-DEC-12

TRAN, MICHAEL, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JUN-23

TRAN, MICHAEL, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JUN-23

VEGA, FRANCISCO, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-MAR-23

WANG, SHIN CHERN, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-MAR-23

WANG, SHIN CHERN, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-FEB-23

SURGERY GENERAL VASCULAR

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-APR-20

CHIRIANO, JASON, DO

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-MAR-23

VEGA, FRANCISCO, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-NOV-23

VEGA, FRANCISCO, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

SURGERY HAND PLASTIC

KUPFER, DAVID, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-SEP-09

SURGERY

NEUROLOGICAL

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-FEB-20

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-FEB-20

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-OCT-15

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210

C1. 网络提供者名单 专科护理医生

MURRIETA, CA 92562
Effective as of 01-SEP-17

ABSHIRE, BRET, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-17

ABSHIRE, BRET, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-MAR-17

ABSHIRE, BRET, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-FEB-18

ABSHIRE, BRET, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-17

ABSHIRE, BRET, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-17

FRIEDLICH, DANIEL, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-MAY-15

FRIEDLICH, DANIEL, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-MAY-15

FRIEDLICH, DANIEL, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-MAR-14

OH, GERALD, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-FEB-19

OH, GERALD, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-OCT-17

OH, GERALD, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-AUG-17

OH, GERALD, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-AUG-17

OH, GERALD, MD†

Provider ID: N/A
25150 HANCOCK AVE STE

210
MURRIETA, CA 92562
Effective as of 01-AUG-17

OH, GERALD, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-AUG-17

SURGERY ORTHOPEDIC

AGYEMAN, KOFI, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
240
MURRIETA, CA 92562
Effective as of 01-MAR-22

AGYEMAN, KOFI, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
250
MURRIETA, CA 92562
Effective as of 01-MAR-22

BIAMA, RICHARD, MD

Provider ID: N/A
28078 BAXTER RD STE
330-340
MURRIETA, CA 92563
Effective as of 01-MAY-24

CHENG, WAYNE, MD†

Provider ID: N/A
28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-JUL-21

CHENG, WAYNE, MD†

Provider ID: N/A
28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-JUL-21

C1. 网络提供者名单 专科护理医生

DRINHAUS, ROLF, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-APR-08

ERWTEMAN, ANDREW, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-AUG-20

ERWTEMAN, ANDREW, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-NOV-16

GARGULINSKI, MATTHEW, DO†

Provider ID: N/A

25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-AUG-22

GARGULINSKI, MATTHEW, DO†

Provider ID: N/A

25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-AUG-22

GARGULINSKI, MATTHEW, DO†

Provider ID: N/A

25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-SEP-23

GARGULINSKI, MATTHEW, DO†

Provider ID: N/A

25150 HANCOCK AVE STE

200

MURRIETA, CA 92562

Effective as of 01-AUG-23

GHAYOUMI, POURIYA, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
250
MURRIETA, CA 92562
Effective as of 01-MAY-24

GHAYOUMI, POURIYA, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
240
MURRIETA, CA 92562
Effective as of 01-AUG-22

GHAYOUMI, POURIYA, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
250
MURRIETA, CA 92562
Effective as of 01-AUG-22

GHAYOUMI, POURIYA, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
240
MURRIETA, CA 92562
Effective as of 01-DEC-22

GHAYOUMI, POURIYA, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
250
MURRIETA, CA 92562
Effective as of 01-DEC-22

GHAYOUMI, POURIYA, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
240
MURRIETA, CA 92562
Effective as of 01-MAY-24

GHAYOUMI, POURIYA, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
250
MURRIETA, CA 92562
Effective as of 01-JUL-24

JERCINOVICH, IGOR, MD

Provider ID: N/A

25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-OCT-20

JERCINOVICH, IGOR, MD

Provider ID: N/A

25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-APR-07

KIMBALL, JEFF, MD

Provider ID: N/A

28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-NOV-23

KIMBALL, JEFF, MD

Provider ID: N/A

28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-DEC-23

LOCKE, JOHN, MD†

Provider ID: N/A

28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-AUG-22

LOCKE, JOHN, MD†

Provider ID: N/A

28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-AUG-22

C1. 网络提供者名单

专科护理医生

LUNA, MARIO, MD†

Provider ID: N/A

📍 25495 MEDICAL CENTER
DR STE 101
MURRIETA, CA 92562
Effective as of 01-AUG-20

LUNA, MARIO, MD

Provider ID: N/A

📍 39755 DATE ST STE 104
MURRIETA, CA 92563
Effective as of 01-MAR-23

ODA, NINOS, MD

Provider ID: N/A

📍 25395 HANCOCK AVE STE
240
MURRIETA, CA 92562
Effective as of 01-MAY-23

ODA, NINOS, MD

Provider ID: N/A

📍 25395 HANCOCK AVE STE
250
MURRIETA, CA 92562
Effective as of 01-MAY-23

SAYEGH, ELI, MD

Provider ID: N/A

📍 28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-JAN-22

SAYEGH, ELI, MD

Provider ID: N/A

📍 28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-JAN-22

SAYEGH, ELI, MD

Provider ID: N/A

📍 28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-DEC-22

SAYEGH, ELI, MD

Provider ID: N/A

📍 28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-DEC-22

SAYEGH, ELI, MD

Provider ID: N/A

📍 28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-AUG-22

SAYEGH, ELI, MD

Provider ID: N/A

📍 28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-AUG-22

TOOMA, GHASSAN, MD†

Provider ID: N/A

📍 28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-DEC-23

TOOMA, GHASSAN, MD†

Provider ID: N/A

📍 28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-DEC-22

TOOMA, GHASSAN, MD†

Provider ID: N/A

📍 28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-APR-03

SURGERY PLASTIC

BATRA, MUNISH, MD

Provider ID: N/A

📍 25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562*
Effective as of 01-JUL-23

KUPFER, DAVID, MD†

Provider ID: N/A

📍 25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-SEP-09

NEWMAN, DAVID, MD

Provider ID: N/A

📍 25150 HANCOCK AVE STE
110
MURRIETA, CA 92562
Effective as of 01-JAN-06

NEWMAN, DAVID, MD

Provider ID: N/A

📍 25150 HANCOCK AVE STE
110
MURRIETA, CA 92562
Effective as of 01-SEP-13

SURGERY THORACIC

KOUMJIAN, MICHAEL, MD†

Provider ID: N/A

📍 28078 BAXTER RD STE 510
MURRIETA, CA 92563
Effective as of 01-JUN-21

VO, QUANG, MD†

Provider ID: N/A

📍 25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-23

VO, QUANG, MD†

Provider ID: N/A

📍 25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-DEC-22

UROLOGY

C1. 网络提供者名单

专科护理医生

BRODAK, PHILIP, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 305
MURRIETA, CA 92562
Effective as of 01-AUG-24

BRODAK, PHILIP, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 304
MURRIETA, CA 92562
Effective as of 01-AUG-24

BRODAK, PHILIP, MD

Provider ID: N/A

28078 BAXTER RD STE 430
MURRIETA, CA 92563
Effective as of 01-AUG-24

CONNER, RICHARD, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-SEP-14

CONNER, RICHARD, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-20

CRISELL, MONISHA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-15

CRISELL, MONISHA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204

MURRIETA, CA 92562
Effective as of 01-MAY-20

CRISELL, MONISHA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JUN-15

CRISELL, MONISHA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-SEP-14

CRISELL, MONISHA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-FEB-15

CRISELL, MONISHA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JAN-04

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-APR-21

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-NOV-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-NOV-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-NOV-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JAN-24

C1. 网络提供者名单 专科护理医生

KIM, FRANK, MD†

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-JUL-24

KIM, FRANK, MD†

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-DEC-20

LARSON, BENJAMIN, MD

Provider ID: N/A

☒ 28078 BAXTER RD STE 430
MURRIETA, CA 92563

Effective as of 01-MAY-23

LARSON, BENJAMIN, MD†

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-AUG-15

LARSON, BENJAMIN, MD†

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-AUG-15

LARSON, BENJAMIN, MD†

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-AUG-15

LARSON, BENJAMIN, MD†

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-OCT-15

LARSON, BENJAMIN, MD†

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-JUL-23

LARSON, BENJAMIN, MD†

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-MAY-20

LOUIE, BRANDON, MD

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-JUL-24

LOUIE, BRANDON, MD

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-JAN-24

LUTTGE, SCOTT, MD†

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-MAY-23

LUTTGE, SCOTT, MD†

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-MAY-23

REDDY, MADHUMITHA, DO†

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-MAR-21

REDDY, MADHUMITHA, DO†

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-JUL-24

REDDY, MADHUMITHA, DO†

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-MAY-21

REDDY, MADHUMITHA, DO†

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-FEB-22

REDDY, MADHUMITHA, DO†

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-AUG-19

SHAH, NEMI, MD

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Teleservice

Effective as of 01-FEB-24

SHAH, NEMI, MD

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

C1. 网络提供者名单 专科护理医生

Teleservice

Effective as of 01-FEB-24

TAKESITA, KEN, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-NOV-15

TAKESITA, KEN, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-NOV-15

TALANKI, VARUN, MD

Provider ID: N/A

28078 BAXTER RD STE 430
MURRIETA, CA 92563

Effective as of 01-MAY-23

TALANKI, VARUN, MD

Provider ID: N/A

28078 BAXTER RD STE 430
MURRIETA, CA 92563

Effective as of 01-MAY-23

TALANKI, VARUN, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-JAN-22

TALANKI, VARUN, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-MAY-22

TALANKI, VARUN, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204

MURRIETA, CA 92562

Effective as of 01-MAY-22

TSI, SY, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-JUL-24

TSI, SY, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563*

Effective as of 01-JUL-23

TSI, SY, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-AUG-16

TSI, SY, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-APR-22

VEMULAPALLI, SREENIVAS, MD

Provider ID: N/A

28078 BAXTER RD STE 430
MURRIETA, CA 92563

Effective as of 01-MAY-23

VEMULAPALLI, SREENIVAS, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-MAY-20

VEMULAPALLI, SREENIVAS, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204

MURRIETA, CA 92562

Effective as of 01-MAY-15

VEMULAPALLI, SREENIVAS, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204

MURRIETA, CA 92562

Effective as of 01-JUL-13

VEMULAPALLI, SREENIVAS, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204

MURRIETA, CA 92562

Effective as of 01-JUN-15

VEMULAPALLI, SREENIVAS, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204

MURRIETA, CA 92562

Effective as of 01-OCT-14

VEMULAPALLI, SREENIVAS, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204

MURRIETA, CA 92562

Effective as of 01-DEC-23

YUN, EDWARD, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563*

Effective as of 01-NOV-15

YUN, EDWARD, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

28078 BAXTER RD STE 450
MURRIETA, CA 92563*
Effective as of 01-JUL-23

YUN, EDWARD, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JAN-23

YUN, EDWARD, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JAN-23

YUN, EDWARD, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563*
Effective as of 01-AUG-16

YUN, EDWARD, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563*
Effective as of 01-APR-16

CARDIAC

ELECTROPHYSIOLOGY

OVIEDO-LINARES, RAUL, MD

Provider ID: N/A

1415 E 8TH ST STE 5
NATIONAL CITY, CA 91950
Effective as of 01-JUL-24

CARDIOVASCULAR DISEASE

DAMANI, SAMIR, MD

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Effective as of 01-NOV-23

KIM, JAMES, MD

Provider ID: N/A

1415 E 8TH ST
NATIONAL CITY, CA 91950

Effective as of 01-JUN-23

KIM, JAMES, MD

Provider ID: N/A

1415 E 8TH ST STE 3
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-AUG-23

LY, NANCY, MD

Provider ID: N/A

1415 E 8TH ST
NATIONAL CITY, CA 91950

Effective as of 01-JUN-23

LY, NANCY, MD

Provider ID: N/A

1415 E 8TH ST
NATIONAL CITY, CA 91950

Effective as of 01-JUN-23

LY, NANCY, MD

Provider ID: N/A

1415 E 8TH ST STE 4
NATIONAL CITY, CA 91950

Effective as of 01-NOV-23

NANAVATI, VIMAL, MD†

Provider ID: N/A

2345 E 8TH ST STE 111
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JAN-21

NANAVATI, VIMAL, MD†

Provider ID: N/A

2345 E 8TH ST STE 111
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-AUG-24

OVIEDO-LINARES, RAUL, MD

Provider ID: N/A

1415 E 8TH ST STE 5
NATIONAL CITY, CA 91950

Effective as of 01-AUG-23

OVIEDO-LINARES, RAUL, MD

Provider ID: N/A

1415 E 8TH ST STE 5
NATIONAL CITY, CA 91950

Effective as of 01-AUG-23

OVIEDO-LINARES, RAUL, MD

Provider ID: N/A

1415 E 8TH ST STE 5
NATIONAL CITY, CA 91950

Effective as of 01-JUN-23

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950

Effective as of 01-MAR-18

PATEL, PRASHANT, MD

Provider ID: N/A

1845 E 12TH ST
NATIONAL CITY, CA 91950

Effective as of 01-JUL-24

ROUGH, STEVEN, MD

Provider ID: N/A

1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-AUG-23

C1. 网络提供者名单 专科护理医生

SHARF, ALBERT, MD

Provider ID: N/A

1845 E 12TH ST
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JUN-24

SHEREV, DIMITRI, MD

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950

Effective as of 01-SEP-23

WYSOCZANSKI, MARIUSZ, MD

Provider ID: N/A

1415 E 8TH ST STE 8
NATIONAL CITY, CA 91950

Effective as of 01-JUN-23

WYSOCZANSKI, MARIUSZ, MD

Provider ID: N/A

1415 E 8TH ST STE 8
NATIONAL CITY, CA 91950

Effective as of 01-AUG-23

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO, NP

Provider ID: N/A

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

CARDENAS, MIRIAM, NPF

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-23

DHARKAR-SURBER, SAPNA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-23

DRISCOLL, SUSAN, NP

Provider ID: N/A

330 E 8TH ST
NATIONAL CITY, CA 91950

Effective as of 01-OCT-23

DRISCOLL, SUSAN, NP

Provider ID: N/A

340 E 8TH ST
NATIONAL CITY, CA 91950

Effective as of 01-OCT-23

KYI, MYA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-MAR-24

LIM, IMELDA, NP

Provider ID: N/A

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Effective as of 01-OCT-22

OLESCO, JENNIFER, NP

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950

Effective as of 01-AUG-23

REAL, MARIA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-23

REDDY, PRIYA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Effective as of 01-NOV-22

RENZAS, JENNIFER, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JUL-21

SWEENEY, ZSAZSA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JUL-21

VILLANUEVADEGUTIE, BERENICE, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-MAY-21

WILLIAMS, BREAHA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Effective as of 01-DEC-21

CERTIFIED REGISTERED NURSE MIDWIFE

MAST, ASHLEY, CRNM

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-23

CHIROPRACTOR

C1. 网络提供者名单 专科护理医生

DORADO, SUE, DC

Provider ID: N/A

📄 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

GILIBERTO, JOSEPH, DC†

Provider ID: N/A

📄 2835 HIGHLAND AVE
NATIONAL CITY, CA 91950
Effective as of 01-AUG-22

HALEY, STEVEN, DC

Provider ID: N/A

📄 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

DERMATOLOGY

BARRIO, VICTORIA, MD

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-MAR-24

BARRIO, VICTORIA, MD

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-24

BROGAN, JACQUELINE, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

BROGAN, JACQUELINE, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-21

CELANO, NICHOLAS, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-SEP-22

CELANO, NICHOLAS, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

CELANO, NICHOLAS, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-MAR-18

CELANO, NICHOLAS, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUL-24

CELANO, NICHOLAS, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUL-22

CHIANG, JENNIFER, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-MAR-18

CHIANG, JENNIFER, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUL-22

CHIANG, JENNIFER, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-24

CHIANG, JENNIFER, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

CHIANG, JENNIFER, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-SEP-22

GONZALEZ, JOSE, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-AUG-22

GONZALEZ, JOSE, MD

Provider ID: N/A

📄 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-MAY-23

GORDON, JUSTIN, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-APR-22

C1. 网络提供者名单 专科护理医生

GORDON, JUSTIN, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-AUG-22

LIN, SHINKO, MD

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-APR-24

LIN, SHINKO, MD

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-APR-24

LIN, SHINKO, MD

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-MAR-24

NELSON, AISLYN, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-AUG-22

NELSON, AISLYN, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-19

SATEESH, BROOKE, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-AUG-22

SATEESH, BROOKE, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JUL-22

SATEESH, BROOKE, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Effective as of 01-MAR-18

TYAGI, ABHILASHA, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-AUG-22

TYAGI, ABHILASHA, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Effective as of 01-APR-22

TYAGI, ABHILASHA, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Effective as of 01-SEP-22

UEBELHOER, NATHAN, DO†

Provider ID: N/A

📄 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Effective as of 01-FEB-22

UEBELHOER, NATHAN, DO†

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-FEB-23

UEBELHOER, NATHAN, DO†

Provider ID: N/A

📄 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Effective as of 01-APR-18

EMERGENCY MEDICINE

TABILA, BRIAN, MD†

Provider ID: N/A

📄 610 EUCLID AVE STE 202
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

ENDOCRINOLOGY

METABOLISM DIABETES

ROGERS, MEGAN, MD

Provider ID: N/A

📄 22 W 35TH ST STE 101
NATIONAL CITY, CA 91950

Effective as of 01-MAY-24

VALDEZ, KRYSTAL ANGELI, MD

Provider ID: N/A

📄 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Effective as of 01-JAN-24

FAMILY PRACTICE

DILLON, MAYRA, MD†

Provider ID: N/A

📄 1136 D AVE
NATIONAL CITY, CA 91950*

Effective as of 01-JUL-24

SNOOK, BRIAN, DO†

Provider ID: N/A

C1. 网络提供者名单

专科护理医生

2400 E 8TH ST
NATIONAL CITY, CA 91950*
Effective as of 01-JUN-24

THAYER, KARISA, MD

Provider ID: N/A

330 E 8TH ST STE 340
NATIONAL CITY, CA 91950
Effective as of 01-SEP-24

GASTROENTEROLOGY

GISH, ROBERT, MD†

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUN-21

INTERNAL MEDICINE

LIM, ROSEMARIE, MD†

Provider ID: N/A

610 EUCLID AVE STE 202
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

LIU, ANDREW, MD

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-SEP-23

MAACHIP, FHARAK, MD†

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-NOV-23

MAACHIP, FHARAK, MD†

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-MAR-15

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

INTERNAL MEDICINE CRITICAL CARE MEDICINE

LIM, ROSEMARIE, MD†

Provider ID: N/A

655 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-MAY-21

TABILA, BRIAN, MD†

Provider ID: N/A

655 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-MAR-21

INTERVENTIONAL CARDIOLOGY

CAMACHO, BENJAMIN, MD†

Provider ID: N/A

1615 SWEETWATER RD
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

CAMACHO, BENJAMIN, MD†

Provider ID: N/A

1615 SWEETWATER RD STE
D
NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

CAMACHO, BENJAMIN, MD†

Provider ID: N/A

1615 SWEETWATER RD
NATIONAL CITY, CA 91950*
Effective as of 01-AUG-21

DAMANI, SAMIR, MD

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-MAR-24

FERNANDEZ, GENARO, MD†

Provider ID: N/A

610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
Effective as of 01-APR-24

FERNANDEZ, GENARO, MD†

Provider ID: N/A

610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

FERNANDEZ, GENARO, MD†

Provider ID: N/A

610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

KIM, JAMES, MD

Provider ID: N/A

1415 E 8TH ST STE 3
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUL-24

LY, NANCY, MD

Provider ID: N/A

1415 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-JUN-23

LY, NANCY, MD

Provider ID: N/A

1415 E 8TH ST STE 4
NATIONAL CITY, CA 91950
Effective as of 01-AUG-23

OVIEDO-LINARES, RAUL, MD

Provider ID: N/A

1415 E 8TH ST STE 5

C1. 网络提供者名单 专科护理医生

NATIONAL CITY, CA 91950
Effective as of 01-AUG-23

OVIEDO-LINARES, RAUL, MD

Provider ID: N/A
☒ 1415 E 8TH ST STE 5
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

PANDHI, JAY, MD†

Provider ID: N/A
☒ 655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

PANDHI, JAY, MD†

Provider ID: N/A
☒ 655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-MAR-20

PANDHI, JAY, MD†

Provider ID: N/A
☒ 655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

PANDHI, JAY, MD†

Provider ID: N/A
☒ 655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

ROUGH, STEVEN, MD

Provider ID: N/A
☒ 1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

ROUGH, STEVEN, MD

Provider ID: N/A
☒ 1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-OCT-23

ROUGH, STEVEN, MD

Provider ID: N/A
☒ 1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

ROUGH, STEVEN, MD

Provider ID: N/A
☒ 1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

SHETABI, KAMBIZ, MD

Provider ID: N/A
☒ 1415 E 8TH ST STE 7
NATIONAL CITY, CA 91950
Effective as of 01-APR-24

SHETABI, KAMBIZ, MD

Provider ID: N/A
☒ 1415 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

SHETABI, KAMBIZ, MD

Provider ID: N/A
☒ 1415 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

WYSOCZANSKI, MARIUSZ, MD

Provider ID: N/A
☒ 1415 E 8TH ST STE 8
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A
☒ 502 EUCLID AVE STE 104
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A
☒ 502 EUCLID AVE STE 104
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

LICENSED CLINICAL SOCIAL WORKER

ALVAREZ, DIANA, LCSW

Provider ID: N/A
☒ 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

JASSO-RAMIREZ, MARTHA, LCSW

Provider ID: N/A
☒ 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-SEP-21

SACHS, MELISSA, LCSW†

Provider ID: N/A
☒ 2400 E 8TH ST
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-MAR-21

WRIGHT, STEPHANIE, LCSW

Provider ID: N/A
☒ 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

MARRIAGE FAMILY THERAPIST

KUEK, JOHN, MFT

Provider ID: N/A
☒ 217 HIGHLAND AVE

C1. 网络提供者名单 专科护理医生

NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

NEPHROLOGY

CALDERONMOLINA, JUAN, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

CALDERONMOLINA, JUAN, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-NOV-23

COMUNALE, RODERICK, MD†

Provider ID: N/A
502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-FEB-19

COMUNALE, RODERICK, MD†

Provider ID: N/A
502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUL-22

COMUNALE, RODERICK, MD†

Provider ID: N/A
502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JAN-21

MAACHIP, FHARAK, MD†

Provider ID: N/A
655 EUCLID AVE STE 303

NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

MAACHIP, FHARAK, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

MAACHIP, FHARAK, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-SEP-20

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-SEP-20

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

NEUROLOGY

BOBO, JERRY, MD†

Provider ID: N/A
502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER, MD

Provider ID: N/A
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

ASLIAN, AZITA, MD†

Provider ID: N/A
2400 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

ASLIAN, AZITA, MD

Provider ID: N/A
1136 D AVE
NATIONAL CITY, CA 91950*
Effective as of 01-SEP-23

ASLIAN, AZITA, MD†

Provider ID: N/A
2400 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

DAVIS, TRACIE, MD

Provider ID: N/A
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

DELROSARIO, GELEN, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

DELROSARIO, GELEN, MD†

Provider ID: N/A

502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

FOLCHTORRES-AGUIAR, BEATRIZ, MD†

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-AUG-22

GELLENS, ANDREW, MD†

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-NOV-21

MELLENDEZBERRIOS, IARA, MD

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-AUG-24

MENDEZ, DIEGO, MD

Provider ID: N/A

2400 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

OPHTHALMOLOGY

ABDALLAH, WALID, MD†

Provider ID: N/A

1520 E PLAZA BLVD

NATIONAL CITY, CA 91950
Effective as of 01-MAY-24

CARRABY, ARNETT, MD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

CHANG, TOM, MD†

Provider ID: N/A

2240 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

DELENGOCKY, TAYSON, DO

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

FISH, STEVEN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-NOV-22

FISH, STEVEN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-18

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-MAR-18

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JUN-23

HAIGHT, BRUCE, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

HUDSON, HENRY, MD†

Provider ID: N/A

655 EUCLID AVE STE 302

C1. 网络提供者名单 专科护理医生

NATIONAL CITY, CA 91950
Effective as of 01-APR-22

HUDSON, HENRY, MD†

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

MANI, MAJID, MD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

MCDONNELL, EMMA, MD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

MCGRAW, JOSEPH, MD†

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-NOV-21

MCGRAW, JOSEPH, MD†

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-OCT-21

MCGRAW, JOSEPH, MD†

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JAN-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

MORRISON-REYES, JOSHUA, MD

Provider ID: N/A

📍 2240 E PLAZA BOULEVARD
STE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-JUL-24

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📍 2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📍 2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA 91950
Effective as of 01-MAR-23

MORRISON-REYES, JOSHUA, MD

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📍 2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA 91950
Effective as of 01-APR-22

MORRISON-REYES, JOSHUA, MD

Provider ID: N/A

📍 2240 E PLAZA BOULEVARD
STE F AND G

NATIONAL CITY, CA 91950
Effective as of 01-AUG-24

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📍 2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

PAPASTERGIU, GEORGIOS, MD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PATEL, GITANE, MD†

Provider ID: N/A

📍 2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

PATEL, SARJAN, MD†

Provider ID: N/A

📍 2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

PATEL, SARJAN, MD†

Provider ID: N/A

📍 2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA 91950
Effective as of 01-AUG-20

PATEL, SARJAN, MD

Provider ID: N/A

📍 2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-24

C1. 网络提供者名单 专科护理医生

PATEL, SARJAN, MD†

Provider ID: N/A

📍 2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PATEL, SARJAN, MD

Provider ID: N/A

📍 2240 E PLAZA BOULEVARD
STE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-JUL-24

PEAIRS, JAMES, MD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PERRY, ARTHUR, MD

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

PRABHU, SUJATA, MD†

Provider ID: N/A

📍 2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

RAJSBAUM, MARTIN, MD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

SASSANI, PATRICK, MD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

SASSANI, PATRICK, MD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-APR-24

SKAF, AYHAM, MD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

OPTOMETRIST

AOTO, KIM, OD†

Provider ID: N/A

📍 2240 E PLAZA BLVD STE
F-G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A

📍 2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

EL-MOGHRABI, ROULA, OD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

EL-MOGHRABI, NANCY, OD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

KHIEU, TINA, OD

Provider ID: N/A

📍 2240 E PLAZA BLVD STE
F&G
NATIONAL CITY, CA 91950
Effective as of 01-MAR-24

KHIEU, TINA, OD

Provider ID: N/A

📍 2240 E PLAZA BLVD STE
F&G
NATIONAL CITY, CA 91950
Effective as of 01-MAY-24

KHIEU, TINA, OD

Provider ID: N/A

📍 2240 E PLAZA BLVD STE
F&G
NATIONAL CITY, CA 91950
Effective as of 01-DEC-23

KOO, ANITA, OD

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

KOO, ANITA, OD

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

KOO, ANITA, OD

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JUN-24

KOO, ANITA, OD

Provider ID: N/A

📍 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Effective as of 01-MAY-24

C1. 网络提供者名单 专科护理医生

MARR, RYAN, OD

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-DEC-22

MARR, RYAN, OD

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JUL-24

MARR, RYAN, OD

Provider ID: N/A

📍 2240 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JUL-24

THACH, QUEEN, OD

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-SEP-24

VINH, JOHN, OD†

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-SEP-20

PEDIATRIC EMERGENCY MEDICINE

BONSU, BEMA, MD†

Provider ID: N/A

📍 1136 D AVE
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PEDIATRICS

RANA, DEBORAH, MD†

Provider ID: N/A

📍 2400 E 8TH ST

NATIONAL CITY, CA 91950*
Teleservice
Effective as of 01-AUG-24

PHYSICAL MEDICINE / REHABILITATION

CROWLEY, DONNA, MD†

Provider ID: N/A

📍 655 EUCLID AVE STE 209
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

CROWLEY, DONNA, MD†

Provider ID: N/A

📍 655 EUCLID AVE STE 209
NATIONAL CITY, CA 91950
Effective as of 01-APR-14

PHYSICIANS ASSISTANT

HABBOUSH, RANA, PA

Provider ID: N/A

📍 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

HIGUERA, EDITH, PA

Provider ID: N/A

📍 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

LANDON, JEFFREY, PA

Provider ID: N/A

📍 610 EUCLID AVE STE 200
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-NOV-23

MACASADIA, MARITES, PA

Provider ID: N/A

📍 610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-SEP-20

MERCER, KELLY, PA†

Provider ID: N/A

📍 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

SHAH, SHEENA, PA

Provider ID: N/A

📍 502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

SHAH, SHEENA, PA

Provider ID: N/A

📍 502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-21

UDOH, EKAETE, PA

Provider ID: N/A

📍 610 EUCLID AVE STE 200
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-MAR-24

PODIATRIST

ATMAR, AKMAL, DPM†

Provider ID: N/A

📍 2345 E 8TH ST STE 105
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

ATMAR, AKMAL, DPM†

Provider ID: N/A

📍 2345 E 8TH ST STE 105
NATIONAL CITY, CA 91950
Effective as of 01-JAN-23

CAINE, SAMUEL, DPM

C1. 网络提供者名单

专科护理医生

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JUL-24

CAINE, SAMUEL, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-APR-24

CAINE, SAMUEL, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-DEC-23

DAVIDSONIII, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-DEC-23

DAVIDSONIII, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-FEB-19

DAVIDSONIII, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JAN-21

DAVIDSONIII, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301

NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JAN-22

DAVIDSONIII, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JAN-21

DAVIDSONIII, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-SEP-22

KRIGER, STEPHEN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JAN-22

NGUYEN, HAN, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-JUN-23

NGUYEN, HAN, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-JUL-23

NGUYEN, HAN, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-JAN-24

NGUYEN, HAN, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-JUN-24

NGUYEN, HAN, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-SEP-24

SANICOLAS, MARIA THERESA, DPM†

Provider ID: N/A

610 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Effective as of 01-SEP-22

SANICOLAS, MARIA THERESA, DPM†

Provider ID: N/A

610 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

TSAI, GRACE, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-FEB-23

TSAI, GRACE, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-SEP-23

TSAI, GRACE, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-APR-23

XU, DIXON, DPM†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-DEC-23

XU, DIXON, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-MAR-24

XU, DIXON, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-MAY-21

XU, DIXON, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

PSYCHIATRY

BOBO, JERRY, MD†

Provider ID: N/A

502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

BOBO, JERRY, MD†

Provider ID: N/A

502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

3035 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-AUG-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

3035 E 8TH ST

NATIONAL CITY, CA 91950
Effective as of 01-AUG-22

KUGEL, SAMUEL, MD†

Provider ID: N/A

502 EUCLID AVE STE 305
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JAN-21

KUGEL, SAMUEL, MD†

Provider ID: N/A

502 EUCLID AVE STE 305
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JAN-21

PSYCHOLOGIST

BAHENA-COLLEY, SANDRA, PSYD†

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

BAHENA-COLLEY, SANDRA, PSYD†

Provider ID: N/A

217 HIGHLAND AVE
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Teleservice
Effective as of 01-APR-21

GALANT, DANIEL, PhD

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

GALANT, DANIEL, PhD

Provider ID: N/A

217 HIGHLAND AVE
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Effective as of 01-APR-21

MIRANDA, CYNTHIA, PhD†

Provider ID: N/A

217 HIGHLAND AVE
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Teleservice
Effective as of 01-APR-21

MIRANDA, CYNTHIA, PhD†

Provider ID: N/A

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Effective as of 01-APR-21

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON, PT

Provider ID: N/A

3400 E 8TH ST STE 108
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Effective as of 01-FEB-24

DORSEY, KYLE, PT†

Provider ID: N/A

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NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

HERMAN, RACHEL, PT†

Provider ID: N/A

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NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

KARANDE, PRACHI, PT†

Provider ID: N/A

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C1. 网络提供者名单 专科护理医生

Effective as of 01-JAN-22

NGUYEN, TIA, PT

Provider ID: N/A

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NATIONAL CITY, CA 91950

Effective as of 01-MAR-24

NOVENCIDO, ANDREW, PT†

Provider ID: N/A

📍 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Effective as of 01-SEP-22

SUGGS, SARAH, PT

Provider ID: N/A

📍 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Effective as of 01-MAY-23

RHEUMATOLOGY

CHITKARA, PUJA, MD

Provider ID: N/A

📍 502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950

Effective as of 01-JUN-24

SURGERY GENERAL

ZUBER, SAMUEL, MD

Provider ID: N/A

📍 22 W 35TH ST STE 101
NATIONAL CITY, CA 91950

Effective as of 01-MAY-24

SURGERY PLASTIC

GUTTIKONDA, RAKHESH, DO

Provider ID: N/A

📍 655 EUCLID AVE STE 200
NATIONAL CITY, CA 91950

Effective as of 01-DEC-23

ALLERGY IMMUNOLOGY

SCHWINDT, CHRISTINA, MD†

Provider ID: N/A

📍 400 NEWPORT CENTER
DR STE 401
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

SCHWINDT, CHRISTINA, MD†

Provider ID: N/A

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DR STE 401
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92660

Effective as of 01-JUL-23

CERTIFIED NURSE PRACTITIONER

ANTONYAN, HOLLY, NPF†

Provider ID: N/A

📍 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-22

LEE, ALEXANDER, NP

Provider ID: N/A

📍 360 SAN MIGUEL DR STE
300
NEWPORT BEACH, CA
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Effective as of 01-APR-24

DERMATOLOGY

BIERMAN, DINA, MD†

Provider ID: N/A

📍 360 SAN MIGUEL DR STE
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92660

Effective as of 01-JAN-23

BIERMAN, DINA, MD†

Provider ID: N/A

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Effective as of 01-NOV-23

BREITHAAPT, ANDREW, MD†

Provider ID: N/A

📍 360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
92660

Effective as of 01-DEC-20

BREITHAAPT, ANDREW, MD†

Provider ID: N/A

📍 360 SAN MIGUEL DR STE
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92660

Effective as of 01-APR-24

BREITHAAPT, ANDREW, MD†

Provider ID: N/A

📍 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-19

BREITHAAPT, ANDREW, MD†

Provider ID: N/A

📍 360 SAN MIGUEL DR STE
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Effective as of 01-APR-24

ETTEFAGH, LELIA, MD

Provider ID: N/A


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C1. 网络提供者名单 专科护理医生

92660
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ETTEFAGH, LELIA, MD


Provider ID: N/A

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501
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-24

ETTEFAGH, LELIA, MD


Provider ID: N/A

 360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
92660

Effective as of 01-AUG-24

FARSHIDI, ARTA, MD


Provider ID: N/A

 360 SAN MIGUEL DR STE
405
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

FARSHIDI, ARTA, MD


Provider ID: N/A

 360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

FARSHIDI, ARTA, MD


Provider ID: N/A

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405
NEWPORT BEACH, CA
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Effective as of 01-FEB-23

FAZEL, NASIM, MD


Provider ID: N/A

 1441 AVOCADO AVE STE
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Effective as of 01-DEC-23

FAZEL, NASIM, MD


Provider ID: N/A

 1401 AVOCADO AVE STE
703
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92660

Effective as of 01-DEC-23

FAZEL, NASIM, MD


Provider ID: N/A

 1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-23

FAZEL, NASIM, MD


Provider ID: N/A

 1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-24

FAZEL, NASIM, MD


Provider ID: N/A

 1441 AVOCADO AVE STE
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Effective as of 01-JUL-23

FAZEL, NASIM, MD


Provider ID: N/A

 1401 AVOCADO AVE STE
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92660

Effective as of 01-JAN-24

FAZEL, NASIM, MD


Provider ID: N/A

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Effective as of 01-JAN-24

FAZEL, NASIM, MD


Provider ID: N/A

 1441 AVOCADO AVE STE
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Effective as of 01-SEP-23

FAZEL, NASIM, MD


Provider ID: N/A

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Effective as of 01-DEC-23

FAZEL, NASIM, MD


Provider ID: N/A

 1441 AVOCADO AVE STE
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Effective as of 01-DEC-23

FAZEL, NASIM, MD


Provider ID: N/A

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FOREMAN, TANYA, MD†

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FOREMAN, TANYA, MD†

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Effective as of 01-OCT-23

FOREMAN, TANYA, MD†

Provider ID: N/A

📄 400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
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Effective as of 01-OCT-15

FOREMAN, TANYA, MD†

Provider ID: N/A

📄 400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-17

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

📄 360 SAN MIGUEL DR STE
309
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

📄 1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

📄 1441 AVOCADO AVE STE
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NEWPORT BEACH, CA
92660

Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

📄 1441 AVOCADO AVE STE
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NEWPORT BEACH, CA
92660

Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

📄 1441 AVOCADO AVE STE
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Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

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NEWPORT BEACH, CA
92660

Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

📄 360 SAN MIGUEL DR STE
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Effective as of 01-JUL-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

📄 1441 AVOCADO AVE STE
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NEWPORT BEACH, CA
92660

Effective as of 01-JUL-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

📄 360 SAN MIGUEL DR STE
309
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

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NEWPORT BEACH, CA
92660

Effective as of 01-JUL-24

HENDERSON, GREGORY, MD

Provider ID: N/A

📄 360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
92660

Effective as of 01-NOV-23

HENDERSON, GREGORY, MD

Provider ID: N/A

📄 1441 AVOCADO AVE STE
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NEWPORT BEACH, CA
92660

Effective as of 01-NOV-23

HENDERSON, GREGORY, MD

Provider ID: N/A

📄 1441 AVOCADO AVE STE
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NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

KAMEL, JOSEPH, DO

Provider ID: N/A

📄 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA

C1. 网络提供者名单 专科护理医生

92660
Effective as of 01-MAR-24

KAMEL, JOSEPH, DO

Provider ID: N/A
360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-24

KARAVAN JAHROMI, MAHSA, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-19

KHERADMAND, SHIVA, DO†

Provider ID: N/A
240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

Provider ID: N/A
240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-21

LANDER, JEFFREY, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-21

LANDER, JEFFREY, MD†

Provider ID: N/A
400 NEWPORT CENTER
DR STE 602
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-22

LANDER, JEFFREY, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-21

LANDER, JEFFREY, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-22

LANDER, JEFFREY, MD†

Provider ID: N/A
1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-22

LANDER, JEFFREY, MD†

Provider ID: N/A
1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-22

LANDER, JEFFREY, MD†

Provider ID: N/A
1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-22

LANDER, JEFFREY, MD†

Provider ID: N/A
1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

LANDER, JEFFREY, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

LANDER, JEFFREY, MD†

Provider ID: N/A
1441 AVOCADO AVE STE
806
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92660

Effective as of 01-JAN-23

LANDER, JEFFREY, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

LANGER, ROBERT, MD

Provider ID: N/A
360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-24

LANGER, ROBERT, MD

Provider ID: N/A
360 SAN MIGUEL DR STE

C1. 网络提供者名单 专科护理医生

501
NEWPORT BEACH, CA
92660
Effective as of 01-MAR-24

LEDON, JENNIFER, MD

Provider ID: N/A
400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660
Effective as of 01-MAY-23

LEDON, JENNIFER, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-MAY-23

LEDON, JENNIFER, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-MAY-23

LEDON, JENNIFER, MD

Provider ID: N/A
400 NEWPORT CENTER
DR STE 702
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92660
Effective as of 01-MAY-23

LEDON, JENNIFER, MD

Provider ID: N/A
400 NEWPORT CENTER
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92660
Effective as of 01-JAN-23

LEDON, JENNIFER, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
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NEWPORT BEACH, CA
92660
Effective as of 01-JUL-23

LEDON, JENNIFER, MD

Provider ID: N/A
400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660
Effective as of 01-JUL-23

LEDON, JENNIFER, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
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92660
Effective as of 01-OCT-23

LEDON, JENNIFER, MD

Provider ID: N/A
400 NEWPORT CENTER
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NEWPORT BEACH, CA
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Effective as of 01-OCT-23

LEDON, JENNIFER, MD†

Provider ID: N/A
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LEVIN, JACQUELINE, DO†

Provider ID: N/A
400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA

92660
Effective as of 01-OCT-23

LEVIN, JACQUELINE, DO†

Provider ID: N/A
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LIEM, WIEKE, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
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Effective as of 01-JUL-19

LIEM, WIEKE, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
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NEWPORT BEACH, CA
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Effective as of 01-JAN-23

LIEM, WIEKE, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-MAY-19

LIEM, WIEKE, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-OCT-23

LUCERO, RENEE, DO

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

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501
NEWPORT BEACH, CA
92660
Effective as of 01-AUG-24

LUCERO, RENEE, DO

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660
Effective as of 01-JUL-23

MARTIN, STEPHANIE, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660
Effective as of 01-MAY-21

MARTIN, STEPHANIE, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660
Effective as of 01-MAY-21

MARTIN, STEPHANIE, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
92660
Effective as of 01-APR-21

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
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Effective as of 01-OCT-23

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
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92660
Effective as of 01-MAY-19

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
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NEWPORT BEACH, CA
92660
Effective as of 01-JAN-23

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
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NEWPORT BEACH, CA
92660
Effective as of 01-JUL-19

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660
Effective as of 01-MAR-23

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660
Effective as of 01-JAN-23

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA

92660

Effective as of 01-JAN-23

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
92660
Effective as of 01-JAN-23

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660
Effective as of 01-JUN-19

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660
Effective as of 01-MAR-23

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660
Effective as of 01-JAN-12

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660
Effective as of 01-JAN-18

NAMI, NAVID, DO†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-17

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
92660

Effective as of 01-SEP-19

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
92660

Effective as of 01-APR-21

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
92660

Effective as of 01-APR-21

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
92660

Effective as of 01-JAN-21

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA

92660

Effective as of 01-NOV-23

NGUYEN, DENNIS, MD⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
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Effective as of 01-APR-21

NGUYEN, DENNIS, MD⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
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Effective as of 01-FEB-23

NGUYEN, DENNIS, MD⁺

Provider ID: N/A

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NEWPORT BEACH, CA
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Effective as of 01-FEB-23

NGUYEN, DENNIS, MD⁺

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92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD⁺

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-21

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

ROSHDIEH, BABAK, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA

92660

Effective as of 01-JAN-23

ROSHDIEH, BABAK, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

ROSHDIEH, BABAK, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

ROSHDIEH, BABAK, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

ROSHDIEH, BABAK, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

ROSHDIEH, BABAK, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

ROSHDIEH, BABAK, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

SHIELL, RONALD, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

SHIELL, RONALD, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-18

SHIELL, RONALD, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-AUG-21

SHIELL, RONALD, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-AUG-21

SHIELL, RONALD, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA

92660

Teleservice

Effective as of 01-DEC-21

SHIELL, RONALD, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-DEC-21

SHIELL, RONALD, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-17

ENDOCRINOLOGY METABOLISM DIABETES

MOATTARI, ALI, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
502
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-20

SODHI, SANDEEP, MD†

Provider ID: N/A

369 SAN MIGUEL DR STE
200
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

SODHI, SANDEEP, MD†

Provider ID: N/A

369 SAN MIGUEL DR STE
200
NEWPORT BEACH, CA

92660

Effective as of 01-NOV-20

SODHI, SANDEEP, MD†

Provider ID: N/A

369 SAN MIGUEL DR STE
200
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-24

SODHI, SANDEEP, MD†

Provider ID: N/A

369 SAN MIGUEL DR STE
200
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-21

SODHI, SANDEEP, MD†

Provider ID: N/A

369 SAN MIGUEL DR STE
200
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-21

ENDOCRINOLOGY REPRODUCTIVE

MOAYERI, SHARON, MD

Provider ID: N/A

1401 AVOCADO AVE STE
403
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-24

MOAYERI, SHARON, MD

Provider ID: N/A

1401 AVOCADO AVE STE
403
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-24

C1. 网络提供者名单 专科护理医生

SACHDEV, NIDHEE, MD

Provider ID: N/A

1401 AVOCADO AVE STE
403
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-24

SACHDEV, NIDHEE, MD

Provider ID: N/A

1401 AVOCADO AVE STE
403
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-24

GASTROENTEROLOGY

SAINI, SURINDER, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
807
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-12

SAINI, SURINDER, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
807
NEWPORT BEACH, CA
92660

Effective as of 01-APR-11

GYNECOLOGY

SUGIHARA, CORINNE, MD

Provider ID: N/A

1401 AVOCADO AVE STE
602
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-24

SUGIHARA, CORINNE, MD

Provider ID: N/A

1401 AVOCADO AVE STE
602
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-24

HEMATOLOGY / ONCOLOGY

PATHAK, BHAVANA, MD†

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-21

PATHAK, BHAVANA, MD†

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-21

SACHELARIE, IRINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

SACHELARIE, IRINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

SACHELARIE, IRINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

SACHELARIE, IRINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

INTERVENTIONAL CARDIOLOGY

SARABI, DENNIS, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 610
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-21

OBSTETRICS / GYNECOLOGY

AL-AZAWI, HIND, MD

Provider ID: N/A

366 SAN MIGUEL DR STE
209
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

OPHTHALMOLOGY

AGARWAL, MADHU, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 605
NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

AGARWAL, MADHU, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 605
NEWPORT BEACH, CA

C1. 网络提供者名单 专科护理医生

92660
Effective as of 01-APR-23

AGARWAL, MADHU, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-22

AGARWAL, MADHU, MD†

Provider ID: N/A
400 NEWPORT CENTER
DR STE 605
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-21

AGARWAL, MADHU, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
307
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-18

CIES, WILLIAM, MD

Provider ID: N/A
400 NEWPORT CENTER
DR STE 404
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-12

EIFRIG, CHARLES WILLIAM, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-20

EIFRIG, CHARLES WILLIAM,

MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-20

EIFRIG, CHARLES WILLIAM, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-18

EIFRIG, CHARLES WILLIAM, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

EIFRIG, CHARLES WILLIAM, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-17

EIFRIG, CHARLES WILLIAM, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-17

GUPTA, MRINALI, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

GUPTA, MRINALI, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

GUPTA, MRINALI, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

HWANG, JOHN, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

HWANG, JOHN, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-20

HWANG, JOHN, MD†


Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA

C1. 网络提供者名单 专科护理医生

92660
Effective as of 01-NOV-17

HWANG, JOHN, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-17

HWANG, JOHN, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-18

HWANG, JOHN, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-18

LIU, WENJING, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
410
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-20

LIU, WENJING, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
410
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-22

MCGUIRE, DESMOND, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-17

MCGUIRE, DESMOND, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-14

MCGUIRE, DESMOND, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-17

MCGUIRE, DESMOND, MD†

Provider ID: N/A


 360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-20

OTOLARYNGOLOGY

BERTELSEN, CAITLIN, MD†


Provider ID: N/A

 400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†


Provider ID: N/A

 400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA

92660
Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†


Provider ID: N/A

 400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†


Provider ID: N/A

 400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†


Provider ID: N/A

 400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†


Provider ID: N/A

 400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

WILLNER, AYAL, MD†

Provider ID: N/A


 400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-12

WILLNER, AYAL, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生


 400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-12

PEDIATRIC PULMONOLOGY

HARRISON, AMY, MD


Provider ID: N/A

 369 SAN MIGUEL DR STE
375
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-24

HARRISON, AMY, MD


Provider ID: N/A

 369 SAN MIGUEL DR STE
375
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-24

HARRISON, AMY, MD

Provider ID: N/A


 369 SAN MIGUEL DR STE
375
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-24

PEDIATRICS

HOLM, WILLIAM, MD[†]


Provider ID: N/A

 1401 AVOCADO AVE STE
802
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

SAFER, TERRA, MD

Provider ID: N/A


 360 SAN MIGUEL DR STE
105
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-23

PHYSICIANS ASSISTANT

CORTES, ELIZABETH, PA


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-23

DYKHUIS, KATELYN, PA


Provider ID: N/A

 1441 AVOCADO AVE STE
503
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-24

DYKHUIS, KATELYN, PA


Provider ID: N/A

 1441 AVOCADO AVE STE
503
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-24

KANE, KARA, PA[†]


Provider ID: N/A

 400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-22

KANE, KARA, PA[†]

Provider ID: N/A


 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA

92660

Effective as of 01-OCT-22

KAUFMAN, BRITNEY, PA[†]


Provider ID: N/A

 240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-15

KLEINSMITH, DARIN, PA[†]


Provider ID: N/A

 1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

LUCATERO, JENNIFER, PA[†]


Provider ID: N/A

 240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-18

MOUNTAIN, KELLY, PA


Provider ID: N/A

 1441 AVOCADO AVE STE
503
NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

NORMAN, STACY, PA

Provider ID: N/A

 1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

NORMAN, STACY, PA

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

NORMAN, STACY, PA

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

STANDEL, SARAH, PA†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660*

Effective as of 01-JUL-19

PODIATRIST

HAUPT, DAVID, DPM†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 706
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-19

HAUPT, DAVID, DPM†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 706
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-24

LEAMING, ROBERT, DPM

Provider ID: N/A

366 SAN MIGUEL DR STE
210
NEWPORT BEACH, CA

92660

Teleservice

Effective as of 01-FEB-24

LEAMING, ROBERT, DPM

Provider ID: N/A

366 SAN MIGUEL DR STE
210
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-FEB-24

MERCADO, BRYANT, DPM

Provider ID: N/A

400 NEWPORT CENTER
DR STE 706
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-23

PSYCHOLOGIST

KEALEY, TAMMY, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

KEALEY, TAMMY, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

KEALEY, TAMMY, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

KEALEY, TAMMY, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

LIM, DEAN, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

LIM, DEAN, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

LIM, DEAN, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

LIM, DEAN, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

RADIATION ONCOLOGY

KINI, VIJAYKUMAR, MD

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

1605 AVOCADO AVE
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-24

RASHTIAN, AFSHIN, MD

Provider ID: N/A

1605 AVOCADO AVE
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-24

RASHTIAN, AFSHIN, MD

Provider ID: N/A

1605 AVOCADO AVE
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-24

SURGERY GENERAL

BONEV, VALENTINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

BONEV, VALENTINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

BONEV, VALENTINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

BONEV, VALENTINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

BURNS, ROBERT, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 500
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-12

SURGERY PLASTIC

MUDGE, BRADLEY, MD†

Provider ID: N/A

240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-JUL-12

MUDGE, BRADLEY, MD†

Provider ID: N/A

240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-SEP-21

MUDGE, BRADLEY, MD†

Provider ID: N/A

240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-SEP-21

RICHLAND, BRANDON, MD

Provider ID: N/A

1441 AVOCADO AVE STE 710

NEWPORT BEACH, CA
92660

Effective as of 01-SEP-20

RICHLAND, BRANDON, MD

Provider ID: N/A

1441 AVOCADO AVE STE 710
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-20

RICHLAND, BRANDON, MD

Provider ID: N/A

1441 AVOCADO AVE STE 710
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-24

RICHLAND, BRANDON, MD

Provider ID: N/A

1441 AVOCADO AVE STE 710
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-20

ROSING, JAMES, MD

Provider ID: N/A

1441 AVOCADO AVE STE
708
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

ROSING, JAMES, MD

Provider ID: N/A

1441 AVOCADO AVE STE
708
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

UROLOGY

PHAN, CU, MD

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

400 NEWPORT CENTER
DR STE 409
NEWPORT BEACH, CA
92660

Effective as of 01-APR-11

PHAN, CU, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 409
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-18

PHAN, CU, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 409
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-12

PHAN, CU, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 409
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-12

FAMILY PRACTICE

SPORTS MEDICINE

YIM, EUGENE, MD[†]

Provider ID: N/A

21115 NEWPORT COAST DR
NEWPORT COAST, CA
92657

Effective as of 01-JAN-21

ANESTHESIOLOGY

TOWNE, BROOKE, MD

Provider ID: N/A

3998 VISTA WAY STE C

OCEANSIDE, CA 92056
Effective as of 01-JAN-24

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY, MD

Provider ID: N/A

2125 S EL CAMINO REAL
STE 103
OCEANSIDE, CA 92054
Effective as of 01-JUL-24

COHEN, ZACHARY, MD[†]

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Effective as of 01-OCT-21

COHEN, ZACHARY, MD[†]

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Effective as of 01-OCT-21

COHEN, ZACHARY, MD

Provider ID: N/A

2125 S EL CAMINO REAL
STE 103
OCEANSIDE, CA 92054
Effective as of 01-SEP-24

COHEN, ZACHARY, MD[†]

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Effective as of 01-NOV-21

DAIRO, BRANDON, MD[†]

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JAN-23

FISHER, CASEY, MD

Provider ID: N/A

2125 S EL CAMINO REAL
STE 103
OCEANSIDE, CA 92054
Effective as of 01-APR-24

FISHER, CASEY, MD

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Effective as of 01-JUN-19

FISHER, CASEY, MD

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Effective as of 01-JUL-21

GUPTA, PRAGYA, MD

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056
Effective as of 01-AUG-24

LAWSON, ERIN, MD

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Effective as of 01-JUL-23

LAWSON, ERIN, MD

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

PRABHU, NAMRATHA, MD

Provider ID: N/A

2125 S EL CAMINO REAL
STE 103
OCEANSIDE, CA 92054
Effective as of 01-APR-24

TOWNE, BROOKE, MD

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

CARDIAC ELECTROPHYSIOLOGY

**PASHMFOROUSH,
MOHAMMAD, MD†**

Provider ID: N/A
2424 VISTA WAY STE 300
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JUN-21

CARDIOVASCULAR DISEASE

EL SHERIEF, KARIM, MD†

Provider ID: N/A
3230 WARING CT STE O
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

KABRA, ASHISH, MD†

Provider ID: N/A
3907 WARING RD STE 3
OCEANSIDE, CA 92056
Effective as of 01-AUG-22

**RAJAMANICKAM, ANITHA,
MD†**

Provider ID: N/A
3907 WARING RD STE 3
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

**RAJAMANICKAM, ANITHA,
MD†**

Provider ID: N/A
3907 WARING RD STE 3
OCEANSIDE, CA 92056
Effective as of 01-AUG-22

SAMANI, PARGOL, MD

Provider ID: N/A
3927 WARING RD STE C
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-DEC-23

SHEREV, DIMITRI, MD

Provider ID: N/A
3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Effective as of 01-SEP-23

YUNG, AARON, MD†

Provider ID: N/A
2424 VISTA WAY STE 300
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JUN-21

CERTIFIED ACUPUNCTURIST

DUFFIELD, GARY, LAC

Provider ID: N/A
517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-SEP-24

DUFFIELD, GARY, LAC

Provider ID: N/A
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-SEP-24

DUFFIELD, GARY, LAC

Provider ID: N/A
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-SEP-24

DUFFIELD, GARY, LAC

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-SEP-24

DUFFIELD, GARY, LAC

Provider ID: N/A
4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-SEP-24

DUFFIELD, GARY, LAC

Provider ID: N/A
4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-SEP-24

GONZALEZ, ANDRES, LAC

Provider ID: N/A
3988 VISTA WAY STE G
OCEANSIDE, CA 92056
Effective as of 01-JUL-24

LIPTON, GREGORY, LAC

Provider ID: N/A
701 SEAGAZE DR STE B
OCEANSIDE, CA 92054
Effective as of 01-SEP-21

CERTIFIED NURSE PRACTITIONER

ANDOLINA, SARA, NP†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21


BAEK, KILHYO, NP

Provider ID: N/A
4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

BAEK, KILHYO, NP


Provider ID: N/A

C1. 网络提供者名单 专科护理医生

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24


BAEK, KILHYO, NP

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-FEB-24


BALDWIN, ANDREA, NP†

Provider ID: N/A

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24


BALDWIN, ANDREA, NP†

Provider ID: N/A

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-NOV-22


CHAMBERLIN, KALIANA, NP

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-21


CHILAKA, SAMUEL, NP

Provider ID: N/A

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24


CHRISTY, TYLER, NPF

Provider ID: N/A

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24


CHRISTY, TYLER, NPF

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24


CORY, ALLISON, NP

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24


CORY, ALLISON, NP

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-FEB-24


CORY, ALLISON, NP

Provider ID: N/A

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-FEB-24


EKLUND, BONNIE, NP

Provider ID: N/A

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-FEB-24


EKLUND, BONNIE, NP

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-FEB-24

FISHER-GAMEZ, LORI, NP


Provider ID: N/A

 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice

Effective as of 01-OCT-21


HALGEDAHL, YI TING, NP

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24


HALGEDAHL, YI TING, NP

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

HALGEDAHL, YI TING, NP

Provider ID: N/A

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24


HOWELL, AMANDA, NP

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24


HOWELL, AMANDA, NP

Provider ID: N/A

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

HOWELL, AMANDA, NP

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24


HUERTA, STEVEN, NP

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-24


HUERTA, STEVEN, NP

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-24

HUERTA, STEVEN, NP

Provider ID: N/A

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

C1. 网络提供者名单 专科护理医生

Effective as of 01-JUL-24

KELLEHER, BRIDGET, NP

Provider ID: N/A

📍 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-APR-24

KELLEHER, BRIDGET, NP

Provider ID: N/A

📍 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-APR-24

KELLEHER, BRIDGET, NP

Provider ID: N/A

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-APR-24

LANG, LESLIE, NPF

Provider ID: N/A

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-MAY-24

NAVA, PETER, NP

Provider ID: N/A

📍 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

PATEMAN, CAROLYN, NP

Provider ID: N/A

📍 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

PRITZKER, JOELY, NP

Provider ID: N/A

📍 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-21

PRITZKER, JOELY, NP

Provider ID: N/A

📍 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

PRITZKER, JOELY, NP

Provider ID: N/A

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

QUINN, ERIN, NP

Provider ID: N/A

📍 3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-MAY-21

SANTIAGO, AMANDA, NP

Provider ID: N/A

📍 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-21

SHAHBAZ, LINNAE, NPF

Provider ID: N/A

📍 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-MAR-24

SHAHBAZ, LINNAE, NPF

Provider ID: N/A

📍 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-MAR-24

WAGNER, TASIA, NP

Provider ID: N/A

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

WAGNER, TASIA, NP

Provider ID: N/A

📍 517 N HORNE ST

OCEANSIDE, CA 92054
Effective as of 01-APR-24

WAGNER, TASIA, NP

Provider ID: N/A

📍 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-APR-24

WINDHAM, SUZONNE, NP

Provider ID: N/A

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

CERTIFIED REGISTERED NURSE MIDWIFE

KELLY, KATHERINE, CRNM[†]

Provider ID: N/A

📍 2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

LASKY, LANA, CRNM

Provider ID: N/A

📍 2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

PERLMAN, TAMARA, CRNM[†]

Provider ID: N/A

📍 2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

📍 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

📍 4700 N RIVER RD

C1. 网络提供者名单 专科护理医生

OCEANSIDE, CA 92057
Effective as of 01-JAN-24

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A
☑ 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

CHIROPRACTOR

ANDREWS, BRAD, DC

Provider ID: N/A
☑ 619 CROUCH ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

JU, NATHANIEL, DC†

Provider ID: N/A
☑ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

JU, NATHANIEL, DC†

Provider ID: N/A
☑ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

LOVERN, JENNIFER, DC

Provider ID: N/A
☑ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-24

LOVERN, JENNIFER, DC

Provider ID: N/A
☑ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-AUG-24

TRAINER, JASON, DC

Provider ID: N/A
☑ 3998 VISTA WAY STE G
OCEANSIDE, CA 92056

Effective as of 01-JUL-24

DERMATOLOGY

AGUIRRE, KRISTEN, MD†

Provider ID: N/A
☑ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-20

AGUIRRE, KRISTEN, MD†

Provider ID: N/A
☑ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-FEB-24

ANGRA, KUNAL, MD†

Provider ID: N/A
☑ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-DEC-21

ANGRA, KUNAL, MD†

Provider ID: N/A
☑ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-NOV-20

BROWN, REGINA, MD

Provider ID: N/A
☑ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-24

BROWN, REGINA, MD

Provider ID: N/A
☑ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-24

BROWN, REGINA, MD

Provider ID: N/A
☑ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-24

GILBOA, RUTH, MD†

Provider ID: N/A
☑ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20

GILBOA, RUTH, MD†

Provider ID: N/A
☑ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-MAR-12

ROSS, ANDREW, MD†

Provider ID: N/A
☑ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

ROSS, ANDREW, MD†

Provider ID: N/A
☑ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20

ROSS, ANDREW, MD†

Provider ID: N/A
☑ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20

ROSS, ANDREW, MD†

Provider ID: N/A
☑ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SAMADY, JOSEPH, MD†

Provider ID: N/A
☑ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SAMADY, JOSEPH, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20

SAMADY, JOSEPH, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-APR-07

SAMADY, JOSEPH, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

SAMADY, JOSEPH, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-MAR-12

**SIRICHOTIRATANA, MELISSA,
MD†**

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-23

THIELE, JENS, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

THIELE, JENS, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-MAR-12

THIELE, JENS, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056

Effective as of 01-JUL-22

THIELE, JENS, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-09

TSE, YARDY, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

TSE, YARDY, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

VENKAT, ARUN, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20

VENKAT, ARUN, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-13

VENKAT, ARUN, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

WONG, DARRYL, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

WONG, DARRYL, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-MAR-12

ENDOCRINOLOGY REPRODUCTIVE

COFFLER, MICKEY, MD†
Provider ID: N/A

3231 WARING CT STE M
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

FAMILY PRACTICE

MARTINEZ, LESLY, MD
Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054*
Effective as of 01-JUL-24

MARTINEZ, LESLY, MD
Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054*
Effective as of 01-JUL-24

MARTINEZ, LESLY, MD
Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057*
Effective as of 01-JUL-24

MATIAS, JULIE, DO
Provider ID: N/A

3998 VISTA WAY STE 204
OCEANSIDE, CA 92056
Effective as of 01-JUN-24

PANICKER, CIBU, MD
Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-SEP-18

C1. 网络提供者名单 专科护理医生

SNYDER, OLE, MD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057*
Effective as of 01-JUN-24

SNYDER, OLE, MD

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054*
Effective as of 01-JUN-24

SNYDER, OLE, MD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054*
Effective as of 01-JUN-24

VIDAL, MONICA, DO†

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054*
Effective as of 01-JUL-24

VIDAL, MONICA, DO†

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057*
Effective as of 01-JUL-24

VIDAL, MONICA, DO†

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054*
Effective as of 01-JUL-24

FAMILY PRACTICE SPORTS MEDICINE

STARK, ERIK, MD†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Teleservice

Effective as of 01-SEP-21

GASTROENTEROLOGY

CHIAO, HELLEN, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

CHIAO, HELLEN, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

CHIAO, HELLEN, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

CHIAO, HELLEN, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

DEVEREAUX, CHRISTOPHER, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

DEVEREAUX, CHRISTOPHER, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-MAR-01

DEVEREAUX, CHRISTOPHER, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

DEVEREAUX, CHRISTOPHER, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

DEVEREAUX, CHRISTOPHER, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

KROL, THOMAS, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

KROL, THOMAS, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

KROL, THOMAS, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUN-99

KROL, THOMAS, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

NOVO, MEGAN, MD

Provider ID: N/A

3923 WARING RD STE A

C1. 网络提供者名单 专科护理医生

OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUL-24

NOVO, MEGAN, MD

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUL-23

NOVO, MEGAN, MD

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-23

NOVO, MEGAN, MD

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-23

SHAD, JAVAID, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SHAD, JAVAID, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SHAD, JAVAID, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SHAD, JAVAID, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

SHAD, JAVAID, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-DEC-07

SHIM, MICHAEL, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-FEB-10

SHIM, MICHAEL, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

SHIM, MICHAEL, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SHIM, MICHAEL, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SHIM, MICHAEL, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

VIERNES, MATTHEW, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056

Effective as of 01-JAN-21

VIERNES, MATTHEW, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-SEP-01

VIERNES, MATTHEW, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

VIERNES, MATTHEW, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ, MD†

Provider ID: N/A
4002 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-21

HEMATOLOGY / ONCOLOGY

SINGH, HIMANI, MD†

Provider ID: N/A
3617 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SINGH, HIMANI, MD†

Provider ID: N/A
3617 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

C1. 网络提供者名单 专科护理医生

INTERNAL MEDICINE

KHARADJIAN, TALAR, MD†

Provider ID: N/A

📄 3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-21

KHARADJIAN, TALAR, MD†

Provider ID: N/A

📄 3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-22

KHARADJIAN, TALAR, MD†

Provider ID: N/A

📄 3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

LIU, ANDREW, MD

Provider ID: N/A

📄 3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Effective as of 01-SEP-23

MACMURRAY, MICHAEL, MD

Provider ID: N/A

📄 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-NOV-23

MOOLANI, UJJALA, MD

Provider ID: N/A

📄 3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Effective as of 01-MAY-23

PAROLY, WARREN, MD†

Provider ID: N/A

📄 3617 VISTA WAY

OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SHABANIAN, LEILA, MD

Provider ID: N/A

📄 818 PIER VIEW WAY
OCEANSIDE, CA 92054*
Effective as of 01-MAY-24

SHABANIAN, LEILA, MD

Provider ID: N/A

📄 4700 N RIVER RD
OCEANSIDE, CA 92057*
Effective as of 01-AUG-24

INTERNAL MEDICINE

GERIATRIC MEDICINE

CHONG, ILSONG, MD

Provider ID: N/A

📄 3998 VISTA WAY STE 204
OCEANSIDE, CA 92056
Effective as of 01-JUN-24

INTERVENTIONAL

CARDIOLOGY

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

📄 605 CROUCH ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

LICENSED CLINICAL

SOCIAL WORKER

ACOSTA, AZUCENA, LCSW

Provider ID: N/A

📄 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

ACOSTA, AZUCENA, LCSW

Provider ID: N/A

📄 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

ACOSTA, AZUCENA, LCSW

Provider ID: N/A

📄 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

CRUZ, VANESSA, LCSW

Provider ID: N/A

📄 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

CRUZ, VANESSA, LCSW

Provider ID: N/A

📄 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-21

CRUZ, VANESSA, LCSW

Provider ID: N/A

📄 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

DOUGHERTY, CHRISTINE, LCSW

Provider ID: N/A

📄 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

DOUGHERTY, CHRISTINE, LCSW

Provider ID: N/A

📄 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

DOUGHERTY, CHRISTINE, LCSW

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

☞ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

GODINEZ, BRENDA, LCSW
Provider ID: N/A

☞ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

GODINEZ, BRENDA, LCSW
Provider ID: N/A

☞ 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

GODINEZ, BRENDA, LCSW
Provider ID: N/A

☞ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

MENDEZ, ADRIANA, LCSW
Provider ID: N/A

☞ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

MENDEZ, ADRIANA, LCSW
Provider ID: N/A

☞ 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

MENDEZ, ADRIANA, LCSW
Provider ID: N/A

☞ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW
Provider ID: N/A

☞ 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Teleservice

Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW

Provider ID: N/A

☞ 4700 N RIVER RD
OCEANSIDE, CA 92057

Teleservice

Effective as of 01-JAN-24

SANCHEZ, ADRIANA, LCSW

Provider ID: N/A

☞ 818 PIER VIEW WAY
OCEANSIDE, CA 92054

Effective as of 01-JAN-24

SANCHEZ, ADRIANA, LCSW

Provider ID: N/A

☞ 4700 N RIVER RD
OCEANSIDE, CA 92057

Effective as of 01-JAN-24

SANCHEZ, ADRIANA, LCSW

Provider ID: N/A

☞ 517 N HORNE ST
OCEANSIDE, CA 92054

Effective as of 01-JAN-24

SMITH, SONYA, LCSW

Provider ID: N/A

☞ 517 N HORNE ST
OCEANSIDE, CA 92054

Effective as of 01-JAN-24

SMITH, SONYA, LCSW

Provider ID: N/A

☞ 4700 N RIVER RD
OCEANSIDE, CA 92057

Effective as of 01-JAN-24

SMITH, SONYA, LCSW

Provider ID: N/A

☞ 818 PIER VIEW WAY
OCEANSIDE, CA 92054

Effective as of 01-JAN-24

WILSON, CARLENE, LCSW

Provider ID: N/A

☞ 4700 N RIVER RD
OCEANSIDE, CA 92057

Effective as of 01-JAN-24

ZAPPONE, ALIDA, LCSW

Provider ID: N/A

☞ 4700 N RIVER RD
OCEANSIDE, CA 92057

Teleservice

Effective as of 01-JAN-24

ZAPPONE, ALIDA, LCSW

Provider ID: N/A

☞ 818 PIER VIEW WAY
OCEANSIDE, CA 92054

Teleservice

Effective as of 01-JAN-24

ZAPPONE, ALIDA, LCSW

Provider ID: N/A

☞ 517 N HORNE ST
OCEANSIDE, CA 92054

Teleservice

Effective as of 01-JAN-24

**MARRIAGE FAMILY
THERAPIST**

MEYERHOF, GRETA, MFT†

Provider ID: N/A

☞ 818 PIER VIEW WAY
OCEANSIDE, CA 92054

Effective as of 01-JAN-24

MEYERHOF, GRETA, MFT†

Provider ID: N/A

☞ 517 N HORNE ST
OCEANSIDE, CA 92054

Effective as of 01-JAN-24

MEYERHOF, GRETA, MFT†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

MEDICAL ONCOLOGY

PAROLY, WARREN, MD†

Provider ID: N/A

3617 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

NEPHROLOGY

KHARADJIAN, TALAR, MD†

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUL-21

KHARADJIAN, TALAR, MD†

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUN-21

LIU, ANDREW, MD

Provider ID: N/A

3300 VISTA WAY
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUL-24

LIU, ANDREW, MD

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Effective as of 01-NOV-23

LIU, ANDREW, MD

Provider ID: N/A

3300 VISTA WAY
OCEANSIDE, CA 92056*

Teleservice

Effective as of 01-OCT-23

LIU, ANDREW, MD

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

LIU, ANDREW, MD

Provider ID: N/A

3300 VISTA WAY
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-DEC-23

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA, MD†

Provider ID: N/A

4002 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-21

EBRAHIMIADIB, TANNAZ, MD†

Provider ID: N/A

3927 WARING RD STE D
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

EBRAHIMIADIB, TANNAZ, MD†

Provider ID: N/A

3927 WARING RD STE D
OCEANSIDE, CA 92056
Effective as of 01-JAN-19

MAZAREI, RAHELE, DO†

Provider ID: N/A

3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-MAY-21

MAZAREI, RAHELE, DO†

Provider ID: N/A

3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-MAR-20

SCHWEIKERT, SUZANNE, MD†

Provider ID: N/A

2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

SCHWEIKERT, SUZANNE, MD†

Provider ID: N/A

2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-APR-15

SUNTAY, BERK, MD†

Provider ID: N/A

3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-MAY-21

SUNTAY, BERK, MD†

Provider ID: N/A

3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-JUN-21

OPHTHALMOLOGY

JACOBSEN, BRADLEY, MD

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-OCT-23

JACOBSEN, BRADLEY, MD


Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-JUL-23


NGUYEN, VINCENT, MD†

Provider ID: N/A


C1. 网络提供者名单 专科护理医生

 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-SEP-21


NGUYEN, VINCENT, MD†
Provider ID: N/A

 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-APR-20


ROBINSON, FANE, MD†
Provider ID: N/A

 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-FEB-10


SHEILS, CATHERINE, MD
Provider ID: N/A

 3637 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-24


SMITH, MARK, MD†
Provider ID: N/A

 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-FEB-10


SMITH, MARK, MD†
Provider ID: N/A

 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SONG, DELU, MD
Provider ID: N/A


 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-OCT-23

SONG, DELU, MD
Provider ID: N/A

 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

SONG, DELU, MD


Provider ID: N/A

 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-JUL-23

OPTOMETRIST


GEE, JENNIFER, OD

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22


GEE, JENNIFER, OD

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24


GEE, JENNIFER, OD

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22


GEE, JENNIFER, OD

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24


KIM, MICHAEL, OD

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22


KIM, MICHAEL, OD

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24


KIM, MICHAEL, OD

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24


KIM, MICHAEL, OD

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22


MORA, WENDY, OD

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

MORA, WENDY, OD

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24


MORA, WENDY, OD

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24


MORA, WENDY, OD

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22


RICH, RYAN, OD

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

RICH, RYAN, OD

Provider ID: N/A

 517 N HORNE ST

C1. 网络提供者名单 专科护理医生

OCEANSIDE, CA 92054
Effective as of 01-JAN-24

RICH, RYAN, OD

Provider ID: N/A
☑ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

RICH, RYAN, OD

Provider ID: N/A
☑ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

RING, ROBERT, OD†

Provider ID: N/A
☑ 3998 VISTA WAY STE 204
OCEANSIDE, CA 92056
Effective as of 01-SEP-22

TAM, EMILY, OD

Provider ID: N/A
☑ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

TAM, EMILY, OD

Provider ID: N/A
☑ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

TAM, EMILY, OD

Provider ID: N/A
☑ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

TAM, EMILY, OD

Provider ID: N/A
☑ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

OTOLARYNGOLOGY

CARROLL, SARAH, MD†

Provider ID: N/A
☑ 3907 WARING RD STE 1
OCEANSIDE, CA 92056
Effective as of 01-OCT-21

CARROLL, SARAH, MD†

Provider ID: N/A
☑ 3907 WARING RD STE 1
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

CARROLL, SARAH, MD†

Provider ID: N/A
☑ 3907 WARING RD STE 1
OCEANSIDE, CA 92056
Effective as of 01-MAY-21

JACOBS, ROBERT, MD†

Provider ID: N/A
☑ 3907 WARING RD STE 1A
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

JACOBS, ROBERT, MD†

Provider ID: N/A
☑ 3907 WARING RD STE 1A
OCEANSIDE, CA 92056
Effective as of 01-JUN-99

KUSHNARYOV, ANTON, MD

Provider ID: N/A
☑ 3909 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-APR-23

REISMAN, BRUCE, MD†

Provider ID: N/A
☑ 3907 WARING RD STE 1
OCEANSIDE, CA 92056
Effective as of 01-JUN-99

PEDIATRICS

CURLEY, EDWARD, MD†

Provider ID: N/A
☑ 2210 MESA DR STE 300
OCEANSIDE, CA 92054
Effective as of 01-FEB-15

RONAN, KEVIN, MD

Provider ID: N/A
☑ 4700 N RIVER RD
OCEANSIDE, CA 92057*
Effective as of 01-JUL-24

RONAN, KEVIN, MD

Provider ID: N/A
☑ 818 PIER VIEW WAY
OCEANSIDE, CA 92054*
Effective as of 01-JUL-24

PHYS MED/ REHAB PAIN MEDICINE

FISHER, CASEY, MD

Provider ID: N/A
☑ 2125 S EL CAMINO REAL
STE 103
OCEANSIDE, CA 92054
Effective as of 01-AUG-24

PHYSICAL MEDICINE / REHABILITATION

CURRY, JASON, MD†

Provider ID: N/A
☑ 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

FISHER, CASEY, MD

Provider ID: N/A
☑ 3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

C1. 网络提供者名单 专科护理医生

PERRIZO, NATHAN, DO

Provider ID: N/A

3998 VISTA WAY STE 108
OCEANSIDE, CA 92056

Effective as of 01-SEP-21

RICHARDSON, HENRY, MD†

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-MAY-23

PHYSICIANS ASSISTANT

BASIN, NATALIE, PA

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-DEC-23

BASIN, NATALIE, PA

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-AUG-23

BECKER, JANTIMA, PA

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-APR-24

BRODSKY, DENNIS, PA

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-FEB-22

COWAN, JOHN, PA†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

GLASSER, DANIEL, PA

Provider ID: N/A

605 CROUCH ST BLDG C
OCEANSIDE, CA 92054

Effective as of 01-MAY-24

JOHNSON, RYAN, PA

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-JUN-24

PAUL, ROBERT, PA†

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-FEB-22

POLLINGTON, CHRISTOPHER, PA

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-OCT-23

RAMOS, ELENA, PA

Provider ID: N/A

605 CROUCH ST BLDG C
OCEANSIDE, CA 92054

Effective as of 01-AUG-23

SKULSKY, EVA, PA†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056

Effective as of 01-JAN-21

THOMAS, ROGER, PA

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-JUL-23

WALLACE, STEPHANIE, PA

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057

Effective as of 01-FEB-24

WRIGHT, DEREK, PA

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056

Effective as of 01-APR-24

WRIGHT, DEREK, PA

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056

Effective as of 01-AUG-23

PODIATRIST

BOBICK, BRIAN, DPM†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

BOBICK, BRIAN, DPM†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

BROOKS, JEFFREY, DPM

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

3230 WARING CT STE M
OCEANSIDE, CA 92056
Effective as of 01-APR-21

HAN, JAMES, DPM

Provider ID: N/A

2119 S EL CAMINO REAL
OCEANSIDE, CA 92054
Effective as of 01-DEC-11

SPRINGER, DEWAIN, DPM†

Provider ID: N/A

2191 S EL CAMINO REAL
STE 101
OCEANSIDE, CA 92054
Effective as of 01-JUL-18

PSYCHIATRY

BELL, JENNIFER, DO

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-FEB-24

BELL, JENNIFER, DO

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-FEB-24

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

520 N COAST HWY STE 103
OCEANSIDE, CA 92054
Effective as of 01-AUG-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

520 N COAST HWY STE 103
OCEANSIDE, CA 92054
Effective as of 01-AUG-22

CHRISTIANSON, WARREN, DO

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-AUG-21

PATEL, MITESH, MD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Teleservice

Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

PULMONARY DISEASES

CORONA, FRANK, MD

Provider ID: N/A

3907 WARING RD STE 2
OCEANSIDE, CA 92056
Effective as of 01-AUG-23

CORONA, FRANK, MD

Provider ID: N/A

3231 WARING CT STE D
OCEANSIDE, CA 92056
Effective as of 01-JUN-99

VISEROI, MARIUS, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

3231 WARING CT STE D
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

YAMANAKA, MARK, MD

Provider ID: N/A

3907 WARING RD STE 2
OCEANSIDE, CA 92056
Effective as of 01-AUG-23

RADIATION ONCOLOGY

HOOPES, DAVID, MD

Provider ID: N/A

4002 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

RASH, DOMINIQUE, MD

Provider ID: N/A

4002 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

URBANIC, JAMES, MD

Provider ID: N/A

4002 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

REGISTERED PHYSICAL THERAPIST

AMBROSE, CHRISTOPHER, PT

Provider ID: N/A

467 COLLEGE BLVD STE 6
OCEANSIDE, CA 92057
Effective as of 01-DEC-21

BOUCHARD, REID, PT

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Effective as of 01-OCT-21

DOULL, MATTHEW, PT

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUN-23

FARRAR, COURTNEY, PT†

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JAN-23

FARRAR, COURTNEY, PT†

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JAN-23

GARBER, MARC, PT

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-21

LANGIS, TANYA, PT

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-21

MCGEE, JACQUELINE, PT

Provider ID: N/A

467 COLLEGE BLVD STE 6
OCEANSIDE, CA 92057
Effective as of 01-DEC-21

OSORIO, SANTIAGO, PT

Provider ID: N/A

2424 VISTA WAY STE 120

OCEANSIDE, CA 92054
Effective as of 01-SEP-22

PENNINGTON, JENNIFER, PT

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-21

TAMAYO, SYDNIE, PT

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-23

WILSON, JENNIFER, PT

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-21

RHEUMATOLOGY

BEJKO, ETELEVA, MD

Provider ID: N/A

3998 VISTA WAY STE E
OCEANSIDE, CA 92056
Effective as of 01-JAN-24

BRION, PAUL, MD

Provider ID: N/A

3998 VISTA WAY STE E
OCEANSIDE, CA 92056
Effective as of 01-JUL-24

BRION, PAUL, MD

Provider ID: N/A

3998 VISTA WAY STE E
OCEANSIDE, CA 92056
Effective as of 01-FEB-24

SURGERY COLON

C1. 网络提供者名单 专科护理医生

SURGERY

NASSERY, KRISTEN, MD†

Provider ID: N/A

📄 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-AUG-24

NASSERY, KRISTEN, MD†

Provider ID: N/A

📄 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

NASSERY, KRISTEN, MD†

Provider ID: N/A

📄 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-JUL-24

NASSERY, KRISTEN, MD†

Provider ID: N/A

📄 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SURGERY GENERAL

DEEMER, ANDREW, MD†

Provider ID: N/A

📄 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

DEEMER, ANDREW, MD†

Provider ID: N/A

📄 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

DEEMER, ANDREW, MD†

Provider ID: N/A

📄 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-JUL-24

JAMSHIDI-NEZHAD, MOHAMMAD, DO

Provider ID: N/A

📄 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-JUL-24

JAMSHIDI-NEZHAD, MOHAMMAD, DO

Provider ID: N/A

📄 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

JAMSHIDI-NEZHAD, MOHAMMAD, DO

Provider ID: N/A

📄 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-AUG-24

SEIDEN, GRANT, MD†

Provider ID: N/A

📄 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

WAKILY, HUSSNA, MD†

Provider ID: N/A

📄 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

WAKILY, HUSSNA, MD†

Provider ID: N/A

📄 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-JUL-24

WAKILY, HUSSNA, MD†

Provider ID: N/A

📄 3601 VISTA WAY STE 203

OCEANSIDE, CA 92056
Effective as of 01-AUG-24

WAKILY, HUSSNA, MD†

Provider ID: N/A

📄 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SURGERY GENERAL VASCULAR

DEEMER, ANDREW, MD†

Provider ID: N/A

📄 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-AUG-24

SURGERY HAND

DAUGHERTY, DAVID, MD†

Provider ID: N/A

📄 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

HARTMAN, ANDREW, MD†

Provider ID: N/A

📄 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

SEIDEN, GRANT, MD†

Provider ID: N/A


📄 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

SURGERY ORTHOPEDIC

AMORY, DAVID, MD†


C1. 网络提供者名单 专科护理医生

Provider ID: N/A

 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21


DAUGHERTY, DAVID, MD†

Provider ID: N/A

 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21


KANE, NORMAN, MD†

Provider ID: N/A

 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21


KANE, NORMAN, MD†

Provider ID: N/A

 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

STARK, ERIK, MD†


Provider ID: N/A

 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

SURGERY THORACIC

WU, DARRELL, MD†


Provider ID: N/A

 3156 VISTA WAY STE 100
OCEANSIDE, CA 92056
Effective as of 01-JUL-21

UROLOGY


BOONJINDASUP, AARON, MD

Provider ID: N/A

 3907 WARING RD STE 4
OCEANSIDE, CA 92056
Effective as of 01-SEP-21


FRASIER, BRADLEY, MD†

Provider ID: N/A

 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21


FRASIER, BRADLEY, MD†

Provider ID: N/A

 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-21


FRASIER, BRADLEY, MD†

Provider ID: N/A

 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUN-99


GUERENA, MICHAEL, MD†

Provider ID: N/A

 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUN-99


GUERENA, MICHAEL, MD†

Provider ID: N/A

 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

GUERENA, MICHAEL, MD†

Provider ID: N/A

 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

PHILLIPS, JASON, MD†


Provider ID: N/A

 3907 WARING RD STE 4

OCEANSIDE, CA 92056
Effective as of 01-SEP-21


SHAPIRO, ROBERT, MD

Provider ID: N/A

 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-23


VILCHIS, CAROLINE, MD†

Provider ID: N/A

 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-DEC-13


VILCHIS, CAROLINE, MD†

Provider ID: N/A

 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

VILCHIS, CAROLINE, MD†


Provider ID: N/A

 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

CERTIFIED NURSE PRACTITIONER

ADDO, BELINDA, NP†


Provider ID: N/A

 524 W 4TH ST STE B
PERRIS, CA 92570
Effective as of 01-OCT-22

CHIROPRACTOR

JIMENEZ, CLARIBEL, DC

Provider ID: N/A

 1675 N PERRIS BLVD STE G1
PERRIS, CA 92571*
Effective as of 01-OCT-24

SCHRIEFER, NOAH, DC

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

☐ 1675 N PERRIS BLVD STE G1
PERRIS, CA 92571
Effective as of 01-MAY-24

TRAINER, JASON, DC†

Provider ID: N/A

☐ 1675 N PERRIS BLVD STE G1
PERRIS, CA 92571
Effective as of 01-JUL-22

NEUROLOGY CHILD

ARCA, CHRIS, MD

Provider ID: N/A

☐ 215 W 4TH ST
PERRIS, CA 92570
Effective as of 01-NOV-23

PEDIATRICS

LEE, ALAN, MD†

Provider ID: N/A

☐ 215 W 4TH ST
PERRIS, CA 92570*
Effective as of 01-AUG-20

LEE, ALAN, MD†

Provider ID: N/A

☐ 215 W 4TH ST
PERRIS, CA 92570*
Effective as of 01-AUG-20

PREVENTATIVE MEDICINE ANESTHESIOLOGY PAIN GENERAL MANAGEMENT

LAFONTANT, JEAN, MD†

Provider ID: N/A

☐ 524 W 4TH ST STE B
PERRIS, CA 92570
Effective as of 01-JAN-21

LAFONTANT, JEAN, MD†

Provider ID: N/A

☐ 524 W 4TH ST STE B

PERRIS, CA 92570

Effective as of 01-SEP-22

LAFONTANT, JEAN, MD†

Provider ID: N/A

☐ 524 W 4TH ST STE B
PERRIS, CA 92570

Effective as of 01-MAY-24

LAFONTANT, JEAN, MD†

Provider ID: N/A

☐ 524 W 4TH ST STE B
PERRIS, CA 92570

Effective as of 01-SEP-22

ADDICTIVE MEDICINE

GILL, MANPREET, MD

Provider ID: N/A

☐ 13010 POWAY RD
POWAY, CA 92064
Effective as of 01-JUN-24

ANESTHESIOLOGY

PRASAD, RUPA, MD†

Provider ID: N/A

☐ 15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-NOV-23

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY, MD

Provider ID: N/A

☐ 15725 POMERADO RD STE
201
POWAY, CA 92064

Effective as of 01-JUL-24

BROWNLOW, ROY, MD

Provider ID: N/A

☐ 15725 POMERADO RD STE
201

POWAY, CA 92064

Effective as of 01-JUL-24

COHEN, ZACHARY, MD

Provider ID: N/A

☐ 15725 POMERADO RD STE
201

POWAY, CA 92064

Effective as of 01-JAN-23

COHEN, ZACHARY, MD†

Provider ID: N/A

☐ 15725 POMERADO RD STE
210

POWAY, CA 92064

Effective as of 01-JAN-24

FISHER, CASEY, MD

Provider ID: N/A

☐ 15725 POMERADO RD STE
210

POWAY, CA 92064

Effective as of 01-APR-24

FISHER, CASEY, MD

Provider ID: N/A

☐ 15725 POMERADO RD STE
201

POWAY, CA 92064

Effective as of 01-APR-23

PRASAD, RUPA, MD†

Provider ID: N/A

☐ 15611 POMERADO RD STE
505

POWAY, CA 92064

Teleservice

Effective as of 01-NOV-21

CARDIOVASCULAR DISEASE

NANAVATI, VIMAL, MD

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

☞ 15706 POMERADO RD STE
104
POWAY, CA 92064

Effective as of 01-FEB-23

SHEREV, DIMITRI, MD

Provider ID: N/A

☞ 15708 POMERADO RD STE
N-205
POWAY, CA 92064

Effective as of 01-SEP-23

ZAKOV, KAMEN, MD†

Provider ID: N/A

☞ 15611 POMERADO RD STE
400
POWAY, CA 92064

Effective as of 01-SEP-22

CERTIFIED NURSE PRACTITIONER

BISHOP, LESLIE, NP†

Provider ID: N/A

☞ 15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-JAN-21

WILLIAMS, SHANTRICE, NP

Provider ID: N/A

☞ 13010 POWAY RD
POWAY, CA 92064*

Effective as of 01-FEB-24

WRIGHT, KIMBERLY, NP†

Provider ID: N/A

☞ 15611 POMERADO RD STE
400
POWAY, CA 92064

Effective as of 01-JAN-21

CLINICAL

NEUROPSYCHOLOGIST

KAUP, ALLISON, PhD†

Provider ID: N/A

☞ 15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-MAR-21

DERMATOLOGY

ARMSTRONG, PATRICK, MD

Provider ID: N/A

☞ 15721 POMERADO RD STE
300
POWAY, CA 92064

Effective as of 01-MAR-24

BROGAN, JACQUELINE, MD

Provider ID: N/A

☞ 15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-FEB-24

CELANO, NICHOLAS, MD

Provider ID: N/A

☞ 15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-NOV-23

CELANO, NICHOLAS, MD

Provider ID: N/A

☞ 15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-JAN-24

CELANO, NICHOLAS, MD

Provider ID: N/A

☞ 15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-JUL-24

CHIANG, JENNIFER, MD

Provider ID: N/A

☞ 15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-JAN-24

GONZALEZ, JOSE, MD

Provider ID: N/A

☞ 15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-FEB-24

LIN, SHINKO, MD

Provider ID: N/A

☞ 15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-APR-24

LIN, SHINKO, MD

Provider ID: N/A

☞ 15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-MAR-24

NELSON, AISLYN, MD

Provider ID: N/A

☞ 15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-FEB-24

SATEESH, BROOKE, MD

Provider ID: N/A

☞ 15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-JAN-24

TYAGI, ABHILASHA, MD

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064
Effective as of 01-JAN-24

UEBELHOER, NATHAN, DO[†]

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064
Effective as of 01-JAN-24

ENDOCRINOLOGY METABOLISM DIABETES

SCHNEIDER, DARIUS, MD

Provider ID: N/A

15525 POMERADO RD STE
A1
POWAY, CA 92064
Effective as of 01-DEC-22

SCHNEIDER, DARIUS, MD

Provider ID: N/A

15525 POMERADO RD STE
A1
POWAY, CA 92064
Effective as of 01-JAN-23

FAMILY PRACTICE

FLINN, SCOTT, MD[†]

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-JAN-21

NAJAND, SADAF, MD[†]

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

PATEL, RAKESH, MD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064
Effective as of 01-AUG-24

WHITE, KERI, MD[†]

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

GASTROENTEROLOGY

ZAKKO, MARAM, MD[†]

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-JAN-21

INTERNAL MEDICINE

CHEN, ANDREW, MD[†]

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

MOOLANI, UJJALA, MD

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064
Effective as of 01-MAY-23

REDDY, SMITHA, MD[†]

Provider ID: N/A

15725 POMERADO RD STE
117
POWAY, CA 92064
Effective as of 01-JAN-21

THAPER, MOHINDERPAL, MD[†]

Provider ID: N/A

15611 POMERADO RD STE
575
POWAY, CA 92064
Effective as of 01-JAN-21

INTERVENTIONAL CARDIOLOGY

BAYAT, HAMED, MD[†]

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

MULVIHILL, DANIEL, MD[†]

Provider ID: N/A

15611 POMERADO RD FL 4
POWAY, CA 92064
Effective as of 01-SEP-22

VANICHSARN, CHRISTOPHER, MD[†]

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-MAR-24

LICENSED CLINICAL SOCIAL WORKER

BELINSKY, MARIA, LCSW

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064*
Effective as of 01-FEB-24

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

15708 POMERADO RD STE
N-205
POWAY, CA 92064
Effective as of 01-MAY-23

BOISKIN, MARK, MD

Provider ID: N/A

15644 POMERADO RD STE
104
POWAY, CA 92064
Effective as of 01-JAN-24

BOISKIN, MARK, MD†

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064
Effective as of 01-JAN-16

BOISKIN, MARK, MD†

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064
Effective as of 01-JUL-22

BOISKIN, MARK, MD†

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064
Effective as of 01-JAN-21

GREENSTEIN, JOSHUA, MD†

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064
Effective as of 01-JUL-22

NEYAZ, MOHAMMED, DO

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064

Effective as of 01-NOV-23

NEUROLOGY

DELANEY, MICHAEL, MD†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-JAN-21

DELANEY, MICHAEL, MD

Provider ID: N/A

15611 POMERADO RD STE
580
POWAY, CA 92064

Teleservice

Effective as of 01-JUN-24

FARNSWORTH, WILLIAM, MD

Provider ID: N/A

15611 POMERADO RD STE
580
POWAY, CA 92064

Teleservice

Effective as of 01-JUN-24

FARNSWORTH, WILLIAM, MD

Provider ID: N/A

15611 POMERADO RD STE
580
POWAY, CA 92064

Teleservice

Effective as of 01-SEP-24

FARNSWORTH, WILLIAM, MD

Provider ID: N/A

15611 POMERADO RD STE
580
POWAY, CA 92064

Teleservice

Effective as of 01-JUN-24

HAMILTON, ROSS, MD

Provider ID: N/A

15611 POMERADO RD STE
580

POWAY, CA 92064*

Effective as of 01-OCT-24

HO, GILBERT, MD

Provider ID: N/A

15708 POMERADO RD STE
N103

POWAY, CA 92064*

Effective as of 01-OCT-23

LUHAR, RIYA, DO

Provider ID: N/A

15611 POMERADO RD STE
505

POWAY, CA 92064

Teleservice

Effective as of 01-JAN-23

LUHAR, RIYA, DO

Provider ID: N/A

15611 POMERADO RD STE
580

POWAY, CA 92064

Effective as of 01-JUN-24

SAVANI, AMAN, MD

Provider ID: N/A

15611 POMERADO RD STE
580

POWAY, CA 92064

Effective as of 01-JUN-24

WANG, CHUNYANG, MD†

Provider ID: N/A

15611 POMERADO RD STE
505

POWAY, CA 92064

Teleservice

Effective as of 01-JAN-24

WANG, CHUNYANG, MD

Provider ID: N/A

15611 POMERADO RD STE
580

POWAY, CA 92064

C1. 网络提供者名单 专科护理医生

Effective as of 01-MAY-24

WANG, ANCHI, MD†

Provider ID: N/A

☐ 15611 POMERADO RD STE
505
POWAY, CA 92064

Effective as of 01-JAN-21

WANG, CHUNYANG, MD†

Provider ID: N/A

☐ 15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-NOV-23

OBSTETRICS / GYNECOLOGY

FAN, LI, MD†

Provider ID: N/A

☐ 15525 POMERADO RD STE
C1
POWAY, CA 92064*

Effective as of 01-NOV-21

OPHTHALMOLOGY

LOZIER, JEFFREY, MD†

Provider ID: N/A

☐ 15611 POMERADO RD STE
400
POWAY, CA 92064

Effective as of 01-SEP-22

OPTOMETRIST

KIM, MICHELLE, OD

Provider ID: N/A

☐ 15611 POMERADO RD STE
400
POWAY, CA 92064

Effective as of 01-SEP-22

PHYS MED/ REHAB PAIN MEDICINE

FISHER, CASEY, MD

Provider ID: N/A

☐ 15725 POMERADO RD STE
210
POWAY, CA 92064

Effective as of 01-AUG-24

PHYSICAL MEDICINE / REHABILITATION

BULLOCK, ANDREW, DO†

Provider ID: N/A

☐ 15644 POMERADO RD STE
204
POWAY, CA 92064

Effective as of 01-JAN-21

BULLOCK, ANDREW, DO†

Provider ID: N/A

☐ 15644 POMERADO RD STE
204
POWAY, CA 92064

Effective as of 01-JUL-22

BULLOCK, ANDREW, DO†

Provider ID: N/A

☐ 15644 POMERADO RD STE
204
POWAY, CA 92064

Effective as of 01-SEP-22

FISHER, CASEY, MD

Provider ID: N/A

☐ 15725 POMERADO RD STE
210
POWAY, CA 92064

Effective as of 01-JAN-21

TAHAEI, SEYED, MD†

Provider ID: N/A

☐ 15708 POMERADO RD STE

N-207

POWAY, CA 92064

Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

ASTOURIAN, PATRICK, PA†

Provider ID: N/A

☐ 15725 POMERADO RD STE
117
POWAY, CA 92064

Teleservice

Effective as of 01-SEP-22

CAMERON, KENDALL, PA

Provider ID: N/A

☐ 15725 POMERADO RD STE
117
POWAY, CA 92064

Teleservice

Effective as of 01-AUG-22

CHATFIELD, ALEXANDRA, PA†

Provider ID: N/A

☐ 15611 POMERADO RD STE
525
POWAY, CA 92064

Effective as of 01-FEB-21

GRINDLE, SILVIA, PA†

Provider ID: N/A

☐ 13525 MIDLAND RD STE F
POWAY, CA 92064

Effective as of 01-JAN-21

HUANG, STEPHANIE, PA†

Provider ID: N/A

☐ 15611 POMERADO RD STE
505
POWAY, CA 92064

Effective as of 01-JAN-21

RAHIM, ARIANNA, PA

Provider ID: N/A

☐ 15611 POMERADO RD STE

C1. 网络提供者名单 专科护理医生

505
POWAY, CA 92064
Effective as of 01-OCT-23

WEBB, SHANNON, PA

Provider ID: N/A
☑ 15725 POMERADO RD STE
102
POWAY, CA 92064
Teleservice
Effective as of 01-MAY-23

PODIATRIST

BRAZIER, SETH, DPM

Provider ID: N/A
☑ 15706 POMERADO RD STE
102
POWAY, CA 92064
Effective as of 01-SEP-24

CHU, ANDREW, DPM†

Provider ID: N/A
☑ 15706 POMERADO RD STE
S-102
POWAY, CA 92064
Effective as of 01-NOV-21

HAN, KYOUNG, DPM

Provider ID: N/A
☑ 15706 POMERADO RD STE
102
POWAY, CA 92064
Effective as of 01-NOV-21

NEGRON, RICARDO, DPM

Provider ID: N/A
☑ 13010 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-21

READ, TRENTON, DPM

Provider ID: N/A
☑ 15706 POMERADO RD STE
102

POWAY, CA 92064
Effective as of 01-APR-23

SMITH, COLLIN, DPM†

Provider ID: N/A
☑ 15706 POMERADO RD STE
S102
POWAY, CA 92064
Effective as of 01-DEC-21

SMITH, COLLIN, DPM†

Provider ID: N/A
☑ 15706 POMERADO RD STE
S102
POWAY, CA 92064
Effective as of 01-FEB-21

SMITH, COLLIN, DPM†

Provider ID: N/A
☑ 15706 POMERADO RD STE
S102
POWAY, CA 92064
Effective as of 01-SEP-22

PSYCHIATRY

ANDERSEN, CLAIRE, MD

Provider ID: N/A
☑ 13020 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-21

ANDERSEN, CLAIRE, MD

Provider ID: N/A
☑ 13020 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-21

MODHWADIA, MAMTA, MD

Provider ID: N/A
☑ 13010 POWAY RD
POWAY, CA 92064
Effective as of 01-FEB-24

MODHWADIA, MAMTA, MD

Provider ID: N/A
☑ 13010 POWAY RD
POWAY, CA 92064
Effective as of 01-FEB-24

PEDERSEN, SUESAN, MD

Provider ID: N/A
☑ 13010 POWAY RD
POWAY, CA 92064
Effective as of 01-AUG-22

PEDERSEN, SUESAN, MD

Provider ID: N/A
☑ 13010 POWAY RD
POWAY, CA 92064
Effective as of 01-AUG-22

POSTLETHWAITE, ALEJANDRA, MD†

Provider ID: N/A
☑ 13010 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-24

POSTLETHWAITE, ALEJANDRA, MD†

Provider ID: N/A
☑ 13010 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-24

PSYCHIATRY CHILD

ANDERSEN, CLAIRE, MD

Provider ID: N/A
☑ 13020 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-21

ANDERSEN, CLAIRE, MD

Provider ID: N/A
☑ 13020 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-21

C1. 网络提供者名单 专科护理医生

PSYCHOLOGIST

KAUP, ALLISON, PhD

Provider ID: N/A

☐ 15611 POMERADO RD STE
580
POWAY, CA 92064
Effective as of 01-JUN-24

KAUP, ALLISON, PhD†

Provider ID: N/A

☐ 15611 POMERADO RD STE
505
POWAY, CA 92064
Teleservice
Effective as of 01-NOV-23

KAUP, ALLISON, PhD†

Provider ID: N/A

☐ 15611 POMERADO RD STE
505
POWAY, CA 92064
Teleservice
Effective as of 01-NOV-23

KAUP, ALLISON, PhD

Provider ID: N/A

☐ 15611 POMERADO RD STE
580
POWAY, CA 92064
Effective as of 01-JUN-24

MEJIAS, JUAN, PhD

Provider ID: N/A

☐ 13010 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-24

MEJIAS, JUAN, PhD

Provider ID: N/A

☐ 13010 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-24

VALLEZ-BARLAM, ANDREA,

PhD

Provider ID: N/A

☐ 13010 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-24

VALLEZ-BARLAM, ANDREA,

PhD

Provider ID: N/A

☐ 13010 POWAY RD
POWAY, CA 92064
Effective as of 01-DEC-23

VALLEZ-BARLAM, ANDREA,

PhD

Provider ID: N/A

☐ 13010 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-24

VALLEZ-BARLAM, ANDREA,

PhD

Provider ID: N/A

☐ 13010 POWAY RD
POWAY, CA 92064
Effective as of 01-DEC-23

RHEUMATOLOGY

RAO, SOUMYA, MD†

Provider ID: N/A

☐ 15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

REDDY, SMITHA, MD†

Provider ID: N/A

☐ 15725 POMERADO RD STE
117
POWAY, CA 92064
Effective as of 01-SEP-22

REDDY, SMITHA, MD

Provider ID: N/A

☐ 15525 POMERADO RD STE
E6
POWAY, CA 92064
Effective as of 01-JUL-24

REDDY, SMITHA, MD

Provider ID: N/A

☐ 15525 POMERADO RD STE
E6
POWAY, CA 92064
Effective as of 01-JUL-24

REDDY, SMITHA, MD

Provider ID: N/A

☐ 15525 POMERADO RD STE
E6
POWAY, CA 92064
Effective as of 01-JUL-24

SLEEP MEDICINE

MASHAYEKHI, PEGAH, DO

Provider ID: N/A

☐ 15611 POMERADO RD STE
300
POWAY, CA 92064
Effective as of 01-SEP-24

SURGERY ORTHOPEDIC

BALIKIAN, PHILIP, MD†

Provider ID: N/A

☐ 15611 POMERADO RD STE
400
POWAY, CA 92064
Teleservice
Effective as of 01-JAN-21

BRIED, JAMES, MD†

Provider ID: N/A

☐ 15611 POMERADO RD STE
525
POWAY, CA 92064
Effective as of 01-SEP-22

C1. 网络提供者名单 专科护理医生

COHEN, BRAD, MD†

Provider ID: N/A

15611 POMERADO RD STE 525
POWAY, CA 92064
Effective as of 01-SEP-22

UROLOGY

ANTHONY, JULIAN, MD

Provider ID: N/A

15611 POMERADO RD FL 4
POWAY, CA 92064
Effective as of 01-MAR-24

PE, MARK-RALLY, MD†

Provider ID: N/A

12630 MONTE VISTA RD
STE 103
POWAY, CA 92064
Effective as of 01-SEP-22

CHIROPRACTOR

JIMENEZ, CLARIBEL, DC

Provider ID: N/A

220 ROTANZI ST
RAMONA, CA 92065
Effective as of 01-JUL-24

FAMILY PRACTICE

HARDISON, CHARLES, MD†

Provider ID: N/A

211 13TH ST
RAMONA, CA 92065*
Effective as of 01-SEP-22

WELLS, TODD, MD

Provider ID: N/A

211 13TH ST
RAMONA, CA 92065
Effective as of 01-JUN-23

PEDIATRICS

YUNG, DORIS, MD†

Provider ID: N/A

220 ROTANZI ST
RAMONA, CA 92065
Effective as of 01-DEC-18

REGISTERED PHYSICAL THERAPIST

BOUTELLE, BARBARA, PT

Provider ID: N/A

850 MAIN ST STE 105
RAMONA, CA 92065
Effective as of 01-FEB-24

BOUTELLE, DAVID, PT

Provider ID: N/A

850 MAIN ST STE 105
RAMONA, CA 92065
Effective as of 01-FEB-24

CHIROPRACTOR

PIERSON, MICHAEL, DC

Provider ID: N/A

22411 ANTONIO PKWY STE
C215
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-18

DERMATOLOGY

DICESARE, DANIEL, MD

Provider ID: N/A

22032 EL PASEO STE 150
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-NOV-19

DICESARE, DANIEL, MD

Provider ID: N/A

22032 EL PASEO STE 150

RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-NOV-19

GUIDE, SHIREEN, MD†

Provider ID: N/A

29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-AUG-12

GUIDE, SHIREEN, MD†

Provider ID: N/A

29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-AUG-12

GUIDE, SHIREEN, MD†

Provider ID: N/A

29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-AUG-12

GUIDE, SHIREEN, MD†

Provider ID: N/A

29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-16

GUIDE, SHIREEN, MD†

Provider ID: N/A

29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-17

GUIDE, SHIREEN, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-16

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-NOV-21

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-NOV-21

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-OCT-23

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JUL-21

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JUN-18

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220

RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-MAR-19

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-23

SHIELL, RONALD, MD†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688

Teleservice

Effective as of 01-DEC-21

SHIELL, RONALD, MD†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688

Teleservice

Effective as of 01-JAN-17

WANG, JAMES, MD†

Provider ID: N/A

29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-SEP-19

WANG, JAMES, MD†

Provider ID: N/A

29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-SEP-19

WANG, JAMES, MD†

Provider ID: N/A

29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-SEP-19

WANG, JAMES, MD†

Provider ID: N/A

29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-SEP-19

WANG, JAMES, MD†

Provider ID: N/A

29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-SEP-19

WANG, JAMES, MD†

Provider ID: N/A

29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-JUL-18

WANG, JAMES, MD†

Provider ID: N/A

29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-APR-20

ENDOCRINOLOGY METABOLISM DIABETES

HAMIDI, AFSHIN, MD

Provider ID: N/A

30511 AVENIDA DE LAS
FLORES STE 1064

C1. 网络提供者名单 专科护理医生

RANCHO SANTA
MARGARITA, CA 92688
Teleservice
Effective as of 01-SEP-23

HAMIDI, AFSHIN, MD

Provider ID: N/A
☑ 30511 AVENIDA DE LAS
FLORES STE 1064
RANCHO SANTA
MARGARITA, CA 92688
Teleservice
Effective as of 01-SEP-23

INTERNAL MEDICINE

GORE, GWENDOLYN, MD†

Provider ID: N/A
☑ 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688*
Effective as of 01-FEB-13

GORE, GWENDOLYN, MD†

Provider ID: N/A
☑ 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688*
Effective as of 01-MAY-12

PHYSICIANS ASSISTANT

KANE, KARA, PA†

Provider ID: N/A
☑ 22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-OCT-22

PODIATRIST

ANGAROLA, JEFF, DPM

Provider ID: N/A

☑ 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-22

ANGAROLA, JEFF, DPM

Provider ID: N/A
☑ 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-22

ANGAROLA, JEFF, DPM

Provider ID: N/A
☑ 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-APR-11

ANGAROLA, JEFF, DPM

Provider ID: N/A
☑ 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-MAY-12

ANGAROLA, JEFF, DPM

Provider ID: N/A
☑ 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-MAY-12

ANESTHESIOLOGY PAIN MANAGEMENT

MAASUMI, KASRA, MD

Provider ID: N/A
☑ 30212 TOMAS STE 180
RANCHO STA MARG, CA

92688
Teleservice
Effective as of 01-FEB-24

MAASUMI, KASRA, MD

Provider ID: N/A
☑ 30212 TOMAS STE 180
RANCHO STA MARG, CA
92688
Teleservice
Effective as of 01-FEB-24

ALLERGY IMMUNOLOGY

DYER, MARC, MD

Provider ID: N/A
☑ 665 CAMINO DE LOS
MARES STE 201
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-17

ANESTHESIOLOGY

GERAYLI, AFSHIN, MD†

Provider ID: N/A
☑ 647 CAMINO DE LOS
MARES STE 223
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

GERAYLI, AFSHIN, MD†

Provider ID: N/A
☑ 647 CAMINO DE LOS
MARES STE 223
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

ANESTHESIOLOGY PAIN MANAGEMENT

BETTS, ANDRES, MD†

Provider ID: N/A
☑ 665 CAMINO DE LOS
MARES STE 202
SAN CLEMENTE, CA 92673

C1. 网络提供者名单 专科护理医生

Effective as of 01-SEP-16

BETTS, ANDRES, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 202
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-16

GERAYLI, AFSHIN, MD†

Provider ID: N/A

647 CAMINO DE LOS
MARES STE 223
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

647 CAMINO DE LOS
MARES STE 223
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

647 CAMINO DE LOS
MARES STE 223
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

647 CAMINO DE LOS
MARES STE 223
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-19

GERAYLI, AFSHIN, MD†

Provider ID: N/A

647 CAMINO DE LOS
MARES STE 223
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

647 CAMINO DE LOS
MARES STE 223
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-20

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

647 CAMINO DE LOS
MARES STE 223
SAN CLEMENTE, CA 92673

Effective as of 01-JUL-20

CARDIAC ELECTROPHYSIOLOGY

DRURY, PAUL, MD†

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-JAN-24

DRURY, PAUL, MD†

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-JAN-24

CARDIOVASCULAR DISEASE

KUO, ALLEN, MD†

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-FEB-23

CERTIFIED NURSE PRACTITIONER

PARK, SE, NP

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A

SAN CLEMENTE, CA 92672

Effective as of 01-JUL-23

POLIZZI, BRITTANY, NP†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-DEC-22

WONG, KRYSTLE, NP

Provider ID: N/A

1031 AVENIDA PICO STE
203
SAN CLEMENTE, CA 92673

Effective as of 01-NOV-23

CHIROPRACTOR

THOMPSON, RUSSELL, DC†

Provider ID: N/A

629 CAMINO DE LOS
MARES STE 104
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-18

DERMATOLOGY

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-DEC-21

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA

C1. 网络提供者名单 专科护理医生

HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-22

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-19

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-23

FOREMAN, TANYA, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-21

FOREMAN, TANYA, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-21

FOREMAN, TANYA, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-18

FOREMAN, TANYA, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

GUIDE, SHIREEN, MD†

Provider ID: N/A

629 CAMINO DE LOS
MARES STE 105
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-17

GUIDE, SHIREEN, MD†

Provider ID: N/A

629 CAMINO DE LOS
MARES STE 105
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-16

GUIDE, SHIREEN, MD†

Provider ID: N/A

629 CAMINO DE LOS
MARES STE 105
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-16

NAKHLA, TONY, DO

Provider ID: N/A

224 AVENIDA DEL MAR STE
B
SAN CLEMENTE, CA 92672
Effective as of 01-MAY-18

NAKHLA, TONY, DO

Provider ID: N/A

224 AVENIDA DEL MAR STE
B
SAN CLEMENTE, CA 92672
Effective as of 01-AUG-17

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-JUN-24

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-20

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-18

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-18

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-MAR-23

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

C1. 网络提供者名单 专科护理医生

Effective as of 01-OCT-23

RILEY, JESSICA, DO[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-18

SHIELL, RONALD, MD[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Teleservice

Effective as of 01-OCT-23

SHIELL, RONALD, MD[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Teleservice

Effective as of 01-SEP-18

SHIELL, RONALD, MD[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-17

SHIELL, RONALD, MD[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Teleservice

Effective as of 01-DEC-21

SHIELL, RONALD, MD[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Teleservice

Effective as of 01-MAR-19

EMERGENCY MEDICINE

KENNEDY, GREGORY, MD[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 200
SAN CLEMENTE, CA 92673

Effective as of 01-MAY-24

GASTROENTEROLOGY

GUJRAL, NAVJYOT, MD[†]

Provider ID: N/A

655 CAMINO LOS MARES
123
SAN CLEMENTE, CA 92673

Effective as of 01-APR-11

GUJRAL, NAVJYOT, MD[†]

Provider ID: N/A

655 CAMINO LOS MARES
123
SAN CLEMENTE, CA 92673

Effective as of 01-MAY-12

HASSANEIN, TAREK, MD[†]

Provider ID: N/A

675 CAMINO DE LOS
MARES STE 301
SAN CLEMENTE, CA 92673

Effective as of 01-MAY-22

HASSANEIN, TAREK, MD[†]

Provider ID: N/A

675 CAMINO LOS MARES
210
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-18

HASSANEIN, TAREK, MD[†]

Provider ID: N/A

675 CAMINO DE LOS

MARES STE 301

SAN CLEMENTE, CA 92673

Effective as of 01-JAN-18

INTERVENTIONAL CARDIOLOGY

DRURY, PAUL, MD[†]

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-JAN-23

DRURY, PAUL, MD[†]

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-JAN-23

DRURY, PAUL, MD[†]

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-SEP-19

DRURY, PAUL, MD[†]

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-JAN-23

DRURY, PAUL, MD[†]

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-FEB-23

KUO, ALLEN, MD[†]

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-SEP-20

KUO, ALLEN, MD[†]

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-SEP-20

KUO, ALLEN, MD[†]

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-SEP-20

VAN, HOHAI, MD[†]

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-FEB-23

VAN, HOHAI, MD[†]

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-DEC-21

VAN, HOHAI, MD[†]

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-DEC-21

VAN, HOHAI, MD[†]

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-DEC-21

NEUROLOGY

PATEL, HITESH, MD[†]

Provider ID: N/A

638 CAMINO DE LOS
MARES STE D4
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

PATEL, HITESH, MD[†]

Provider ID: N/A

638 CAMINO DE LOS
MARES STE D4
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

PATEL, HITESH, MD[†]

Provider ID: N/A

638 CAMINO DE LOS
MARES STE D4
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

OBSTETRICS / GYNECOLOGY

BAILEY, THOMAS, MD[†]

Provider ID: N/A

665 CAMINO LOS MARES
303
SAN CLEMENTE, CA 92672
Effective as of 01-MAR-01

BAILEY, THOMAS, MD[†]

Provider ID: N/A

665 CAMINO LOS MARES
303
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-18

JOHNSON, SUSAN, MD[†]

Provider ID: N/A

1031 AVENIDA PICO STE
204
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-22

JOHNSON, SUSAN, MD[†]

Provider ID: N/A

1031 AVENIDA PICO STE
204
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-22

JOHNSON, SUSAN, MD[†]

Provider ID: N/A

1031 AVENIDA PICO STE
204
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-20

RAMIREZ, SARA, MD[†]

Provider ID: N/A

665 CAMINO DE LOS
MARES
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-10

RAMIREZ, SARA, MD[†]

Provider ID: N/A

665 CAMINO DE LOS
MARES
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

SALCIDO, CRAIG, MD[†]

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 303A
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

SALCIDO, CRAIG, MD[†]

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 303A
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

OPHTHALMOLOGY

AHMAD, ASHRAF, MD[†]

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-22

AHMAD, ASHRAF, MD[†]

Provider ID: N/A

665 CAMINO DE LOS

C1. 网络提供者名单 专科护理医生

MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

BANUELOS, LYDIA, MD†

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 107
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-22

BANUELOS, LYDIA, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-FEB-23

DHOOT, SONIA, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

DHOOT, SONIA, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-22

DHOOT, SONIA, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-19

DHOOT, SONIA, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-19

GUJRAL, SATVINDER, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-22

GUJRAL, SATVINDER, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

GWYNN, DAVID, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-FEB-23

GWYNN, DAVID, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-MAR-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-APR-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-APR-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

665 CAMINO LOS MARES
102
SAN CLEMENTE, CA 92673
Effective as of 01-APR-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

665 CAMINO LOS MARES
102
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

JACOBS, JEFFREY, MD†

Provider ID: N/A

665 CAMINO LOS MARES
102
SAN CLEMENTE, CA 92673
Effective as of 01-APR-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

665 CAMINO LOS MARES
102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO LOS MARES
107
SAN CLEMENTE, CA 92673

C1. 网络提供者名单 专科护理医生

Effective as of 01-MAY-12

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673

Effective as of 01-MAY-23

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673

Effective as of 01-MAY-23

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-17

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO LOS MARES
107
SAN CLEMENTE, CA 92673

Effective as of 01-MAR-23

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO LOS MARES
107
SAN CLEMENTE, CA 92673

Effective as of 01-APR-11

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO LOS MARES
107
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-15

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-18

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO LOS MARES
107
SAN CLEMENTE, CA 92673

Effective as of 01-MAR-10

KELLER, CHARLES, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-22

KELLER, CHARLES, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

KERSTEN, DIANA, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

KERSTEN, DIANA, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-APR-23

KERSTEN, DIANA, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102

SAN CLEMENTE, CA 92673

Effective as of 01-APR-23

KIM, BRIAN, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-22

KIM, EDWARD, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

KIM, BRIAN, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

KIM, EDWARD, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-JUL-22

NOGUCHI, JONATHAN, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

ROUHANI, BEHNAZ, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

C1. 网络提供者名单 专科护理医生

ROUHANI, BEHNAZ, MD

Provider ID: N/A

📄 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-22

SALEHI-HAD, HANI, MD†

Provider ID: N/A

📄 653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-JUN-21

SALEHI-HAD, HANI, MD†

Provider ID: N/A

📄 653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-JUN-21

TAI, AUDREY, DO†

Provider ID: N/A

📄 653 CAMINO DE LOS
MARES STE 107
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-24

TAYANI, RAMIN, MD

Provider ID: N/A

📄 653 CAMINO DE LOS
MARES STE 107
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-24

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

📄 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-22

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

📄 665 CAMINO DE LOS

MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

WANG, YE, MD†

Provider ID: N/A

📄 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-19

WANG, YE, MD†

Provider ID: N/A

📄 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-19

OPTOMETRIST

CHOI-SIRITARATIWAT,

ISABELL, OD†

Provider ID: N/A

📄 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

CHOI-SIRITARATIWAT,

ISABELL, OD†

Provider ID: N/A

📄 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-JUN-19

CHOI-SIRITARATIWAT,

ISABELL, OD†

Provider ID: N/A

📄 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-JUN-19

CHOI-SIRITARATIWAT,

ISABELL, OD†

Provider ID: N/A

📄 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

LEIGHT, TERRA, OD†

Provider ID: N/A

📄 685 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

LEIGHT, TERRA, OD†

Provider ID: N/A

📄 685 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

MULICK, STEPHANIE, OD

Provider ID: N/A

📄 653 CAMINO DE LOS
MARES STE 107
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-24

NG, REBECCA, OD†

Provider ID: N/A

📄 653 CAMINO LOS MARES
103
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

NG, REBECCA, OD†

Provider ID: N/A

📄 653 CAMINO LOS MARES
103
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-11

NG, REBECCA, OD

Provider ID: N/A

📄 653 CAMINO DE LOS

C1. 网络提供者名单 专科护理医生

MARES STE 107
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-23

STEFANIDIS, NICOLETTA, OD†
Provider ID: N/A
665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-22

STEFANIDIS, NICOLETTA, OD†
Provider ID: N/A
665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-FEB-18

STEFANIDIS, NICOLETTA, OD†
Provider ID: N/A
665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-FEB-18

STEFANIDIS, NICOLETTA, OD†
Provider ID: N/A
665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

TERADA, SEIJU, OD
Provider ID: N/A
665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

TERADA, SEIJU, OD
Provider ID: N/A
665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-22

OTOLARYNGOLOGY

CROCKETT, DENNIS, MD†
Provider ID: N/A
675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-19

CROCKETT, DENNIS, MD†
Provider ID: N/A
675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-19

CROCKETT, DENNIS, MD†
Provider ID: N/A
675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

WELLS, PHILLIP, MD†
Provider ID: N/A
675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

WELLS, PHILLIP, MD†
Provider ID: N/A
675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-08

WELLS, PHILLIP, MD†
Provider ID: N/A
675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-14

PEDIATRICS

DWINELL, LAUREN, MD†
Provider ID: N/A
1300 AVENIDA VISTA
HERMOSA STE 200
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-23

PHYSICIANS ASSISTANT

ESHOIEE, MIRIAM, PA†
Provider ID: N/A
224 AVENIDA DEL MAR STE
B
SAN CLEMENTE, CA 92672
Effective as of 01-AUG-20

MOHALE, SHARON, PA†
Provider ID: N/A
1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-18

NORMAN, STACY, PA
Provider ID: N/A
1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-23

WANG, ALICE, PA
Provider ID: N/A
831 VIA SUERTE STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-FEB-24

PODIATRIST

HEHE, KYLE, DPM
Provider ID: N/A
665 CAMINO DE LOS
MARES
SAN CLEMENTE, CA 92673

C1. 网络提供者名单 专科护理医生

Effective as of 01-AUG-23

HEHE, KYLE, DPM

Provider ID: N/A

665 CAMINO DE LOS
MARES
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-23

LEAMING, ROBERT, DPM

Provider ID: N/A

655 CAMINO DE LOS
MARES STE 120
SAN CLEMENTE, CA 92673

Teleservice

Effective as of 01-FEB-24

LEAMING, ROBERT, DPM

Provider ID: N/A

655 CAMINO DE LOS
MARES STE 120
SAN CLEMENTE, CA 92673

Teleservice

Effective as of 01-FEB-24

SURGERY HAND

FRANKLIN, ADAM, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-APR-18

FRANKLIN, ADAM, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-APR-18

SURGERY

NEUROLOGICAL

PATEL, HITESH, MD[†]

Provider ID: N/A

638 CAMINO DE LOS
MARES STE D4
SAN CLEMENTE, CA 92673

Effective as of 01-NOV-21

SURGERY ORTHOPEDIC

EIDT, HERBERT, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-24

ELZIK, MARK, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-24

FITZPATRICK, MICHAEL, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-24

GIALAMAS, GUS, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-FEB-18

GIALAMAS, GUS, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-FEB-18

PARK, SAMUEL, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-24

VAN DER REIS, WILLIAM, MD[†]

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-MAY-12

VAN DER REIS, WILLIAM, MD[†]

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-APR-11

UROLOGY

BUI, DON, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672

Effective as of 01-JAN-23

BUI, DON, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672

Effective as of 01-OCT-23

BUI, DON, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672

Effective as of 01-DEC-23

ELKHOORY, FUAD, MD

Provider ID: N/A


3553 CAMINO MIRA COSTA

C1. 网络提供者名单 专科护理医生

STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23


HO, TAMMY, MD

Provider ID: N/A

 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23


KIM, MOSES, MD

Provider ID: N/A

 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23


KIM, MOSES, MD

Provider ID: N/A

 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-23


MEAGLIA, JAMES, MD

Provider ID: N/A

 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-23


MEAGLIA, JAMES, MD

Provider ID: N/A

 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23


NAKAMURA, LEAH, MD

Provider ID: N/A

 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23


RANDALL, JOSH, MD

Provider ID: N/A

 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23


SINGH, KARAN, MD

Provider ID: N/A

 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23


SPITZ, AARON, MD

Provider ID: N/A

 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23


SU, DANIEL, MD

Provider ID: N/A

 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

TEBYANI, NEYSSAN, MD


Provider ID: N/A

 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

ADDICTIVE MEDICINE

HEINRICI, ALEKA, MD


Provider ID: N/A

 286 EUCLID AVE STE 302
SAN DIEGO, CA 92114
Teleservice

Effective as of 01-APR-23


SALGUEROGALLAND, MARIOLUIS, MD

Provider ID: N/A

 4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23


SALGUEROGALLAND, MARIOLUIS, MD

Provider ID: N/A

 4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23


SALGUEROGALLAND, MARIOLUIS, MD

Provider ID: N/A

 4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23


SALGUEROGALLAND, MARIOLUIS, MD

Provider ID: N/A

 4175 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23

SALGUEROGALLAND, MARIOLUIS, MD†

Provider ID: N/A

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-SEP-21

ADVANCED HEART FAILURE AND

C1. 网络提供者名单 专科护理医生

TRANSPLANT CARDIOLOGY

HOAGLAND, PETER, MD†

Provider ID: N/A

☒ 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

JASKI, BRIAN, MD†

Provider ID: N/A

☒ 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-JAN-21

ALLERGY IMMUNOLOGY

ALKATIB, RHONDA, MD†

Provider ID: N/A

☒ 2655 CAMINO DEL RIO N
STE 120
SAN DIEGO, CA 92108
Effective as of 01-SEP-22

ALKATIB, RHONDA, MD†

Provider ID: N/A

☒ 2655 CAMINO DEL RIO N
STE 425
SAN DIEGO, CA 92108
Effective as of 01-OCT-21

ALKATIB, RHONDA, MD†

Provider ID: N/A

☒ 2655 CAMINO DEL RIO N
STE 425
SAN DIEGO, CA 92108
Effective as of 01-APR-22

COHEN, GARY, MD

Provider ID: N/A

☒ 9833 PACIFIC HEIGHTS
BLVD STE J
SAN DIEGO, CA 92121

Effective as of 01-OCT-95

COHEN, GARY, MD

Provider ID: N/A

☒ 9833 PACIFIC HEIGHTS
BLVD STE J
SAN DIEGO, CA 92121
Effective as of 01-FEB-07

KIM, ALEXANDER, MD

Provider ID: N/A

☒ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

MERCANDETTI, ALEX, MD†

Provider ID: N/A

☒ 3965 5TH AVE STE 430
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-NOV-20

OSTROM, NANCY, MD†

Provider ID: N/A

☒ 5776 RUFFIN RD
SAN DIEGO, CA 92123
Effective as of 01-JAN-13

SHARMA, KUSUM, MD

Provider ID: N/A

☒ 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131
Effective as of 01-JAN-23

SHARMA, KUSUM, MD

Provider ID: N/A

☒ 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131
Effective as of 01-SEP-15

SHARMA, KUSUM, MD

Provider ID: N/A

☒ 10672 WEXFORD ST STE

280

SAN DIEGO, CA 92131
Effective as of 01-JAN-21

ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA, MD

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

CHAN, CHI-BEW, MD

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-24

CHAN, CHI-BEW, MD

Provider ID: N/A

☒ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-SEP-24

CHIEN, SHELBY, MD†

Provider ID: N/A

☒ 5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

DOBECKI, DOUGLAS, MD†

Provider ID: N/A

☒ 5395 RUFFIN RD STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-22

FILIPOVIC, MAYA, MD

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

FUNDINGSLAND, BRENT, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

GROVEY, BRITTANY, MD†
Provider ID: N/A

8901 ACTIVITY RD STE 100
SAN DIEGO, CA 92126
Effective as of 01-JAN-21

GROVEY, BRITTANY, MD†
Provider ID: N/A

8901 ACTIVITY RD STE 104
SAN DIEGO, CA 92126
Effective as of 01-APR-21

LEE, GEMAYEL, MD†
Provider ID: N/A

8901 ACTIVITY RD STE 100
SAN DIEGO, CA 92126
Effective as of 01-JAN-21

LEE, INSUN, MD
Provider ID: N/A

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-AUG-24

NARLA, VINOD, MD
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

NGO, DONALD, MD
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

PARDO, PATRICIA, MD
Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

PARDO, PATRICIA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

ROY, KEVIN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

SAHA, DEVJANI, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

SAHA, DEVJANI, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

SAID, ENGY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

SAID, ENGY, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-OCT-21

SUYDAM, STEVEN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

TOLIVER, KEVIN, MD

Provider ID: N/A

4060 4TH AVE STE 408
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

TULLY, JEFFREY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

TZENG, ERIC, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

VANNOORD, BRANDON, MD†

Provider ID: N/A

3969 4TH AVE STE 208
SAN DIEGO, CA 92103
Effective as of 01-FEB-19

VAUGHN, DOUGLAS, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ANESTHESIOLOGY

CRITICAL CARE MEDICINE

KRAUSE, MARTIN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY, MD

Provider ID: N/A

5395 RUFFIN RD STE 204

C1. 网络提供者名单 专科护理医生

SAN DIEGO, CA 92123
Effective as of 01-APR-24

CHISHOLM, CHRISTOPHER, MD

Provider ID: N/A
16466 BERNARDO CENTER
DR STE 150
SAN DIEGO, CA 92128
Effective as of 01-JUN-20

CHONG, TIMOTHY, MD†

Provider ID: N/A
16466 BERNARDO CENTER
DR STE 150
SAN DIEGO, CA 92128
Effective as of 01-SEP-17

COHEN, ZACHARY, MD

Provider ID: N/A
5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

COHEN, ZACHARY, MD

Provider ID: N/A
5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

DAIRO, BRANDON, MD†

Provider ID: N/A
3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice
Effective as of 01-NOV-22

GROVEY, BRITTANY, MD†

Provider ID: N/A
8901 ACTIVITY RD STE 104
SAN DIEGO, CA 92126
Effective as of 01-FEB-21

LEE, GEMAYEL, MD†

Provider ID: N/A
8901 ACTIVITY RD STE 104

SAN DIEGO, CA 92126
Effective as of 01-FEB-21

LEE, GEMAYEL, MD†

Provider ID: N/A
8901 ACTIVITY RD STE 104
SAN DIEGO, CA 92126
Effective as of 01-APR-21

LEE, INSUN, MD

Provider ID: N/A
5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-APR-24

RICHARDSON, HENRY, MD†

Provider ID: N/A
3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Effective as of 01-MAY-21

THOMPSON, SANDRA, MD†

Provider ID: N/A
4033 3RD AVE STE 430
SAN DIEGO, CA 92103
Effective as of 01-DEC-22

VANNOORD, BRANDON, MD†

Provider ID: N/A
3969 4TH AVE STE 208
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

VANNOORD, BRANDON, MD†

Provider ID: N/A
3969 4TH AVE STE 208
SAN DIEGO, CA 92103
Effective as of 01-MAR-23

VANNOORD, BRANDON, MD†

Provider ID: N/A
3969 4TH AVE STE 208
SAN DIEGO, CA 92103
Effective as of 01-FEB-19

AUDIOLOGIST

BAXTER, STEPHANIE, AuD

Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

BAXTER, STEPHANIE, AuD

Provider ID: N/A
8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

BAXTER, STEPHANIE, AuD

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

HARRIS, GENEVIEVE, AuD

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

SERENO, EMILY, AuD

Provider ID: N/A
5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-JUL-24

SHASKY, GARY, AuD†

Provider ID: N/A
9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

TSANG, JOYCE, AuD

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103

C1. 网络提供者名单 专科护理医生

Effective as of 01-MAY-23

WILLIAMS, ALICIA, AuD[†]

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUL-21

CARDIAC ELECTROPHYSIOLOGY

ATHILL, CHARLES, MD[†]

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

CHOI, ANTHONY, MD

Provider ID: N/A

3131 BERGER AVE
SAN DIEGO, CA 92123

Effective as of 01-OCT-23

KAGAN, CALVIN, MD

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103

Effective as of 01-JUL-24

LERNER, JONATHAN, MD

Provider ID: N/A

412 WASHINGTON ST
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

LERNER, JONATHAN, MD

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JUL-23

MAI, TUAN, MD[†]

Provider ID: N/A

501 WASHINGTON ST STE

512

SAN DIEGO, CA 92103

Effective as of 01-MAR-20

MAI, TUAN, MD[†]

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

PATEL, JIGAR, DO[†]

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103

Effective as of 01-FEB-23

PATEL, JIGAR, DO[†]

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103

Effective as of 01-DEC-22

SHAH, ABHISHEK, MD

Provider ID: N/A

412 WASHINGTON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-23

SHAH, ABHISHEK, MD[†]

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JAN-23

WADHWA, MANISH, MD[†]

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

CARDIOVASCULAR DISEASE

ABELHAD, NADIA, MD

Provider ID: N/A

412 WASHINGTON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

ABELHAD, NADIA, MD

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JAN-24

BHATT, JIKEN, MD

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123

Effective as of 01-FEB-24

CARAZO, MATTHEW, MD[†]

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

CARLSON, STEVEN, MD[†]

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Teleservice

Effective as of 01-APR-21

CARLSON, STEVEN, MD[†]

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Teleservice

Effective as of 01-JAN-21

CARLSON, STEVEN, MD[†]

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Teleservice

Effective as of 01-SEP-22

C1. 网络提供者名单 专科护理医生

CHUNG, KIYON, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-AUG-16

CHUNG, KIYON, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

COX, JUSTIN, MD†

Provider ID: N/A

☒ 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-SEP-21

COX, JUSTIN, MD†

Provider ID: N/A

☒ 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-MAY-24

DIGGS, THOMAS, MD†

Provider ID: N/A

☒ 501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-JAN-14

DO, HULBERT, MD

Provider ID: N/A

☒ 412 WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-OCT-23

DO, HULBERT, MD

Provider ID: N/A

☒ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-OCT-23

DURAN, EDWARD, MD

Provider ID: N/A

☒ 2131 3RD AVE
SAN DIEGO, CA 92101
Effective as of 01-DEC-23

DURAN, EDWARD, MD

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

FRIEDMAN, RICHARD, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JAN-14

FRIEDMAN, RICHARD, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

GARIBYAN, VARTAN, DO†

Provider ID: N/A

☒ 4060 4TH AVE STE 500
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

GLASSMAN, JERROLD, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

GLASSMAN, JERROLD, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-AUG-20

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

☒ 3131 BERGER AVE STE 200

SAN DIEGO, CA 92123
Effective as of 01-NOV-23

HOURLANI, RAYAN, MD

Provider ID: N/A

☒ 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-FEB-23

KERAMATI, SHAHIN, MD†

Provider ID: N/A

☒ 501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-MAY-11

KERAMATI, SHAHIN, MD†

Provider ID: N/A

☒ 501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

KHAN, HASHIM, MD†

Provider ID: N/A

☒ 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-APR-21

KIMURA, BRUCE, MD†

Provider ID: N/A

☒ 501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-MAY-11

LY, NANCY, MD†

Provider ID: N/A

☒ 4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-JAN-21

LY, NANCY, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-NOV-23

LY, NANCY, MD†

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-JUN-23

MAI, TUAN, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

MEHTA, HIRSCH, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-SEP-22

MULLVAIN, JEFFRY, MD†

Provider ID: N/A

4060 4TH AVE STE 500
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

NANAVATI, VIMAL, MD†

Provider ID: N/A

16776 BERNARDO CENTER
DR STE 209
SAN DIEGO, CA 92128
Teleservice
Effective as of 01-FEB-23

NANAVATI, VIMAL, MD

Provider ID: N/A

11939 RANCHO BERNARDO
RD STE 120
SAN DIEGO, CA 92128
Teleservice
Effective as of 01-AUG-24

NANAVATI, VIMAL, MD

Provider ID: N/A

11939 RANCHO BERNARDO
RD STE 120
SAN DIEGO, CA 92128
Teleservice
Effective as of 01-AUG-23

NARAYANAN, MEENA, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-SEP-22

NARAYANAN, MEENA, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-APR-21

NARULA, ARVIN, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

NAYAK, KESHAV, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

NAYAK, KESHAV, MD†

Provider ID: N/A

501 WASHINGTON ST STE

512

SAN DIEGO, CA 92103
Effective as of 01-MAY-19

NGUYEN, TRI, MD†

Provider ID: N/A

4551 EL CAJON BLVD
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-JAN-23

NISHIMURA-KAMINSKI, MARIN, MD

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-MAR-23

OMRAN, JAD, MD

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-FEB-23

PARIKH, MILIND, DO†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-SEP-22

PARIZO, JUSTIN, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-SEP-21

PATEL, JIGAR, DO

Provider ID: N/A

4060 FOURTH AVENUE,
STE 650
SAN DIEGO, CA 92103

C1. 网络提供者名单 专科护理医生

Effective as of 01-MAR-24

PATEL, JIGAR, DO[†]

Provider ID: N/A

☒ 4060 4TH AVE STE 650
SAN DIEGO, CA 92103

Effective as of 01-SEP-24

PROHASKA, THOMAS, MD

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

SALAMI, ALI, MD[†]

Provider ID: N/A

☒ 501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103

Effective as of 01-MAY-11

SARSAM, LUAY, MD

Provider ID: N/A

☒ 412 WASHINGTON ST
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

☒ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

☒ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JUL-23

SHAH, KULIN, MD[†]

Provider ID: N/A

☒ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JAN-23

SHAH, ABHISHEK, MD[†]

Provider ID: N/A

☒ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-SEP-22

SHAH, KULIN, MD[†]

Provider ID: N/A

☒ 412 WASHINGTON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-23

SHEREV, DIMITRI, MD[†]

Provider ID: N/A

☒ 6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115

Effective as of 01-FEB-21

SUDHAKAR, DEEPTHI, MD[†]

Provider ID: N/A

☒ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JAN-23

SUDHAKAR, DEEPTHI, MD[†]

Provider ID: N/A

☒ 412 WASHINGTON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-23

WILLIAMS, JEFFREY, MD

Provider ID: N/A

☒ 4033 3RD AVE STE 204
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

ZAVARO, SUHAIL, MD

Provider ID: N/A

☒ 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-FEB-23

ACUPUNCTURIST

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

☒ 4910 DIRECTORS PL
SAN DIEGO, CA 92121

Effective as of 01-FEB-24

ARELLANO, JACQUELINE, LAC[†]

Provider ID: N/A

☒ 9333 GENESEE AVE STE
200
SAN DIEGO, CA 92121

Effective as of 01-MAR-21

ARELLANO, JACQUELINE, LAC[†]

Provider ID: N/A

☒ 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131

Effective as of 01-MAR-21

ARELLANO, JACQUELINE, LAC[†]

Provider ID: N/A

☒ 330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-MAR-21

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-24

CALLISON, YANHUI, LAC

Provider ID: N/A

☒ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-OCT-23

CERTIFIED

C1. 网络提供者名单 专科护理医生

CALLISON, YANHUI, LAC

Provider ID: N/A

4167 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-OCT-23

JULIAN, FIDES, LAC

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-24

JULIAN, FIDES, LAC†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-MAR-21

JULIAN, FIDES, LAC†

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131
Effective as of 01-MAR-21

JULIAN, FIDES, LAC†

Provider ID: N/A

9333 GENESEE AVE STE
200

SAN DIEGO, CA 92121
Effective as of 01-MAR-21

JULIAN, FIDES, LAC

Provider ID: N/A

4910 DIRECTORS PL
SAN DIEGO, CA 92121

Effective as of 01-FEB-24

LAM, KHANH, LAC†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice

Effective as of 01-SEP-21

LAM, KHANH, LAC†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice

Effective as of 01-NOV-22

MURRAY, STEVEN, LAC†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-AUG-21

MURRAY, STEVEN, LAC

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-24

MURRAY, STEVEN, LAC

Provider ID: N/A

4910 DIRECTORS PL
SAN DIEGO, CA 92121

Effective as of 01-FEB-24

MURRAY, STEVEN, LAC†

Provider ID: N/A

9333 GENESEE AVE STE
220

SAN DIEGO, CA 92121

Effective as of 01-AUG-21

MURRAY, STEVEN, LAC†

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Effective as of 01-AUG-21

NOVAK, ERIKA, LAC

Provider ID: N/A

3282 GOVERNOR DR
SAN DIEGO, CA 92122

Teleservice

Effective as of 01-NOV-22

SEITZ, GRETCHEN, LAC

Provider ID: N/A

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Effective as of 01-JAN-21

SEITZ, GRETCHEN, LAC

Provider ID: N/A

9995 CARMEL MOUNTAIN
RD STE B10-B11

SAN DIEGO, CA 92129

Effective as of 01-JAN-21

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

4910 DIRECTORS PL
SAN DIEGO, CA 92121

Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC†

Provider ID: N/A

9333 GENESEE AVE
SAN DIEGO, CA 92121

Effective as of 01-DEC-21

TANG-RITCHIE, LENG, LAC†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

TANG-RITCHIE, LENG, LAC†

Provider ID: N/A

330 LEWIS ST

C1. 网络提供者名单 专科护理医生

SAN DIEGO, CA 92103
Effective as of 01-DEC-21

CERTIFIED NURSE PRACTITIONER

AGUILA, YESENIA, NP

Provider ID: N/A

☒ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-FEB-24

ALSTEEN, STEPHANIE, NP†

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

AMOS, MARIA, NP†

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ANTHONY, SHARON, NP†

Provider ID: N/A

☒ 350 DICKINSON ST
SAN DIEGO, CA 92103*
Effective as of 01-DEC-21

ASHMAN, ELLEN, NP†

Provider ID: N/A

☒ 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

ASHMAN, ELLEN, NP†

Provider ID: N/A

☒ 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

ATILLO, RONALD MAR, NP†

Provider ID: N/A

☒ 200 W ARBOR DR

SAN DIEGO, CA 92103
Effective as of 01-AUG-22

BILOTTA, NATALIE, NP†

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

BINAVI, HOWNAZ, NP†

Provider ID: N/A

☒ 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

BINAVI, HOWNAZ, NP†

Provider ID: N/A

☒ 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

BROWN, VICTORIA, NP

Provider ID: N/A

☒ 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

BROWN, VICTORIA, NP

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

BUI, ANH, NPF

Provider ID: N/A

☒ 7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
Teleservice

Effective as of 01-NOV-23

BULLER, RIYAN, NPF

Provider ID: N/A

☒ 3737 MORAGA AVE STE
B103

SAN DIEGO, CA 92117
Teleservice

Effective as of 01-JUN-24

BULLER, RIYAN, NPF

Provider ID: N/A

☒ 9909 MIRA MESA BLVD
STE 110
SAN DIEGO, CA 92131
Teleservice
Effective as of 01-JUN-24

BURNEY, BRAEANNE, NP†

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CALCUTT, SUZANNE, NP

Provider ID: N/A

☒ 6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-JUN-24

CAMAQUIN, MIA, NP

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CAMARGO-LOWTHERS, ANGELICA, NP†

Provider ID: N/A

☒ 8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

CAMARGO-LOWTHERS, ANGELICA, NP

Provider ID: N/A

☒ 8010 FROST ST STE 100
SAN DIEGO, CA 92123

C1. 网络提供者名单 专科护理医生

Effective as of 01-AUG-24

CAMARGO-LOWTHERS, ANGELICA, NP†

Provider ID: N/A

📍 8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

CAMARGO-LOWTHERS, ANGELICA, NP

Provider ID: N/A

📍 8010 FROST ST STE 220
SAN DIEGO, CA 92123
Effective as of 01-JUL-23

CAPORELLO, AMY, NPF

Provider ID: N/A

📍 555 W C ST STE 102
SAN DIEGO, CA 92101
Teleservice
Effective as of 01-JUN-24

CARDENAS, MIRIAM, NPF

Provider ID: N/A

📍 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

CARDENAS, MIRIAM, NPF

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

CASE, ERINN, NP

Provider ID: N/A

📍 3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Effective as of 01-JAN-21

CAVIRIS, DIONYSIA, NPF

Provider ID: N/A

📍 375 CAMINO DE LA REINA
STE C
SAN DIEGO, CA 92108
Teleservice
Effective as of 01-JUN-24

CELESTIN-RAMSEY, AKANKE, NPF

Provider ID: N/A

📍 950 S EUCLID AVE
SAN DIEGO, CA 92114
Teleservice
Effective as of 01-DEC-21

CHANTALA, ELIZABETH, NP†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CHAVEZ, ALEXANDRIA, NP†

Provider ID: N/A

📍 4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

CHEATHAM, BRITTANY, NP†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CHEN, KATIE, NP

Provider ID: N/A

📍 4440 EUCLID AVE STE A
SAN DIEGO, CA 92115
Effective as of 01-MAR-24

CHOATE, BERNADETTE, NP†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

CHOATE, BERNADETTE, NP†

Provider ID: N/A

📍 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

CHRISMAN, JESSICA, NP

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

CHUNG, SUEMIN, NP

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

CHUNG, SUEMIN, NP

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

CHUNG, SUEMIN, NP

Provider ID: N/A

📍 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

COLEMAN, PAGE, NP

Provider ID: N/A

📍 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-FEB-24

CONNER, PAMELA, NP

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

C1. 网络提供者名单 专科护理医生

CONNOR, CAROLINE, NP†

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-JUN-21

CONNOR, CAROLINE, NP†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-21

CUTLER, APRYL, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

DE DIOS, SARAH JANE, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

DEL VECCHIO, MEGAN, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-SEP-23

DEL VECCHIO, MEGAN, NP

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-SEP-23

DELARA, KAROLJOHN, NP

Provider ID: N/A

4440 EUCLID AVE STE A
SAN DIEGO, CA 92115
Effective as of 01-MAR-24

DHARKAR-SURBER, SAPNA, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

DHARKAR-SURBER, SAPNA, NP

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

DILLEN, REBECCA, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

DOAN, ANGELA, NP†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

DOAN, ANGELA, NP†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

DRISCOLL, KARRIE, NP†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

DRISCOLL, SUSAN, NP

Provider ID: N/A

1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Effective as of 01-OCT-23

DWYER, ERIN, NP†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

DWYER, ERIN, NP†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

DWYER, ERIN, NP

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

DWYER, ERIN, NP

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DWYER, ERIN, NP

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-FEB-24

EDNACOT, KARYNNE, NPF

Provider ID: N/A

8010 FROST ST STE 100
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-JUL-24

EDNACOT, KARYNNE, NPF

Provider ID: N/A

8010 FROST ST STE 100
SAN DIEGO, CA 92123
Teleservice

C1. 网络提供者名单 专科护理医生

Effective as of 01-AUG-24

ERICKSON, LISA, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

ERICKSON, LISA, NP†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

FEIZI, SEDI, NP†

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102

Effective as of 01-JAN-21

FEROLIE, PAM, NP

Provider ID: N/A

375 CAMINO DE LA REINA
STE C
SAN DIEGO, CA 92108

Effective as of 01-DEC-23

FILIPPELLO, LAUREN, NPF

Provider ID: N/A

3863 CLAIREMONT DR
SAN DIEGO, CA 92117

Teleservice

Effective as of 01-OCT-23

GIORGI, ASHLEY, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

GIORGI, ASHLEY, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

GOMEZ, LESLIE, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

GOMEZ, LESLIE, NP

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

GOMEZ, LESLIE, NP

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

GONZALEZ, LISA, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

GORDON, DANIELLE, NP†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JAN-21

GROSS, KIMBERLY, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

GROSS, KIMBERLY, NP†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-AUG-22

HA, THU, NP

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

HA, THU, NP

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

HARVEY, DELFINA, NP

Provider ID: N/A

3490 PALM AVE
SAN DIEGO, CA 92154

Effective as of 01-JUL-23

HAYS, SHEENA, NPF

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JUN-24

HAYS, SHEENA, NPF

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-JUN-24

HAYS, SHEENA, NPF

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-JUN-24

HEFNER, ANNA, NP

Provider ID: N/A

10737 CAMINO RUIZ STE

C1. 网络提供者名单 专科护理医生

235
SAN DIEGO, CA 92126
Effective as of 01-JUL-24

HILL, GENIELYN, NP

Provider ID: N/A
10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-MAY-23

HILLIARD, THESALONICA, NP

Provider ID: N/A
10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-SEP-22

HOOPER, BONNIE, NP

Provider ID: N/A
9095 RIO SAN DIEGO DR
STE 300
SAN DIEGO, CA 92108
Effective as of 01-MAY-24

HOOPER, BONNIE, NP†

Provider ID: N/A
9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

HORNFELD, COURTNEY, NP

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

JENKINS, ERIN, NP

Provider ID: N/A
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

JENKINS, ERIN, NP

Provider ID: N/A
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

JENSEN, ADRIENNE, NP

Provider ID: N/A
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-APR-23

JENSEN, ADRIENNE, NP

Provider ID: N/A
350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

JONES, CHRISTA, NP†

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

JONES, CHRISTA, NP

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

KAHL, NICHOLAS, NP

Provider ID: N/A
12843 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130
Effective as of 01-JAN-21

KELLEY, JESSICA, NP

Provider ID: N/A
3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-24

KI, TRISH, NP†

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

KI, TRISH, NP†

Provider ID: N/A
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

KYI, MYA, NP

Provider ID: N/A
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-MAR-24

LARSON, LINDSAY, NP

Provider ID: N/A
6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-JUN-24

LEE, MINDY, NP

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

LEE, MINDY, NP

Provider ID: N/A
8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

LEE, MINDY, NP

Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

LOWE, ASHLEY, NP

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

☐ 3444 KEARNY VILLA RD
STE 201

SAN DIEGO, CA 92123
Effective as of 01-MAY-24

LOWE, ASHLEY, NP

Provider ID: N/A

☐ 3444 KEARNY VILLA RD
STE 201

SAN DIEGO, CA 92123
Effective as of 01-MAY-24

MADGEDI, SHEILA, NP†

Provider ID: N/A

☐ 4282 GENESEE AVE STE
204
SAN DIEGO, CA 92117

Teleservice

Effective as of 01-JUL-21

MANRIQUEZ, LISETTE, NPF

Provider ID: N/A

☐ 286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

Effective as of 01-MAY-24

MANZANO, EUNICE, NP†

Provider ID: N/A

☐ 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-AUG-22

MANZANO, EUNICE, NP†

Provider ID: N/A

☐ 4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-AUG-22

MAROSOK, MICHELLE, NP

Provider ID: N/A

☐ 16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127

Teleservice

Effective as of 01-MAR-24

MARTINEZ, CAROLYN, NP

Provider ID: N/A

☐ 1016 OUTER RD
SAN DIEGO, CA 92154

Effective as of 01-AUG-22

MCCLAIN, MEGAN, NP†

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

MCGILLOWAY, MELANIE, NP†

Provider ID: N/A

☐ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

MCGOWAN, GLAIZA ANN, NP

Provider ID: N/A

☐ 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-DEC-23

MCGOWAN, GLAIZA ANN, NP

Provider ID: N/A

☐ 4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

MEDINA, RUBELETA, NP

Provider ID: N/A

☐ 9995 CARMEL MOUNTAIN
RD STE B1011
SAN DIEGO, CA 92129

Effective as of 01-FEB-23

MELTZER, VIRGINIA, NP†

Provider ID: N/A

☐ 350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

MEYER, ISAAC, NP

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

MEYER, ISAAC, NP

Provider ID: N/A

☐ 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-JUN-23

MICK, SHARON, NP

Provider ID: N/A

☐ 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

☐ 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

MOONEY, PATRICIA, NP†

Provider ID: N/A

☐ 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Teleservice

Effective as of 01-MAY-21

MOONEY, PATRICIA, NP†

Provider ID: N/A

☐ 16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127

C1. 网络提供者名单 专科护理医生

Teleservice

Effective as of 01-JAN-24

MULVEY, CAOILFHIONN, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

MWAURA, WAIRIMU, NP†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JUN-21

NAGATA, CERAH, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

NAGATA, CERAH, NP

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

NETZEL, JENNIFER, NP†

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-AUG-22

NETZEL, JENNIFER, NP†

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Effective as of 01-AUG-22

NETZEL, JENNIFER, NP†

Provider ID: N/A

9333 GENESEE AVE
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

NGO-BIGGE, ANGELA, NP

Provider ID: N/A

7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
Teleservice
Effective as of 01-JUN-23

NOCEDA, ANA, NP†

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

NOCEDA, ANA, NP†

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-SEP-22

OREJEL, EDITH, NP

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-23

OREJEL, EDITH, NP

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-23

ORPILLA, IMELDA, NP

Provider ID: N/A

9995 CARMEL MOUNTAIN
RD STE B10-B11
SAN DIEGO, CA 92129
Effective as of 01-JAN-21

ORPILLA, IMELDA, NP

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-AUG-21

PACE, RACHELLE, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

PACE, RACHELLE, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

PACE, RACHELLE, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

PACE, RACHELLE, NP

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-SEP-24

PATIAG, DANIEL, NP

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PATIAG, DANIEL, NP

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PEET, MELISSA, NPF

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

C1. 网络提供者名单 专科护理医生

Effective as of 01-AUG-24

PEET, MELISSA, NPF

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

PEREZ, ALLYSSA, NP

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

PEREZ, ALLYSSA, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

PEREZ, ALLYSSA, NP†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

PETTIS, BETH, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

PITECK, CAITLIN, NPF

Provider ID: N/A

555 W C ST STE 102
SAN DIEGO, CA 92101
Teleservice
Effective as of 01-JUN-24

POLIZZI, BRITTANY, NP†

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-JUN-22

POVOLI, LAUREN, NPF

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-24

RADMAN, MIRKA, NP

Provider ID: N/A

6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-AUG-23

RAJAEI, NILOUFAR, NP†

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-AUG-22

REAL, MARIA, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

REAL, MARIA, NP

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

REDDY, PRIYA, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

REDDY, PRIYA, NP

Provider ID: N/A

4171 FAIRMOUNT AVE

SAN DIEGO, CA 92105
Effective as of 01-NOV-22

REGEV, SHANEE, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-APR-23

REGEV, SHANEE, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

REINER, GAIL, NP†

Provider ID: N/A

4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
Effective as of 01-OCT-21

REINER, GAIL, NP

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

RENZAS, JENNIFER, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUL-21

RENZAS, JENNIFER, NP

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUL-21

ROBERTSON, RACHAEL, NP†

Provider ID: N/A

200 W ARBOR DR

C1. 网络提供者名单 专科护理医生

SAN DIEGO, CA 92103
Effective as of 01-JAN-22

RODENMEYER, EVE, NP

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

RODENMEYER, EVE, NP

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

ROSCOE, SYDNEY, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

ROSCOE, SYDNEY, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

ROSCOE, SYDNEY, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-MAR-24

ROSS, CRYSTAL, NP†

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

ROSSI, CATHERINE, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ROZO, JOSE, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

RUFO, ROSAVIDA, NP

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131
Effective as of 01-JUN-23

SABIN, NANCY, NP

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

SABIN, NANCY, NP

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

SALINAS, NIECEL, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

SALOTTI, JOANIE, NP†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

SALOTTI, JOANIE, NP†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

SANADA, VIVIANE, NP

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 202
SAN DIEGO, CA 92102
Teleservice
Effective as of 01-APR-24

SANTANGELO, JOANNE, NP

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

SANTANGELO, JOANNE, NP

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

SATTERWHITE, MAURINE, NP

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

SATTERWHITE, MAURINE, NP

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

SCOTT, KELLY, NP

Provider ID: N/A

2630 1ST AVE
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JUL-22

SEARS-WILEY, ELIZABETH, NP†

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-21

SHARMA, RAKHI, NP

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

SHAW, MARILYNN, NP

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-MAR-23

SIETSMA, ALEXANDRA, NP†

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

SMITH, JENNIFER, NP†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

SMITH, JENNIFER, NP†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

SNYDER, KIRSTIN, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-APR-23

SNYDER, KIRSTIN, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

SNYDER, KIRSTIN, NP

Provider ID: N/A

6655 ALVARADO RD

SAN DIEGO, CA 92120
Effective as of 01-AUG-24

SOLOMON, AMANDA, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SOLOMON, AMANDA, NP

Provider ID: N/A

16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

SPAULDING, ENJOLI, NP

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-AUG-23

SPAULDING, ENJOLI, NP

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-MAY-23

STAHL, STEPHANIE, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

STEFFENSMEIER, CHRISTA, NP

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-24

SUHIR, ERIN, NP

Provider ID: N/A

4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-MAR-24

SWEENEY, ZSAZSA, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUL-21

TANNOUS, PETER, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105*
Effective as of 01-OCT-24

TEJADA BRAS, SANDY, NP

Provider ID: N/A

2929 HEALTH CENTER DR
SAN DIEGO, CA 92123*
Effective as of 01-JUL-22

TILLEY, MONICA, NPF

Provider ID: N/A

12843 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130
Effective as of 01-DEC-21

TOMICICH, STEPHANIE, NP

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-FEB-24

TOMICICH, STEPHANIE, NP

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

C1. 网络提供者名单

专科护理医生

TOMICICH, STEPHANIE, NP

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

TOMICICH, STEPHANIE, NP

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

TOPIK, AMANDA, NP†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

TOPIK, AMANDA, NP†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

TOWNS, ARTA, NP

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

TOWNS, ARTA, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

TRAN, DAPHNE, NP

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

TREJO, ANA, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

TUCKER, LANIKA, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

TUCKER, LANIKA, NP

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-JUL-24

VILLANUEVADEGUTIE, BERENICE, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-MAY-21

WHITEHURST, UNIQUE, NP

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

WHITEHURST, UNIQUE, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

WHITEHURST, UNIQUE, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

WIETZKE, MATTHEW, NP

Provider ID: N/A

350 DICKINSON ST

SAN DIEGO, CA 92103
Effective as of 01-JAN-24

WIETZKE, MATTHEW, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

WILLEY, MARTI, NP†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JAN-21

WILLEY, MARTI, NP†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JUN-21

WILLIAMS, BREAHA, NP

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-DEC-21

WILLIAMS, BREAHA, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-DEC-21

WONG, MAYBELLE, NP


Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

WONG, MAYBELLE, NP


Provider ID: N/A

C1. 网络提供者名单 专科护理医生

 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24


WOO, ANDY, NP

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

YARTSEVA, YULIYA, NP


Provider ID: N/A

 3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Effective as of 01-JAN-21

CERTIFIED REGISTERED NURSE ANESTHETIST


CALABRIA, MEGAN, CRNA

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23


CANTRELL, SARAH, CRNA

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23


COLE, JASON, CRNA†

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21


DOLLAND, STEVEN, CRNA†

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21


DULAY, JOTI, CRNA

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23


EVANS, CATHERINE, CRNA

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-23


FIEDLER, DEREK, CRNA

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23


GONZALEZ, LISA, CRNA

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23


GRIFFIN, SETH, CRNA

Provider ID: N/A

 200 W ARBOR DR
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JOHNSTON, RACHEL, CRNA

Provider ID: N/A

 200 W ARBOR DR
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Effective as of 01-DEC-23

POLIKOWSKI, SAMANTHA, CRNA†

Provider ID: N/A

 200 W ARBOR DR
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Effective as of 01-AUG-22

POLLOM, JESSICA, CRNA†


Provider ID: N/A

 200 W ARBOR DR

SAN DIEGO, CA 92103
Effective as of 01-JUL-21


RAMIREZ, NICOLE, CRNA†

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22


ROADMAN, KEENE, CRNA

Provider ID: N/A

 200 W ARBOR DR
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Effective as of 01-JUN-23


SACKS, BRENT, CRNA†

Provider ID: N/A

 200 W ARBOR DR
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Effective as of 01-APR-21


SNODGRASS, JULIE, CRNA†

Provider ID: N/A

 200 W ARBOR DR
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VINCENT, BERLIN, CRNA†


Provider ID: N/A

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Effective as of 01-AUG-22

CERTIFIED REGISTERED NURSE MIDWIFE

CHOI, NATHALIE, CRNM

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 4168 FRONT ST
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CHOI, NATHALIE, CRNM

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 200 W ARBOR DR

C1. 网络提供者名单 专科护理医生

SAN DIEGO, CA 92103
Effective as of 01-SEP-23

CORRY, ANDREA, CRNM

Provider ID: N/A
☒ 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

CORRY, ANDREA, CRNM

Provider ID: N/A
☒ 7910 FROST ST
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

CORRY, ANDREA, CRNM

Provider ID: N/A
☒ 6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-SEP-23

CORRY, ANDREA, CRNM

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☒ 16950 VIA TAZON
SAN DIEGO, CA 92127
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CORTES, CHRISTINE, CRNM†

Provider ID: N/A
☒ 4290 POLK AVE
SAN DIEGO, CA 92105
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☒ 4290 POLK AVE
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☒ 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
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ELY-KONOSKE, RACHEL, CRNM

Provider ID: N/A
☒ 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

ELY-KONOSKE, RACHEL, CRNM

Provider ID: N/A
☒ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-DEC-23

GUNTHER, HOPE, CRNM†

Provider ID: N/A
☒ 4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

MAST, ASHLEY, CRNM

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☒ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

NATHAN, CARLY, CRNM

Provider ID: N/A
☒ 200 W ARBOR DR
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Effective as of 01-AUG-23

NATHAN, CARLY, CRNM

Provider ID: N/A
☒ 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Effective as of 01-AUG-23

RAY, BROOKE, CRNM†

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☒ 4060 FAIRMOUNT AVE
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Teleservice

Effective as of 01-SEP-21

STRAUSS, JOANNA, CRNM

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☒ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-MAY-21

TAYLOR, INGE, CRNM†

Provider ID: N/A
☒ 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

VU HILL, ERICA, NP†

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☒ 4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

CHIROPRACTOR

ASSADIAN, MEHRAK, DC

Provider ID: N/A
☒ 950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

CABALLERO, JAMES, DC

Provider ID: N/A
☒ 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-NOV-23

CABALLERO, JAMES, DC

Provider ID: N/A
☒ 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129
Effective as of 01-NOV-23

DORADO, SUE, DC

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-OCT-23

GILIBERTO, JOSEPH, DC†
Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-AUG-22

GILIBERTO, JOSEPH, DC†
Provider ID: N/A

9995 CARMEL MOUNTAIN
RD STE D
SAN DIEGO, CA 92129
Effective as of 01-AUG-22

HALEY, STEVEN, DC
Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

KAZEM, AHMAD, DC
Provider ID: N/A

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Effective as of 01-SEP-24

LE, BRANDON, DC
Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

LE, BRANDON, DC
Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

LUU, DANIEL, DC†
Provider ID: N/A

4419 EUCLID AVE STE 105
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

LUU, DANIEL, DC†
Provider ID: N/A

4419 EUCLID AVE STE 105
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

MONTANE, RUBEN, DC
Provider ID: N/A

1016 OUTER RD
SAN DIEGO, CA 92154*
Effective as of 01-AUG-24

ROSENBERG, ERIK, DC
Provider ID: N/A

7612 LINDA VISTA RD STE
109
SAN DIEGO, CA 92111
Effective as of 01-NOV-23

TRUONG, VENNES, DC
Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-OCT-23

DERMATOLOGY

AHLUWALIA, JUSLEEN, MD
Provider ID: N/A

9878 HIBERT ST STE 100
SAN DIEGO, CA 92131
Effective as of 01-DEC-20

ANGRA, KUNAL, MD†
Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-JUL-21

ANGRA, KUNAL, MD†
Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-DEC-22

ANGRA, KUNAL, MD†
Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JUL-21

BOEN, MONICA, MD†
Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-MAR-20

BOEN, MONICA, MD†
Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

BOEN, MONICA, MD†
Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

BOEN, MONICA, MD†
Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

BRADSHAW, MICHAEL, MD
Provider ID: N/A

C1. 网络提供者名单 专科护理医生

📍 9878 HIBERT ST STE 100
SAN DIEGO, CA 92131
Effective as of 01-JUL-16

BRAUN, TARA, MD

Provider ID: N/A

📍 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-MAR-24

BROUHA, BROOK, MD

Provider ID: N/A

📍 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-NOV-23

BROUHA, BROOK, MD†

Provider ID: N/A

📍 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

BROUHA, BROOK, MD†

Provider ID: N/A

📍 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JUN-18

BROUHA, BROOK, MD†

Provider ID: N/A

📍 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

BROUHA, BROOK, MD†

Provider ID: N/A

📍 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

CALAME, ANTOANELLA, MD†

Provider ID: N/A

📍 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Effective as of 01-JUL-22

CELANO, NICHOLAS, MD

Provider ID: N/A

📍 5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117
Teleservice
Effective as of 01-AUG-24

CHEN, BRYAN, MD

Provider ID: N/A

📍 9878 HIBERT ST STE 100
SAN DIEGO, CA 92131*
Effective as of 01-JUL-16

CHEN, BRYAN, MD

Provider ID: N/A

📍 9878 HIBERT ST STE 100
SAN DIEGO, CA 92131
Effective as of 01-JUL-16

CHIANG, JENNIFER, MD

Provider ID: N/A

📍 5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117
Effective as of 01-AUG-24

DANG, TIMOTHY, MD

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-AUG-24

DELA ROSA, KRISTINA, MD

Provider ID: N/A

📍 9878 HIBERT ST STE 100
SAN DIEGO, CA 92131
Effective as of 01-AUG-17

DELA ROSA, KRISTINA, MD

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📍 9878 HIBERT ST STE 100
SAN DIEGO, CA 92131
Effective as of 01-JAN-18

ERICKSON, CHRISTOPHER, MD†

Provider ID: N/A

📍 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Effective as of 01-JUL-22

GERSTENFELD, ERIC, MD

Provider ID: N/A

📍 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

GLADSJO, JULIE, MD

Provider ID: N/A

📍 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-FEB-23

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
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SAN DIEGO, CA 92122
Effective as of 01-DEC-23

HAMMAN, MICHAEL, MD†

Provider ID: N/A

📍 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

HAMMAN, MICHAEL, MD†

Provider ID: N/A

📍 9339 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-NOV-23

C1. 网络提供者名单 专科护理医生

HAMMAN, MICHAEL, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350A
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Effective as of 01-JUN-17

HAMMAN, MICHAEL, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JAN-21

HAMMAN, MICHAEL, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22

HAMMAN, MICHAEL, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

HAN, AMY, MD

Provider ID: N/A

6386 ALVARADO CT STE
209
SAN DIEGO, CA 92120
Effective as of 01-FEB-22

HEMPERLY, STEPHEN, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

HEMPERLY, STEPHEN, DO

Provider ID: N/A

9095 RIO SAN DIEGO DR

STE 300
SAN DIEGO, CA 92108
Effective as of 01-MAY-24

HEMPERLY, STEPHEN, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

HIGHTOWER, GEORGE, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

KASSAB, GHADA, MD

Provider ID: N/A

3737 MORAGA AVE STE
A206
SAN DIEGO, CA 92117
Effective as of 01-JUL-23

KASSAB, GHADA, MD

Provider ID: N/A

4606 MISSION BAY DR
SAN DIEGO, CA 92109
Effective as of 01-AUG-24

KAUNITZ, GENEVIEVE, MD†

Provider ID: N/A

8899 UNIVERSITY CENTER
LN STE 350
SAN DIEGO, CA 92122
Effective as of 01-OCT-21

KEEL, DOUGLAS, DO

Provider ID: N/A

8899 UNIVERSITY CENTER
LN STE 150
SAN DIEGO, CA 92122
Effective as of 01-JAN-21

LIN, SHINKO, MD

Provider ID: N/A

5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117
Effective as of 01-AUG-24

LIN LEVY, JENNIFER, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-AUG-24

LIU, YUJIE, DO

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-JUL-24

LUPTON, JASON, MD

Provider ID: N/A

12395 EL CAMINO REAL
STE 207
SAN DIEGO, CA 92130
Effective as of 01-MAR-16

LYFORD, WILLIS, MD

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-MAY-23

MAFONG, ERICK, MD

Provider ID: N/A

4060 4TH AVE STE 209
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

MAFONG, ERICK, MD

Provider ID: N/A

6386 ALVARADO CT STE
209
SAN DIEGO, CA 92120
Effective as of 01-FEB-22

C1. 网络提供者名单 专科护理医生

NAHM, WALTER, MD†

Provider ID: N/A

7695 CARDINAL CT STE
200
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NAHM, WALTER, MD†

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7695 CARDINAL CT STE
200
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7695 CARDINAL CT STE
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REED, KELLY, DO†

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4060 4TH AVE STE 415
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REED, KELLY, DO†

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9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
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9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
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RILEY, JESSICA, DO†

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4060 4TH AVE STE 415

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RILEY, JESSICA, DO†

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4060 4TH AVE STE 415
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SATEESH, BROOKE, MD

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5222 BALBOA AVE FL 5
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SCHMIEDECKE, RUDY, MD

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6605 NANCY RIDGE DR
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SHAHAN, FRED, MD

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6367 ALVARADO CT STE
107
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SHAHAN, FRED, MD

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4060 4TH AVE STE 415
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4060 4TH AVE STE 415

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4765 CARMEL MOUNTAIN
RD STE 201
SAN DIEGO, CA 92130
Effective as of 01-JAN-23

SOON, SEAVER, MD

Provider ID: N/A

3737 4TH AVE
SAN DIEGO, CA 92103
Effective as of 01-MAR-23

STEIN, ALEXANDER, MD†

Provider ID: N/A

6280 JACKSON DR STE 8
SAN DIEGO, CA 92119
Effective as of 01-SEP-22

STERN, MARLEIGH, MD

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8899 UNIVERSITY CENTER
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Effective as of 01-JUN-24

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9339 GENESEE AVE STE
350A
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Effective as of 01-JUL-22

TOMPKINS, STACY, MD†

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9339 GENESEE AVE STE
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TOMPKINS, STACY, MD

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

4060 4TH AVE STE 415
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Effective as of 01-NOV-23

TOMPKINS, STACY, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350A
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Effective as of 01-DEC-22

TSE, YARDY, MD†

Provider ID: N/A

4765 CARMEL MOUNTAIN
RD STE 201
SAN DIEGO, CA 92130
Effective as of 01-SEP-21

TYAGI, ABHILASHA, MD

Provider ID: N/A

5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117
Effective as of 01-AUG-24

UEBELHOER, NATHAN, DO

Provider ID: N/A

5222 BALBOA AVE FL 5
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Effective as of 01-AUG-24

VENKAT, ARUN, MD†

Provider ID: N/A

4765 CARMEL MOUNTAIN
RD STE 201
SAN DIEGO, CA 92130
Effective as of 01-APR-20

ZALESKI-LARSEN, LISA, DO†

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4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JAN-21

ZALESKI-LARSEN, LISA, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22

ZUBAIR, RAHEEL, MD

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-MAR-24

ZUBAIR, RAHEEL, MD

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JUN-24

ZUBAIR, RAHEEL, MD

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-23

ZUBAIR, RAHEEL, MD

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

ZUBAIR, RAHEEL, MD

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

DERMATOLOGY

DERMATOPATHOLOGY

CALAME, ANTOANELLA, MD†

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Effective as of 01-JAN-23

ERICKSON, CHRISTOPHER, MD†

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

SHEN, HONGGANG, MD

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JUL-19

EMERGENCY MEDICINE

ALKATIB, RHONDA, MD†

Provider ID: N/A

2655 CAMINO DEL RIO N
STE 120
SAN DIEGO, CA 92108
Effective as of 01-AUG-20

CASTELLANO, TIFFANY, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

CHEN, ALICE, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

COYNE, CHRISTOPHER, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

C1. 网络提供者名单 专科护理医生

DICKSON, MATTHEW, DO†

Provider ID: N/A

1628 PALM AVE
SAN DIEGO, CA 92154
Effective as of 01-JAN-21

GUEFEN, URI, MD

Provider ID: N/A

555 W C ST STE 102
SAN DIEGO, CA 92101
Effective as of 01-SEP-23

HARE, MARC, MD

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Effective as of 01-APR-23

HOGUE, BRENNIA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

JURKOWSKI, LEONARD, MD†

Provider ID: N/A

3830 VALLEY CENTRE DR
STE 702
SAN DIEGO, CA 92130
Effective as of 01-JAN-21

KUTZ, CRAIG, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

LIOTTA, BENJAMIN, MD†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-DEC-21

PARK, JAY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

YU, ELAINE, DO

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

ENDOCRINOLOGY

METABOLISM DIABETES

EKANAYAKE, PREETHIKA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

EKANAYAKE, PREETHIKA, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

FIRST, BRIAN, MD†

Provider ID: N/A

4282 GENESEE AVE STE
103
SAN DIEGO, CA 92117
Effective as of 01-JAN-14

GUERIN, CHRIS, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

HOSEIN, NADEEN, MD

Provider ID: N/A

4077 5TH AVE STE 35
SAN DIEGO, CA 92103

Effective as of 01-FEB-23

IYENGAR, RAVI, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

IYENGAR, RAVI, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

NAGELBERG, JODI, MD†

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-NOV-21

NAGELBERG, JODI, MD†

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Effective as of 01-NOV-21

NAGELBERG, JODI, MD†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

NAGELBERG, JODI, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

SANDLER, JEFFREY, MD

Provider ID: N/A

4060 4TH AVE STE 340
SAN DIEGO, CA 92103
Teleservice

C1. 网络提供者名单 专科护理医生

Effective as of 01-AUG-23

SANDLER, JEFFREY, MD

Provider ID: N/A

☒ 4060 4TH AVE STE 340
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-AUG-23

SANDLER, JEFFREY, MD

Provider ID: N/A

☒ 4060 4TH AVE STE 340
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-OCT-23

SHAH, NANDI, MD

Provider ID: N/A

☒ 4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

SHAH, NANDI, MD

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

STRAHM, LISA, MD†

Provider ID: N/A

☒ 1855 1ST AVE STE 200B
SAN DIEGO, CA 92101

Effective as of 01-JUL-20

TANTISIRA, LALITA, MD†

Provider ID: N/A

☒ 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Effective as of 01-DEC-21

ENDOCRINOLOGY REPRODUCTIVE

DANESHMAND, SAID, MD

Provider ID: N/A

☒ 11515 EL CAMINO REAL STE
100
SAN DIEGO, CA 92130

Effective as of 01-SEP-17

FOYOUZI-YOUSEFI, NASTARAN, MD

Provider ID: N/A

☒ 11425 EL CAMINO REAL
SAN DIEGO, CA 92130

Effective as of 01-JUN-23

FRIEDMAN, BROOKE, MD†

Provider ID: N/A

☒ 11425 EL CAMINO REAL
SAN DIEGO, CA 92130

Effective as of 01-SEP-17

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL, MD†

Provider ID: N/A

☒ 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Effective as of 01-SEP-23

BERNADETT, ALEX, MD†

Provider ID: N/A

☒ 6699 ALVARADO RD STE
2100
SAN DIEGO, CA 92120

Effective as of 01-FEB-23

BERNADETT, ALEX, MD†

Provider ID: N/A

☒ 10505 SORRENTO VALLEY
RD STE 200
SAN DIEGO, CA 92121

Effective as of 01-FEB-23

CAMPBELL, BRIANNA, MD

Provider ID: N/A

☒ 950 S EUCLID AVE

SAN DIEGO, CA 92114

Effective as of 01-MAY-23

DANG, LAUREL, MD

Provider ID: N/A

☒ 9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Effective as of 01-SEP-24

DENYSIAK, JACQUELINE, MD†

Provider ID: N/A

☒ 3969 4TH AVE STE 203
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-DEC-20

HILL, LINDA, MD†

Provider ID: N/A

☒ 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

HILL, LINDA, MD†

Provider ID: N/A

☒ 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

JOLICOEUR, MEGAN, DO

Provider ID: N/A

☒ 8899 UNIVERSITY CENTER
LN STE 350

SAN DIEGO, CA 92122

Effective as of 01-JUN-23

JOLICOEUR, MEGAN, DO

Provider ID: N/A

☒ 9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Effective as of 01-JUN-23

JOLICOEUR, MEGAN, DO

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

9333 GENESEE AVE
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

JOLICOEUR, MEGAN, DO
Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

KUROSAKA, MOMO, MD†
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

KUROSAKA, MOMO, MD†
Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-AUG-22

MARSTON, JACQUELINE, DO
Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PERESS, LILIA, MD
Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-24

PERESS, LILIA, MD
Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-24

RODRIGUEZ, NATALIE, MD
Provider ID: N/A

1685 HOLLISTER ST
SAN DIEGO, CA 92154*

Effective as of 01-NOV-23

ROJAS, SARAH, MD

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-JUL-24

**SHEKER-DICKSON, KIMBERLY,
DO†**

Provider ID: N/A

1628 PALM AVE
SAN DIEGO, CA 92154
Effective as of 01-JAN-21

SOPHY, ELIZABETH, MD†

Provider ID: N/A

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Effective as of 01-SEP-22

**SUMMERS-DAY, COURTNEY,
MD†**

Provider ID: N/A

1016 OUTER RD
SAN DIEGO, CA 92154
Effective as of 01-JUL-22

FAMILY PRACTICE GERIATRIC MEDICINE

MILLER, SCOTT, MD†

Provider ID: N/A

9878 CARMEL MOUNTAIN
RD STE B
SAN DIEGO, CA 92129
Effective as of 01-JAN-21

FAMILY PRACTICE SPORTS MEDICINE

UDOWENKO, MARINA, DO

Provider ID: N/A

375 CAMINO DE LA REINA

STE C

SAN DIEGO, CA 92108
Effective as of 01-JUN-23

GASTROENTEROLOGY

BORTNIKER, ETHAN, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JUN-24

BORTNIKER, ETHAN, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-MAY-24

CHANDRADAS, SAJIV, MD†

Provider ID: N/A

4060 4TH AVE STE 240
SAN DIEGO, CA 92103
Effective as of 01-JUL-17

CUBAS, IVAN, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-MAR-15

CUBAS, IVAN, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

CUBAS, IVAN, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-DEC-14

CUMMINS, ANDREW, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

📍 4060 4TH AVE STE 240
SAN DIEGO, CA 92103
Effective as of 01-JAN-15

DESTA, TADDESE, MD†

Provider ID: N/A

📍 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-SEP-15

DESTA, TADDESE, MD†

Provider ID: N/A

📍 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-APR-24

DESTA, TADDESE, MD†

Provider ID: N/A

📍 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-JAN-14

DESTA, TADDESE, MD†

Provider ID: N/A

📍 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

DUBOIS, SUJA, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 240
SAN DIEGO, CA 92103
Effective as of 01-SEP-20

GADDIPATI, KISHORE, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 240
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

GISH, ROBERT, MD†

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-21

GISH, ROBERT, MD†

Provider ID: N/A

📍 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-JUN-21

GOLDKLANG, ROBERT, MD

Provider ID: N/A

📍 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-MAY-24

GOLDKLANG, ROBERT, MD

Provider ID: N/A

📍 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JUL-24

HASAN, AWS, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

HASSANEIN, TAREK, MD†

Provider ID: N/A

📍 995 GATEWAY CENTER
WAY STE 105
SAN DIEGO, CA 92102
Effective as of 01-SEP-22

HUA, MENG, MD†

Provider ID: N/A

📍 6699 ALVARADO RD STE
2306
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

KLAPHEKE, ROBERT, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

MITTAL, YASH, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 240
SAN DIEGO, CA 92103
Effective as of 01-MAR-20

NGUYEN, TUAN, MD†

Provider ID: N/A

📍 4141 FAIRMOUNT AVE STE
201
SAN DIEGO, CA 92105
Effective as of 01-JAN-21

NOVO, MEGAN, MD

Provider ID: N/A

📍 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-MAY-23

NOVO, MEGAN, MD

Provider ID: N/A

📍 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-JAN-23

REDDY, JOSEPH, MD†

Provider ID: N/A

📍 6699 ALVARADO RD STE
2301
SAN DIEGO, CA 92120
Effective as of 01-JUL-22

REDDY, JOSEPH, MD†

Provider ID: N/A

📍 6699 ALVARADO RD STE
2301
SAN DIEGO, CA 92120
Effective as of 01-JAN-14

REDDY, JOSEPH, MD†

C1. 网络提供者名单

专科护理医生

Provider ID: N/A

6699 ALVARADO RD STE
2301

SAN DIEGO, CA 92120
Effective as of 01-AUG-20

SCHAEFFER, CYNTHIA, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-JAN-21

SCHAEFFER, CYNTHIA, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-SEP-15

SCHAEFFER, CYNTHIA, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-APR-21

SHAFFER, KATHERINE, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-OCT-18

SHAFFER, KATHERINE, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-JAN-21

SHAFFER, KATHERINE, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-MAR-19

SHAH, SHAILJA, MD

Provider ID: N/A

6655 ALVARADO RD

SAN DIEGO, CA 92120

Effective as of 01-FEB-24

SHAH, SHAILJA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-21

SHPANER, ALEXANDER, MD†

Provider ID: N/A

6719 ALVARADO RD STE
206

SAN DIEGO, CA 92120

Effective as of 01-SEP-22

STIPHO, SALLY, MD†

Provider ID: N/A

4060 4TH AVE STE 240
SAN DIEGO, CA 92103

Effective as of 01-SEP-20

SYAL, GAURAV, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

SYAL, GAURAV, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

THOMAS, CARLTON, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-JAN-21

THOMAS, CARLTON, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-JAN-14

THOMAS, CARLTON, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-SEP-15

THOMAS, CARLTON, MD†

Provider ID: N/A

1855 1ST AVE STE 200B
SAN DIEGO, CA 92101

Effective as of 01-MAR-16

YOUSSEF, FADY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

YOUSSEF, FADY, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

GENERAL DENTISTRY

MEHROTRA, SACHI, DDS

Provider ID: N/A

5830 OBERLIN DR STE 202
SAN DIEGO, CA 92121

Effective as of 01-DEC-23

GENERAL PRACTICE

MILLER, MIKAELA, MD

Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105

Effective as of 01-AUG-24

RECALDE, FRANCISCO, MD†

Provider ID: N/A

3811 EL CAJON BLVD
SAN DIEGO, CA 92105

C1. 网络提供者名单 专科护理医生

Effective as of 01-JAN-21

GENETICS MEDICAL

JONES, MARILYN, MD[†]

Provider ID: N/A

☐ 4910 DIRECTORS PL STE
200

SAN DIEGO, CA 92121

Effective as of 01-JUN-21

GYNECOLOGIC ONCOLOGY

BAHADOR, AFSHIN, MD

Provider ID: N/A

☐ 5030 CAMINO DE LA
SIESTA STE 204

SAN DIEGO, CA 92108

Effective as of 01-APR-23

DUGGAN, BRIDGETTE, MD

Provider ID: N/A

☐ 5030 CAMINO DE LA
SIESTA STE 204

SAN DIEGO, CA 92108

Effective as of 01-MAY-23

GYNECOLOGY

WILLIAMS, ALISA, MD[†]

Provider ID: N/A

☐ 5555 RESERVOIR DR STE
307

SAN DIEGO, CA 92120

Effective as of 01-JAN-20

HEARING AID DEALER / SUPPLIER

ANAYA, MANUEL, MA[†]

Provider ID: N/A

☐ 9340 CLAIREMONT MESA
BLVD STE D

SAN DIEGO, CA 92123

Effective as of 01-JAN-21

ANDERSON, ELAINE, MA[†]

Provider ID: N/A

☐ 9340 CLAIREMONT MESA
BLVD STE D

SAN DIEGO, CA 92123

Effective as of 01-SEP-22

ANDERSON, ELAINE, MA[†]

Provider ID: N/A

☐ 6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120

Effective as of 01-SEP-22

ANDERSON, ELAINE, MA[†]

Provider ID: N/A

☐ 6367 ALVARADO CT
SAN DIEGO, CA 92120

Effective as of 01-JAN-21

DANDURAND, JOHN, MA[†]

Provider ID: N/A

☐ 6367 ALVARADO CT
SAN DIEGO, CA 92120

Teleservice

Effective as of 01-JAN-21

DANDURAND, JOHN, MA[†]

Provider ID: N/A

☐ 9340 CLAIREMONT MESA
BLVD STE D

SAN DIEGO, CA 92123

Teleservice

Effective as of 01-MAY-22

DAVIS, KELLE, MA[†]

Provider ID: N/A

☐ 9340 CLAIREMONT MESA
BLVD

SAN DIEGO, CA 92123

Effective as of 01-JAN-21

DAVIS, KELLE, MA[†]

Provider ID: N/A

☐ 6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120

Effective as of 01-SEP-22

DAVIS, KELLE, MA[†]

Provider ID: N/A

☐ 9340 CLAIREMONT MESA
BLVD STE D

SAN DIEGO, CA 92123

Effective as of 01-SEP-22

GALLAGHER, JEFFERY, MA

Provider ID: N/A

☐ 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121

Effective as of 01-AUG-24

HEMATOLOGY / ONCOLOGY

AHMED, SYED, MD

Provider ID: N/A

☐ 7432 LA MANTANZA
SAN DIEGO, CA 92127

Effective as of 01-FEB-24

ANDREY, JEFFREY, MD[†]

Provider ID: N/A

☐ 3965 5TH AVE STE 230
SAN DIEGO, CA 92103

Effective as of 01-SEP-22

ANDREY, JEFFREY, MD[†]

Provider ID: N/A

☐ 3965 5TH AVE STE 230
SAN DIEGO, CA 92103*

Effective as of 01-APR-23

BASERI, BABAK, MD[†]

Provider ID: N/A

☐ 3965 5TH AVE STE 230
SAN DIEGO, CA 92103

Effective as of 01-APR-24

BASERI, BABAK, MD[†]

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103*
Effective as of 01-APR-23

BASERI, BABAK, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

BESSUDO, ALBERTO, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-NOV-21

CHEN, YU-WEI, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

COGGAN, JAMES, DO

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-NOV-22

EISENBERG, STEVEN, DO†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

FINDAKLY, DAWOOD, MD

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127*
Effective as of 01-OCT-24

FISHER, JENNIFER, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-JAN-14

FISHER, JENNIFER, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-DEC-08

FRAKES, LAURIE, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-NOV-21

MARJON, PHILIP, MD

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-APR-24

MARJON, PHILIP, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103*
Effective as of 01-APR-23

MESLEH SHAYEB, AKRAM, MD†

Provider ID: N/A

9333 GENESEE AVE STE
310
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

NGUYEN, ANTHONY, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-AUG-23

PARSI, HOOMAN, MD

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

QUINN, CATHERINE, MD

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-APR-23

RAZZAQUE, SAQIB, MD

Provider ID: N/A

7377 VIA CRESTA RD
SAN DIEGO, CA 92129
Effective as of 01-FEB-24

REDFERN, CHARLES, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-JAN-14

REDFERN, CHARLES, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-SEP-15

RICE, KRISTEN, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-SEP-15

C1. 网络提供者名单

专科护理医生

RICE, KRISTEN, MD[†]

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-JUN-11

SARWARI, NAWID, MD

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

SAUNDERS, PHILLIP, DO[†]

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103*
Effective as of 01-APR-23

SAUNDERS, PHILLIP, DO[†]

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-NOV-22

SCHWERKOSKE, JOHN, MD[†]

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

SCHWERKOSKE, JOHN, MD[†]

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

SCHWERKOSKE, JOHN, MD[†]

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-MAY-22

SHAIKH, ANWER, MD[†]

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

SHENOY, CASIE, MD[†]

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-FEB-18

SHIEH, MARIE, MD[†]

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-DEC-16

SULLIVAN, JESSICA, DO

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

SULLIVAN, JESSICA, DO

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-DEC-23

VENKATESWARAN, APARAJIT, MD

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127*
Effective as of 01-OCT-24

HEPATOLOGY

HASSANEIN, TAREK, MD

Provider ID: N/A

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126
Effective as of 01-JUN-24

HOSPICE AND PALLIATIVE MEDICINE

RUBENSIK, TAMARA, MD[†]

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-21

RUBENSIK, TAMARA, MD[†]

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-21

HOSPITALIST MD/DO

DJEKIC, KRISTINA, DO[†]

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

FIRESTEIN, CATHERINE, MD[†]

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

HAMMOND, CHARLES, MD[†]

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-21

SHINDO, YURI, MD[†]

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

TONG, ALEXANDER, MD

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

YANG, BENJAMIN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

YASSIN, HAZEM, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

INFECTIOUS DISEASE

ALDOUS, JEANNETTE, MD†

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-JUL-22

CAPERNA, JOSEPH, MD†

Provider ID: N/A

2333 1ST AVE STE 104
SAN DIEGO, CA 92101
Effective as of 01-JUL-21

KUPPALLI, KRUTIKA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

MARTIN, THOMAS, MD†

Provider ID: N/A

4168 FRONT ST FL 3
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

MARTIN, THOMAS, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

RAMIREZSANCHEZ, CLAUDIA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

INTERNAL MEDICINE

AIZIN, VITALI, MD

Provider ID: N/A

3802 NATIONAL AVE
SAN DIEGO, CA 92113*
Effective as of 01-OCT-23

AL-SALEH, YADANI, MD†

Provider ID: N/A

3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Effective as of 01-MAR-23

BALL, SHELDON, MD

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-OCT-22

BALL, SHELDON, MD

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-OCT-22

BRAZEL, DANIELLE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

BRAZEL, DANIELLE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

CHAU, JOHN, MD†

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-MAY-23

CHAU, JOHN, MD†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-MAY-23

CHONGKRAIRATANAKUL, TEPSIRI, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-MAY-24

CHUNG, KIYON, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103*
Effective as of 01-NOV-12

CSAPOCZI, PETER, MD

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114
Teleservice
Effective as of 01-JAN-21

DASHI, ARBEN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

DAVIS, JASON, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DAVIS, JASON, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

DAVIS, JASON, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-NOV-23

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-NOV-16

GADIYARAM, VARUNA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

GELBERG, ANNA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

GRUNVALD, EDUARDO, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

GRUNVALD, EDUARDO, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Effective as of 01-DEC-21

HAMMES, JOHN, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-NOV-23

HAMMES, JOHN, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

HASTIE, ELIZABETH, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

JAIN, SUPRABHA, MD

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-OCT-22

JEBAIN, JEBAIN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

JEBAIN, JEBAIN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

KATSNELSON, MARCELLA, DO

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

KOOKOOTSEDES, GAYLE, MD†

Provider ID: N/A

3633 CAMINO DEL RIO S
STE 300
SAN DIEGO, CA 92108
Effective as of 01-MAR-21

LAMANTIA, MICHELE, MD†

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114*
Effective as of 01-AUG-17

LEVIN, MARINA, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-SEP-24

LEVIN, MARINA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-24

LIU, ANDREW, MD

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

LIU, ANDREW, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
100&102
SAN DIEGO, CA 92115
Effective as of 01-SEP-23

LIU, ANDREW, MD

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

C1. 网络提供者名单 专科护理医生

LUND, GUY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-MAY-24

MARTINEZ, ARMANDO, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

MOOLANI, UJJALA, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-MAY-23

MOOLANI, UJJALA, MD

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

NAMAZY, DAVID, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-JAN-24

NARAYANAN, MEENA, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114*
Effective as of 01-JAN-21

NGUYEN, VIET, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-OCT-20

NGUYEN, TRI, MD†

Provider ID: N/A

4206 44TH ST
SAN DIEGO, CA 92115*

Teleservice

Effective as of 01-SEP-22

NOKES, BRANDON, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

PITT, WILLIAM, MD†

Provider ID: N/A

6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120
Effective as of 01-JAN-23

TANTISIRA, LALITA, MD†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

TANTISIRA, LALITA, MD†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

TOPPEN, WILLIAM, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

TRIVEDI, MEHUL, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

TRIVEDI, MEHUL, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

YANG, JENNY, MD†

Provider ID: N/A

4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
Effective as of 01-AUG-21

YANG, JENNY, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

INTERNAL MEDICINE CRITICAL CARE MEDICINE

BOROK, ZEA, MD†

Provider ID: N/A

4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

BOROK, ZEA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

BOROK, ZEA, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

JAFFE, GILAD, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

C1. 网络提供者名单 专科护理医生

JAFFE, GILAD, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-SEP-23

MERCANDETTI, ALEX, MD†

Provider ID: N/A

3965 5TH AVE STE 430
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-19

SULLIVAN, LAUREN, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

SULLIVAN, LAUREN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

SULLIVAN, LAUREN, MD

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-SEP-23

INTERVENTIONAL CARDIOLOGY

CARAMBAS, CLARITA, MD†

Provider ID: N/A

9190 MIRA MESA BLVD
SAN DIEGO, CA 92126
Effective as of 01-SEP-22

CHUNG, KIYON, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103

Effective as of 01-JUL-22

CRUZ RODRIGUEZ, JOSE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

FRIEDMAN, RICHARD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

FRIEDMAN, RICHARD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

GLASSMAN, JERROLD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

GLASSMAN, JERROLD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

7901 FROST ST
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-MAR-13

JOHN, ALAN, MD

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-MAY-23

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

MULLVAIN, JEFFRY, MD†

Provider ID: N/A

4060 4TH AVE STE 500
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

NGUYEN, BRYANT, MD†

Provider ID: N/A

4440 EUCLID AVE STE A
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

PITT, WILLIAM, MD†

Provider ID: N/A

6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120
Effective as of 01-SEP-15

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

412 WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-22

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-DEC-22

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-MAY-23

SALAMI, ALI, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

SCLAR, CRAIG, MD

Provider ID: N/A

3880 MURPHY CANYON
RD STE 120
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-DEC-23

SCLAR, CRAIG, MD

Provider ID: N/A

7830 CLAIREMONT MESA
BLVD STE 100
SAN DIEGO, CA 92111
Effective as of 01-MAR-24

SCOTT, EMILY, MD

Provider ID: N/A

40604TH AVE., SUITE 500
SAN DIEGO, CA 92103
Effective as of 01-SEP-24

SHAH, KULIN, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-APR-23

SHEREV, DIMITRI, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-JAN-24

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-APR-23

LICENSED CLINICAL SOCIAL WORKER

ALVAREZ, DIANA, LCSW

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-APR-21

BASHAM, CLAUDIA, LCSW

Provider ID: N/A

3025 BEYER BLVD STE E101
SAN DIEGO, CA 92154
Teleservice
Effective as of 01-NOV-21

BIGGER, ALAINA, LCSW

Provider ID: N/A

4849 RONSON CT STE 207
SAN DIEGO, CA 92111
Effective as of 01-AUG-23

BROWN, EDEN, LCSW†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-FEB-22

CAZARES, DARIANA, LCSW

Provider ID: N/A

4690 EL CAJON BLVD

SAN DIEGO, CA 92115
Effective as of 01-SEP-24

DIAZ, JAENAI, LCSW

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

DSOUZA, NICOLE, LCSW†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ESCAMILLA, KARLA, LCSW†

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-DEC-21

GONZALEZ, ADRIANA, LCSW

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

GONZALEZ, ADRIANA, LCSW

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

HAMM, DEANNA, LCSW

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

JASSO-RAMIREZ, MARTHA, LCSW

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

C1. 网络提供者名单 专科护理医生

Effective as of 01-SEP-21

KHAMISA, SORAIYA, LCSW

Provider ID: N/A

4520 EXECUTIVE DR STE A
SAN DIEGO, CA 92121

Effective as of 01-JUN-23

LOWE, LINDSAY, LCSW

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

RABBAN, DIANA, LCSW

Provider ID: N/A

286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

Teleservice

Effective as of 01-NOV-22

SACHS, MELISSA, LCSW†

Provider ID: N/A

4690 EL CAJON BLVD
SAN DIEGO, CA 92115

Teleservice

Effective as of 01-MAR-21

SCHWARTZMAN, BENJAMIN, LCSW

Provider ID: N/A

4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-JAN-23

SCHWARTZMAN, BENJAMIN, LCSW

Provider ID: N/A

4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-JAN-23

SCHWARTZMAN, BENJAMIN,

LCSW

Provider ID: N/A

4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-FEB-23

SCHWARTZMAN, BENJAMIN, LCSW

Provider ID: N/A

4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-DEC-22

TABRIZI, SYAMAK, LCSW

Provider ID: N/A

286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

Effective as of 01-AUG-24

WRIGHT, STEPHANIE, LCSW

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126

Effective as of 01-JAN-24

LICENSED PROFESSIONAL CLINICAL COUNSELOR

TITOVA, ANASTASIA, LPCC

Provider ID: N/A

4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-JAN-23

TITOVA, ANASTASIA, LPCC

Provider ID: N/A

4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-FEB-23

MARRIAGE FAMILY THERAPIST

GULOTTA, SAMANTHA, MFT

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131

Effective as of 01-JUN-23

HOLLEMAN, KEVIN, DO

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123

Effective as of 01-APR-23

HOLLEMAN, KEVIN, DO

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123

Effective as of 01-JUN-24

KUEK, JOHN, MFT

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-APR-21

LIDLAW, JOHN, MFT

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126

Effective as of 01-JAN-24

SCHLOSSER, TARA, MFT

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-AUG-23

SUTTLE, CAROLYN, MFT†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

VILLAGOMEZ, JOSHUA, MFT
Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

ZAYAS, MARIO, MFT
Provider ID: N/A

3025 BEYER BLVD STE
E-101
SAN DIEGO, CA 92154
Effective as of 01-JAN-21

MATERNAL AND FETAL MEDICINE

AHN, JENNIFER, MD†
Provider ID: N/A

12264 EL CAMINO REAL
STE 204
SAN DIEGO, CA 92130
Effective as of 01-FEB-21

BERGGREN, ERICA, MD†
Provider ID: N/A

12264 EL CAMINO REAL
STE 204
SAN DIEGO, CA 92130
Effective as of 01-JAN-21

DOWLING, DAVID, MD†
Provider ID: N/A

12264 EL CAMINO REAL
STE 204
SAN DIEGO, CA 92130
Effective as of 01-JAN-21

EMERUWA, UKACHI, MD
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

EMERUWA, UKACHI, MD
Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

EMERUWA, UKACHI, MD
Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

GOLLIN, YVONNE, MD†
Provider ID: N/A

12264 EL CAMINO REAL
STE 204
SAN DIEGO, CA 92130
Effective as of 01-JAN-21

MEDICAL ONCOLOGY

EISENBERG, STEVEN, DO†
Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

FRAKES, LAURIE, MD†
Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Teleservice

Effective as of 01-JAN-21

KOSSMAN, STEVEN, MD†
Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-SEP-15

SHAIKH, ANWER, MD†
Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103*
Effective as of 01-APR-23

SHENOY, CASIE, MD†
Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-JAN-18

NEPHROLOGY

AL-DAHMAN, ZAID, MD
Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

AL-DAHMAN, ZAID, MD
Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

AL-DAHMAN, ZAID, MD
Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-MAY-23

AL-DAHMAN, ZAID, MD
Provider ID: N/A

6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-MAY-23

BEHREND, TERRY, MD†
Provider ID: N/A

6402 EL CAJON BLVD STE
100

C1. 网络提供者名单 专科护理医生

SAN DIEGO, CA 92115
Effective as of 01-MAR-16

BEHREND, TERRY, MD†

Provider ID: N/A

📍 6402 EL CAJON BLVD STE 100

SAN DIEGO, CA 92115
Effective as of 01-JAN-21

BEHREND, TERRY, MD†

Provider ID: N/A

📍 6402 EL CAJON BLVD STE 100

SAN DIEGO, CA 92115
Effective as of 01-JAN-21

BEHREND, TERRY, MD†

Provider ID: N/A

📍 6402 EL CAJON BLVD STE 100

SAN DIEGO, CA 92115
Effective as of 01-JUL-22

BEHREND, TERRY, MD†

Provider ID: N/A

📍 8010 FROST ST STE 510
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

BOISKIN, MARK, MD

Provider ID: N/A

📍 9610 GRANITE RIDGE DR
STE B

SAN DIEGO, CA 92123
Effective as of 01-JAN-24

CALDERONMOLINA, JUAN, MD

Provider ID: N/A

📍 9610 GRANITE RIDGE DR
STE B

SAN DIEGO, CA 92123
Effective as of 01-JAN-24

CHONGKRAIRATANAKUL, TEPSIRI, MD

Provider ID: N/A

📍 8010 FROST ST STE 100
SAN DIEGO, CA 92123

Effective as of 01-JUN-24

CHONGKRAIRATANAKUL, TEPSIRI, MD†

Provider ID: N/A

📍 8010 FROST ST STE 510
SAN DIEGO, CA 92123

Effective as of 01-SEP-21

DAVIS, JASON, MD†

Provider ID: N/A

📍 8010 FROST ST STE 510
SAN DIEGO, CA 92123

Effective as of 01-SEP-20

DAVIS, JASON, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Effective as of 01-JUL-22

DAVIS, JASON, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

DAVIS, JASON, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Effective as of 01-NOV-23

DAVIS, JASON, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Effective as of 01-MAR-15

DAVIS, JASON, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

📍 8010 FROST ST STE 510
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

FARAVARDEH, ARMAN, MD

Provider ID: N/A

📍 8010 FROST ST STE 100
SAN DIEGO, CA 92123

Effective as of 01-JUL-24

FARAVARDEH, ARMAN, MD

Provider ID: N/A

📍 8010 FROST ST STE 100
SAN DIEGO, CA 92123

Effective as of 01-JAN-24

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

📍 8010 FROST ST STE 510
SAN DIEGO, CA 92123

Effective as of 01-NOV-16

FARAVARDEH, ARMAN, MD

Provider ID: N/A

📍 8010 FROST ST STE 100
SAN DIEGO, CA 92123

Effective as of 01-JUN-24

HAMMES, JOHN, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103*

Effective as of 01-JAN-24

HAMMES, JOHN, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103

C1. 网络提供者名单 专科护理医生

Effective as of 01-JUL-22

HAMMES, JOHN, MD[†]

Provider ID: N/A

📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-MAR-15

HUSSAIN, SHAHID, MD

Provider ID: N/A

📍 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-JUL-24

HUSSAIN, SHAHID, MD

Provider ID: N/A

📍 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-AUG-23

HUSSAIN, SHAHID, MD

Provider ID: N/A

📍 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-APR-24

HUSSAIN, SHAHID, MD

Provider ID: N/A

📍 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-JUL-24

HUSSAIN, SHAHID, MD

Provider ID: N/A

📍 6402 EL CAJON BLVD STE
100

SAN DIEGO, CA 92115

Teleservice

Effective as of 01-MAY-24

KHAING, KATHY, MD[†]

Provider ID: N/A

📍 8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

LE, CHARLES, MD[†]

Provider ID: N/A

📍 4440 EUCLID AVE STE A
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

LE, CHARLES, MD[†]

Provider ID: N/A

📍 4440 EUCLID AVE
SAN DIEGO, CA 92115
Effective as of 01-JUL-21

LUND, GUY, MD

Provider ID: N/A

📍 8010 FROST ST STE 100
SAN DIEGO, CA 92123
Effective as of 01-JUL-24

LUND, GUY, MD[†]

Provider ID: N/A

📍 8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-NOV-16

LUND, GUY, MD

Provider ID: N/A

📍 8010 FROST ST STE 100
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

NAMAZY, DAVID, MD[†]

Provider ID: N/A

📍 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115

Effective as of 01-JUL-22

NAMAZY, DAVID, MD[†]

Provider ID: N/A

📍 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-JUN-23

NAMAZY, DAVID, MD[†]

Provider ID: N/A

📍 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-APR-17

NGUYEN, VIET, MD[†]

Provider ID: N/A

📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

PATEL, BIJAL, MD

Provider ID: N/A

📍 8010 FROST ST STE 100
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

QUEVEDO, JUAN, MD[†]

Provider ID: N/A

📍 995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-AUG-21

QUEVEDO, JUAN, MD[†]

Provider ID: N/A

📍 995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-SEP-20

QUEVEDO, JUAN, MD[†]

Provider ID: N/A

📍 995 GATEWAY CENTER

C1. 网络提供者名单 专科护理医生

WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-NOV-23

QUEVEDO, JUAN, MD†

Provider ID: N/A
☑ 995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-SEP-22

RAHIMI, SINA, DO†

Provider ID: N/A
☑ 4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-MAR-23

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A
☑ 4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

SETHI, SUPREET, MD

Provider ID: N/A
☑ 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

STEER, DYLAN, MD†

Provider ID: N/A
☑ 4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

THOMAS, THEODORE, MD†

Provider ID: N/A
☑ 4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

ZHONG, YAN, MD†

Provider ID: N/A
☑ 4060 4TH AVE STE 220

SAN DIEGO, CA 92103
Teleservice
Effective as of 01-NOV-22

ZHONG, YAN, MD†

Provider ID: N/A
☑ 4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-MAY-22

ZHONG, YAN, MD†

Provider ID: N/A
☑ 4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JUL-22

ZHONG, YAN, MD†

Provider ID: N/A
☑ 4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-MAR-22

NEUROLOGY

BINDAL, ANKUR, MD†

Provider ID: N/A
☑ 6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

BOBO, JERRY, MD†

Provider ID: N/A
☑ 6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

FREDERICK, ALIYA, MD

Provider ID: N/A
☑ 6655 ALVARADO RD

SAN DIEGO, CA 92120
Effective as of 01-FEB-24

GRISOLIA, JAMES, MD†

Provider ID: N/A
☑ 4033 3RD AVE STE 410
SAN DIEGO, CA 92103
Effective as of 01-SEP-20

GUPTA, VISHAL, DO

Provider ID: N/A
☑ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

GUTFLAIS, ERIC, MD

Provider ID: N/A
☑ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HAAS, RICHARD, MD

Provider ID: N/A
☑ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HAAS, RICHARD, MD†

Provider ID: N/A
☑ 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

HAAS, RICHARD, MD†

Provider ID: N/A
☑ 4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
Effective as of 01-OCT-21

HEADLEY, ALISON, MD

Provider ID: N/A
☑ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

C1. 网络提供者名单 专科护理医生

HUSSAIN, SHAHID, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115

Teleservice

Effective as of 01-MAR-24

KARANJIA, NAVAZ, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

KARANJIA, NAVAZ, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

KHAMISHON, BORIS, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2301
SAN DIEGO, CA 92120

Effective as of 01-JAN-21

KHAMISHON, BORIS, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2301
SAN DIEGO, CA 92120

Effective as of 01-AUG-20

KHAMISHON, BORIS, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2301
SAN DIEGO, CA 92120

Effective as of 01-JAN-14

KHAMISHON, BORIS, MD†

Provider ID: N/A

6699 ALVARADO RD STE

2301

SAN DIEGO, CA 92120

Effective as of 01-SEP-22

KURESHI, SOHAIB, MD†

Provider ID: N/A

3750 CONVOY ST STE 301
SAN DIEGO, CA 92111

Effective as of 01-SEP-20

LASKER, BRUCE, MD†

Provider ID: N/A

3737 MORAGA AVE STE A5
SAN DIEGO, CA 92117

Effective as of 01-FEB-07

MALIK, SUDHIR, MD†

Provider ID: N/A

4033 3RD AVE STE 420
SAN DIEGO, CA 92103

Effective as of 01-SEP-22

MALIK, SUDHIR, MD†

Provider ID: N/A

4033 3RD AVE STE 420
SAN DIEGO, CA 92103

Effective as of 01-DEC-20

MALIK, SUDHIR, MD†

Provider ID: N/A

4033 3RD AVE STE 420
SAN DIEGO, CA 92103

Effective as of 01-OCT-19

QAYOUMI, WALI, MD†

Provider ID: N/A

4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121

Effective as of 01-OCT-21

QAYOUMI, WALI, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

RAYNOWSKA, JENELLE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

RAYNOWSKA, JENELLE, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-APR-23

RIGGINS, NINA, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

SCHORR, EMILY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-MAR-24

SCHORR, EMILY, MD

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-MAR-24

SCHORR, EMILY, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAR-24

SCHULTE, JESSICA, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

SIAVOSHI, SARA, DO

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SIAVOSHI, SARA, DO†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

SIAVOSHI, SARA, DO†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-FEB-22

WIEGAND, SARAH, DO

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

NEUROLOGY CHILD

SATTAR, SHIFTEH, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

NUCLEAR MEDICINE

ALEXANDER, SINDU, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ALEXANDER, SINDU, MD†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CHOI, ESTHER, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CHOI, ESTHER, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

GAMIE, SHERIEF, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

GAMIE, SHERIEF, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

GAMIE, SHERIEF, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

KIPPER, MICHAEL, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

METH, ERNIE, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 1
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-NOV-21

SHARIF TABRIZI, AHMAD, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

SHARIF TABRIZI, AHMAD, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER, MD

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

ASLIAN, AZITA, MD†

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114*
Effective as of 01-JUL-24

ASLIAN, AZITA, MD†

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-SEP-22

BLAKE, GARY, MD†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

BRAHMBHATT, BHOOMI, MD

Provider ID: N/A

2918 5TH AVE STE 100
SAN DIEGO, CA 92103
Effective as of 01-APR-23

C1. 网络提供者名单

专科护理医生

CARDENAS, MICHAEL, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

CARDENAS, MICHAEL, MD

Provider ID: N/A

2918 5TH AVE STE 100
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

CARDENAS, MICHAEL, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

CASTILLO, MARIA, MD†

Provider ID: N/A

7930 FROST ST STE 103
SAN DIEGO, CA 92123
Effective as of 01-FEB-21

CHAC, RICK, MD†

Provider ID: N/A

550 WASHINGTON ST STE
331
SAN DIEGO, CA 92103
Effective as of 01-NOV-22

CHUAN, SANDY, MD†

Provider ID: N/A

11425 EL CAMINO REAL
SAN DIEGO, CA 92130
Effective as of 01-FEB-16

DAVIS, TRACIE, MD

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

DELCORE, LAURA, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

DELCORE, LAURA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

DELCORE, LAURA, MD†

Provider ID: N/A

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Effective as of 01-AUG-22

DELCORE, LAURA, MD†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-AUG-22

DELCORE, LAURA, MD†

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

FOLCHTORRES-AGUIAR, BEATRIZ, MD†

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-AUG-22

FOYOUZI-YOUSEFI, NASTARAN, MD

Provider ID: N/A

11425 EL CAMINO REAL
SAN DIEGO, CA 92130
Effective as of 01-JUN-23

FRUGONI, GINA, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

GELLENS, ANDREW, MD†

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-NOV-21

HARVEY, SCOTT, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-MAY-21

HARVEY, SCOTT, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-21

HUI, KIM, MD†
Provider ID: N/A

2918 5TH AVE STE 100
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

JAIME, CINDY, MD†
Provider ID: N/A

2918 5TH AVE STE 100
SAN DIEGO, CA 92103
Effective as of 01-JUN-18

JENKINS, ENCHANTA, MD†
Provider ID: N/A

4050 BEYER BLVD
SAN DIEGO, CA 92173
Effective as of 01-JUN-22

MACKAY, GILLIAN, MD
Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-DEC-23

MACKAY, GILLIAN, MD
Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-DEC-23

MELENDEZ, ARIANA, MD
Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

MELENDEZ, ARIANA, MD
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

MELENDEZBERRIOS, IARA, MD

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-AUG-24

MENDEZ, DIEGO, MD

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-APR-23

MEURICE, MARIELLE

ERENDIRA LUCILLE, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

MEURICE, MARIELLE

ERENDIRA LUCILLE, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

PARK, SUSANNA, MD

Provider ID: N/A

11425 EL CAMINO REAL
SAN DIEGO, CA 92130
Effective as of 01-APR-16

PHAN, TIFFANI, MD

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-JUL-24

PICKETT, CHARLOTTE, MD

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130

Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

PINSON, KELSEY, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

PINSON, KELSEY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

PINSON, KELSEY, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
200
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

C1. 网络提供者名单 专科护理医生

TAJРАН, DEENA, MD†

Provider ID: N/A

📍 10737 CAMINO RUIZ STE 114
SAN DIEGO, CA 92126
Effective as of 01-JAN-21

THOMSON, SAMANTHA, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

THOMSON, SAMANTHA, MD†

Provider ID: N/A

📍 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

TRUJILLO, JENNIFER, DO†

Provider ID: N/A

📍 950 S EUCLID AVE
SAN DIEGO, CA 92114*
Effective as of 01-JUL-22

VAN DEN HEUVEL, KELLY, MD†

Provider ID: N/A

📍 2918 5TH AVE STE 100
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

VU, LAC, MD

Provider ID: N/A

📍 5555 RESERVOIR DR STE
205
SAN DIEGO, CA 92120
Effective as of 01-JUL-23

WILLIAMS, ALISA, MD†

Provider ID: N/A

📍 5555 RESERVOIR DR STE
307
SAN DIEGO, CA 92120*
Effective as of 01-JAN-20

OCCUPATIONAL MEDICINE

JACKSON, CODY, MD

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-MAY-22

OCCUPATIONAL THERAPIST

ARRIESGADO, MINNETT, OT

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

BROWN, JOHNNY, OT

Provider ID: N/A

📍 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Effective as of 01-AUG-24

CHOW, JENNIFER, OT

Provider ID: N/A

📍 3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111
Effective as of 01-DEC-23

CHOW, JENNIFER, OT

Provider ID: N/A

📍 3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111
Effective as of 01-DEC-23

CUA, NICOLE, OT

Provider ID: N/A

📍 3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111
Effective as of 01-MAR-24

FARHAT, KELLI, OT

Provider ID: N/A

📍 3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111
Effective as of 01-APR-22

HUDSON, BONNIE, OT

Provider ID: N/A

📍 88 E BONITA RD
STE C
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

HUDSON, BONNIE, OT

Provider ID: N/A

📍 4445 EASTGATE MALL STE
103
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

LOPEZ, ALYSSA-NICOLE, OT

Provider ID: N/A

📍 3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111
Effective as of 01-DEC-23

MANECKE, KRISTEN, OT

Provider ID: N/A

📍 9333 GENESEE AVE STE
350B
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

OPHTHALMOLOGY

ARNETT, JUSTIN, MD

Provider ID: N/A

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

ARNETT, JUSTIN, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

C1. 网络提供者名单 专科护理医生

ARNETT, JUSTIN, MD

Provider ID: N/A

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Effective as of 01-SEP-23

AVALLONE, THOMAS, MD†

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103

Effective as of 01-AUG-24

AVALLONE, THOMAS, MD

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121

Effective as of 01-MAR-24

BINDER, NICHOLAS, MD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Effective as of 01-MAR-18

BINDER, NICHOLAS, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Effective as of 01-JAN-21

BOLO, KYLE, MD

Provider ID: N/A

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

BOLO, KYLE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

BOLO, KYLE, MD

Provider ID: N/A

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Effective as of 01-SEP-23

CHANG, TOM, MD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

CHOPLIN, NEIL, MD†

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103

Effective as of 01-FEB-07

CHOPLIN, NEIL, MD†

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103

Effective as of 01-APR-22

CHOPLIN, NEIL, MD†

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103

Effective as of 01-JUL-21

COCKERHAM, KIMBERLY, MD

Provider ID: N/A

3590 CAMINO DEL RIO N
STE 200
SAN DIEGO, CA 92108

Effective as of 01-MAY-24

COURIS, MICHAEL, MD†

Provider ID: N/A

3969 4TH AVE STE 301
SAN DIEGO, CA 92103

Effective as of 01-FEB-07

CU-UNJIENG, ANDREW, MD†

Provider ID: N/A

4060 4TH AVE STE 405
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

ESLANI, MEDI, MD

Provider ID: N/A

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

ESLANI, MEDI, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

C1. 网络提供者名单 专科护理医生

ESLANI, MEDI, MD

Provider ID: N/A

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

GUALTIERI, CHRISTOPHER, MD†

Provider ID: N/A

📍 3969 4TH AVE STE 300
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

GUALTIERI, CHRISTOPHER, MD†

Provider ID: N/A

📍 3969 4TH AVE STE 300
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

HAAK, LOGAN, MD†

Provider ID: N/A

📍 1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
Effective as of 01-JAN-24

HANDLER, SUZANNE, MD†

Provider ID: N/A

📍 3969 4TH AVE STE 301
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

HUDSON, HENRY, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-22

HUDSON, HENRY, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-APR-23

HUYNH, PAUL, MD†

Provider ID: N/A

📍 4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-22

HUYNH, PAUL, MD†

Provider ID: N/A

📍 4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JAN-21

HUYNH, PAUL, MD†

Provider ID: N/A

📍 4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JAN-21

JACOBSEN, BRADLEY, MD

Provider ID: N/A

📍 7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123
Effective as of 01-OCT-23

JACOBSEN, BRADLEY, MD

Provider ID: N/A

📍 7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

KEEFE, KELLY, MD†

Provider ID: N/A

📍 3969 4TH AVE STE 301
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

KHAN, FAHAD, MD†

Provider ID: N/A

📍 233 LEWIS ST

SAN DIEGO, CA 92103
Effective as of 01-SEP-22

KHAN, FAHAD, MD†

Provider ID: N/A

📍 233 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-22

KHATIB, NORA, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 640
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

KHATIB, NORA, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 640
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

KYTASTY, CHRISTINA, DO

Provider ID: N/A

📍 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-MAY-24

KYTASTY, CHRISTINA, DO

Provider ID: N/A

📍 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-MAY-24

LANG, PAUL, MD

Provider ID: N/A

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

LANG, PAUL, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

C1. 网络提供者名单 专科护理医生

MCGRAW, JOSEPH, MD†

Provider ID: N/A

📄 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-APR-23

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JUN-18

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-MAR-23

MORTON, ASA, MD†

Provider ID: N/A

📄 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-MAY-24

MORTON, ASA, MD†

Provider ID: N/A

📄 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

MORTON, ASA, MD

Provider ID: N/A

📄 3939 3RD AVE BLDG B
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

MORTON, ASA, MD

Provider ID: N/A

📄 3939 3RD AVE STE B
SAN DIEGO, CA 92103
Effective as of 01-APR-24

MORTON, ASA, MD†

Provider ID: N/A

📄 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-APR-22

MOSS, JASON, MD†

Provider ID: N/A

📄 5555 RESERVOIR DR STE
201
SAN DIEGO, CA 92120
Effective as of 01-JAN-23

NGUYEN, VINCENT, MD†

Provider ID: N/A

📄 7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123

Effective as of 01-APR-20

NGUYEN, VINCENT, MD

Provider ID: N/A

📄 7695 CARDINAL CT STE S
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

PATEL, SARJAN, MD†

Provider ID: N/A

📄 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PATEL, GITANE, MD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-MAR-18

PATEL, SARJAN, MD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-14

PATEL, SARJAN, MD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-AUG-20

PATEL, GITANE, MD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

PATEL, SARJAN, MD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

PERRY, ARTHUR, MD

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-APR-23

PHAN, RYAN, MD

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-JAN-24

PHAN, RYAN, MD

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-APR-23

PHAN, RYAN, MD†

Provider ID: N/A

10737 CAMINO RUIZ
SAN DIEGO, CA 92126
Effective as of 01-OCT-22

PHAN, RYAN, MD†

Provider ID: N/A

10737 CAMINO RUIZ
SAN DIEGO, CA 92126
Effective as of 01-SEP-22

PHAN, RYAN, MD

Provider ID: N/A

10737 CAMINO RUIZ STE
100
SAN DIEGO, CA 92126
Effective as of 01-APR-23

PONS, MAURICIO, MD

Provider ID: N/A

1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Effective as of 01-MAY-23

PRABHU, SUJATA, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

PRABHU, SUJATA, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-AUG-20

PRABHU, SUJATA, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-FEB-18

PRABHU, SUJATA, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

PRABHU, SUJATA, MD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PRABHU, SUJATA, MD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-APR-22

PRABHU, SUJATA, MD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-DEC-20

PUIG LLANO, MANUEL, MD

Provider ID: N/A

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

ROBINSON, FANE, MD

Provider ID: N/A

7695 CARDINAL CT STE S
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

ROBINSON, FANE, MD†

Provider ID: N/A

7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123
Effective as of 01-SEP-15

ROESKE, RICHMOND, MD

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

ROESKE, RICHMOND, MD

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

ROESKE, RICHMOND, MD

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

ROESKE, RICHMOND, MD

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-JUL-24

ROESKE, RICHMOND, MD

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-SEP-23

C1. 网络提供者名单 专科护理医生

SATTERFIELD, KELLIE, MD

Provider ID: N/A

📄 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121

Effective as of 01-JUL-24

SATTERFIELD, KELLIE, MD

Provider ID: N/A

📄 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121

Effective as of 01-MAR-24

SATTERFIELD, KELLIE, MD

Provider ID: N/A

📄 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121

Effective as of 01-DEC-23

SATTERFIELD, KELLIE, MD

Provider ID: N/A

📄 3939 3RD AVE
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

SHEILS, CATHERINE, MD

Provider ID: N/A

📄 3939 3RD AVE
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

📄 3939 3RD AVE
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

📄 3939 3RD AVE
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

SHEILS, CATHERINE, MD

Provider ID: N/A

📄 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121

Effective as of 01-JUL-24

SHEILS, CATHERINE, MD

Provider ID: N/A

📄 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121

Effective as of 01-FEB-24

SHEILS, CATHERINE, MD

Provider ID: N/A

📄 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121

Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

📄 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121

Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

📄 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121

Effective as of 01-JAN-24

SHOJI, MARISSA, MD

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

SHOJI, MARISSA, MD

Provider ID: N/A

📄 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

SMITH, MARK, MD

Provider ID: N/A

📄 7695 CARDINAL CT STE S
SAN DIEGO, CA 92123

Effective as of 01-JAN-23

SMITH, WILLIAM, MD

Provider ID: N/A

📄 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121

Effective as of 01-JUL-24

SMITH, WILLIAM, MD

Provider ID: N/A

📄 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121

Effective as of 01-DEC-23

SONG, DELU, MD

Provider ID: N/A

📄 7695 CARDINAL CT STE S
SAN DIEGO, CA 92123

Effective as of 01-JUN-24

SONG, DELU, MD

Provider ID: N/A

📄 7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123

Effective as of 01-OCT-23

SONG, DELU, MD

Provider ID: N/A

📄 7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123

Effective as of 01-DEC-23

C1. 网络提供者名单 专科护理医生

WARLEN, MARK, MD†

Provider ID: N/A

📍 3720 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

YAMADA, KENTARO, MD†

Provider ID: N/A

📍 1040 UNIVERSITY AVE STE
B209A
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

YAMADA, KENTARO, MD†

Provider ID: N/A

📍 1040 UNIVERSITY AVE STE
B209A
SAN DIEGO, CA 92103
Effective as of 01-DEC-22

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-JAN-21

ZHAO, TAILUN, MD

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-JAN-24

OPTOMETRIST

AOTO, KIM, OD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Effective as of 01-JAN-21

AOTO, KIM, OD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

AOTO, KIM, OD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

AOTO, KIM, OD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

AOTO, KIM, OD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

AOTO, KIM, OD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

DYER, SHARON, OD

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-FEB-24

EL-MOGHRABI, ROULA, OD†

Provider ID: N/A

📍 9855 ERMA RD STE 105
SAN DIEGO, CA 92131
Effective as of 01-SEP-22

HAN, SUL, OD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-DEC-22

HO, HOANG MINH, OD

Provider ID: N/A

📍 7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
Effective as of 01-JAN-21

HO, HOANG MINH, OD

Provider ID: N/A

📍 4206 44TH ST
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

HO, HOANG MINH, OD

Provider ID: N/A

📍 10737 CAMINO RUIZ STE
215-220
SAN DIEGO, CA 92126
Effective as of 01-JAN-21

JOMOC, CAITLIN, OD

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-FEB-24

JOMOC, CAITLIN, OD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

JULAZADEH, SARA, OD†

Provider ID: N/A

📍 3939 3RD AVE

C1. 网络提供者名单 专科护理医生

SAN DIEGO, CA 92103
Effective as of 01-SEP-23

KHALIL, VADY, OD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-NOV-22

KHALIL, VADY, OD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-NOV-22

KIM, PHILIP, OD†

Provider ID: N/A

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-MAR-22

MARR, RYAN, OD

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JUL-24

MARR, RYAN, OD

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-DEC-22

MARR, RYAN, OD

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-DEC-22

MARR, RYAN, OD

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-JUL-24

RING, ROBERT, OD

Provider ID: N/A

📍 13223 BLACK MOUNTAIN
RD STE 6
SAN DIEGO, CA 92129
Effective as of 01-FEB-24

SCHWAB, GARY, OD†

Provider ID: N/A

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

SCHWAB, GARY, OD†

Provider ID: N/A

📍 4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

TAUNTON, PHILIP, OD†

Provider ID: N/A

📍 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

TAUNTON, PHILIP, OD†

Provider ID: N/A

📍 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

TONNU, ANH, OD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

TONNU, ANH, OD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-AUG-24

TONNU, ANH, OD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

TONNU, ANH, OD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-JAN-21

TONNU, ANH, OD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

VINH, JOHN, OD†

Provider ID: N/A

📍 2240 E PLAZA BLVD
STE F AND G
SAN DIEGO, CA 92102
Effective as of 01-JAN-21

VINH, JOHN, OD†

Provider ID: N/A

📍 2240 E PLAZA BLVD
STE F AND G
SAN DIEGO, CA 92102
Effective as of 01-SEP-20

YU, CAROL, OD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

YU, CAROL, OD

Provider ID: N/A

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

YU, CAROL, OD

Provider ID: N/A

📍 16950 VIA TAZON

C1. 网络提供者名单

专科护理医生

SAN DIEGO, CA 92127
Effective as of 01-SEP-23

ZVANUT, DONALD, OD

Provider ID: N/A
📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-AUG-24

ORAL MAXILLOFACIAL SURGEON

ELI, BRADLEY, DMD

Provider ID: N/A
📍 5830 OBERLIN DR STE 202
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

OTOLARYNGOLOGY

ABDOU, RAMI, MD†

Provider ID: N/A
📍 5405 OBERLIN DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

BANTHIA, VISHAL, MD†

Provider ID: N/A
📍 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-AUG-21

BANTHIA, VISHAL, MD†

Provider ID: N/A
📍 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-SEP-21

BRUMUND, KEVIN, MD

Provider ID: N/A
📍 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

BRUMUND, KEVIN, MD

Provider ID: N/A
📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

BUSH, JAMES, MD†

Provider ID: N/A
📍 3805 FRONT ST
SAN DIEGO, CA 92103*
Effective as of 01-AUG-20

CALIFANO, JOSEPH, MD

Provider ID: N/A
📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A
📍 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

CALZADA, AUDREY, MD†

Provider ID: N/A
📍 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Effective as of 01-OCT-22

CALZADA, AUDREY, MD†

Provider ID: N/A
📍 5405 OBERLIN DR
SAN DIEGO, CA 92121
Teleservice

Effective as of 01-JAN-21

CALZADA, AUDREY, MD†

Provider ID: N/A
📍 5405 OBERLIN DR
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-OCT-19

CHANG, EDWARD, MD

Provider ID: N/A
📍 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Effective as of 01-AUG-24

CHANG, EDWARD, MD

Provider ID: N/A
📍 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Effective as of 01-SEP-24

CHANG, EDWARD, MD

Provider ID: N/A
📍 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Effective as of 01-MAR-24

CHANG, EDWARD, MD

Provider ID: N/A
📍 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Effective as of 01-SEP-24

COFFEY, CHARLES, MD

Provider ID: N/A
📍 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

COFFEY, CHARLES, MD

Provider ID: N/A
📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

C1. 网络提供者名单 专科护理医生

COFFEY, CHARLES, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

DECONDE, ADAM, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

DECONDE, ADAM, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

DECONDE, ADAM, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

DONALDSON, CHADWICK, MD†

Provider ID: N/A

4033 3RD AVE STE 104
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

DRISKILL, BRENT, MD†

Provider ID: N/A

4033 3RD AVE STE 104
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

DRISKILL, BRENT, MD†

Provider ID: N/A

4033 3RD AVE STE 104
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

FRIEDMAN, RICK, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

FRIEDMAN, RICK, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

FRIEDMAN, RICK, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

GUO, THERESA, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

GUO, THERESA, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

HAUFF, SAMANTHA, MD†

Provider ID: N/A

4282 GENESEE AVE STE
202
SAN DIEGO, CA 92117
Effective as of 01-MAY-22

C1. 网络提供者名单 专科护理医生

HAUFF, SAMANTHA, MD

Provider ID: N/A

4282 GENESEE AVE STE
201
SAN DIEGO, CA 92117
Effective as of 01-APR-23

HAUFF, SAMANTHA, MD

Provider ID: N/A

4282 GENESEE AVE STE
201
SAN DIEGO, CA 92117
Effective as of 01-JAN-23

HAUFF, SAMANTHA, MD†

Provider ID: N/A

4282 GENESEE AVE STE
202
SAN DIEGO, CA 92117
Effective as of 01-AUG-20

HAUFF, SAMANTHA, MD†

Provider ID: N/A

4282 GENESEE AVE STE
202
SAN DIEGO, CA 92117
Effective as of 01-JAN-21

HOM, DAVID, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

HOM, DAVID, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

HUSSEMAN, JACOB, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

HUSSEMAN, JACOB, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-AUG-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

KARI, ELINA, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

KARI, ELINA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

KARI, ELINA, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

C1. 网络提供者名单 专科护理医生

MAGIT, ANTHONY, MD[†]

Provider ID: N/A

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
Effective as of 01-OCT-20

MATSUOKA, AKIHIRO, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

MIYA, GARY, MD[†]

Provider ID: N/A

4060 4TH AVE STE 410
SAN DIEGO, CA 92103
Effective as of 01-JAN-18

NGUYEN, QUYEN, MD[†]

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

NGUYEN, QUYEN, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

NGUYEN, QUYEN, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

SALL, EDWARD, DDS

Provider ID: N/A

5471 KEARNY VILLA RD STE
201
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

SCHALCH LEPE, PAUL, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD[†]

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

TORCHINSKY, CYRUS, MD[†]

Provider ID: N/A

4060 4TH AVE STE 410
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

TORCHINSKY, CYRUS, MD[†]

Provider ID: N/A

4060 4TH AVE STE 410
SAN DIEGO, CA 92103
Effective as of 01-FEB-18

TORCHINSKY, CYRUS, MD[†]

Provider ID: N/A

4060 4TH AVE STE 410
SAN DIEGO, CA 92103*
Effective as of 01-SEP-15

VAHABZADEH-HAGH, ANDREW, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

VAHABZADEH-HAGH, ANDREW, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

VAHABZADEH-HAGH, ANDREW, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

WATSON, DEBORAH, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

WATSON, DEBORAH, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

WATSON, DEBORAH, MD[†]

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

C1. 网络提供者名单 专科护理医生

WEISSBROD, PHILIP, MD

Provider ID: N/A

☐ 200 W ARBOR DR STE 505
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD

Provider ID: N/A

☐ 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD

Provider ID: N/A

☐ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

YAN, CAROL, MD

Provider ID: N/A

☐ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

YAN, CAROL, MD

Provider ID: N/A

☐ 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

YAN, CAROL, MD

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

PATHOLOGY ANATOMIC CLINICAL

LIN, GRACE, MD†

Provider ID: N/A

☐ 200 W ARBOR DR

SAN DIEGO, CA 92103
Effective as of 01-FEB-22

MAHOOTI, SEPI, MD†

Provider ID: N/A

☐ 16835 W BERNARDO DR
STE 212
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-DEC-22

SONG, WEI, MD

Provider ID: N/A

☐ 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
Effective as of 01-JUL-23

STEPHENS, LAURA, MD

Provider ID: N/A

☐ 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
Effective as of 01-JUL-23

USMANI, AMENA, MD

Provider ID: N/A

☐ 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
Effective as of 01-APR-23

PEDIATRIC RADIOLOGY

DWEK, JERRY, MD†

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

DWEK, JERRY, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

DWEK, JERRY, MD†

Provider ID: N/A

☐ 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

EVORA, DARRYL, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

EVORA, DARRYL, MD†

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

EVORA, DARRYL, MD†

Provider ID: N/A

☐ 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

KONING, JEFFREY, MD†

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

KONING, JEFFREY, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

KONING, JEFFREY, MD†

Provider ID: N/A

☐ 330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

KRUK, PETER, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

C1. 网络提供者名单 专科护理医生

PUGMIRE, BRIAN, MD†

Provider ID: N/A

📍 330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

PUGMIRE, BRIAN, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

PUGMIRE, BRIAN, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

PEDIATRICS

ALLSUP, VICTORIA, MD

Provider ID: N/A

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-NOV-23

ALLSUP, VICTORIA, MD

Provider ID: N/A

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-NOV-23

ANDREE, GREGOR, MD

Provider ID: N/A

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

ANDREE, GREGOR, MD

Provider ID: N/A

📍 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-SEP-22

BAI-TONG, SHIYU, MD

Provider ID: N/A

📍 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Effective as of 01-AUG-24

DOAN STEPHENS, CRYSTAL, MD†

Provider ID: N/A

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

DOAN STEPHENS, CRYSTAL, MD†

Provider ID: N/A

📍 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-SEP-22

GIBONEY, JENNIFER, MD

Provider ID: N/A

📍 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-FEB-23

GIBONEY, JENNIFER, MD

Provider ID: N/A

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-23

GROBMAN, LILLIAN, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAR-22

HUBBARD, EUSTRATIA, MD

Provider ID: N/A

📍 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

Effective as of 01-AUG-24

KARMAKAR, KANKA, MD

Provider ID: N/A

📍 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Teleservice
Effective as of 01-JAN-21

LEFF, MICHELLE, MD

Provider ID: N/A

📍 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Effective as of 01-AUG-24

MARC-AURELE, KRISHELLE, MD

Provider ID: N/A

📍 7910 FROST ST STE 230
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

MATOBA, NANA, MD

Provider ID: N/A

📍 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Effective as of 01-AUG-24

SAUER, CHARLES, DO

Provider ID: N/A

📍 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Effective as of 01-AUG-24

SONG, RICHARD, MD

Provider ID: N/A

📍 7910 FROST ST STE 230
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

SUTTNER, DENISE, MD

Provider ID: N/A

📍 7910 FROST ST STE 230
SAN DIEGO, CA 92123

C1. 网络提供者名单 专科护理医生

Effective as of 01-SEP-23

WEISS, KATHERINE, MD

Provider ID: N/A

7910 FROST ST STE 230
SAN DIEGO, CA 92123

Effective as of 01-SEP-23

ZAHEER, AARON, MD†

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

ZAHEER, AARON, MD†

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

Effective as of 01-SEP-22

PHYS MED/ REHAB PAIN MEDICINE

HURSCHMAN, ALAN, MD†

Provider ID: N/A

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123

Effective as of 01-AUG-24

KATZEN, SETH, DO

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-MAY-23

KATZEN, SETH, DO

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-MAR-24

KOLODGE, GAVIN, DO

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-JUN-23

RICHARDSON, HENRY, MD†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Effective as of 01-JUN-23

PHYS MED/ REHAB SPORTS MEDICINE

CHANG, ENOCH, MD

Provider ID: N/A

6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-AUG-24

PHYSICAL MEDICINE / REHABILITATION

BULLOCK, ANDREW, DO†

Provider ID: N/A

1855 1ST AVE STE 200
SAN DIEGO, CA 92101

Effective as of 01-JAN-21

BULLOCK, ANDREW, DO

Provider ID: N/A

1855 1ST AVE STE 200B
SAN DIEGO, CA 92101

Effective as of 01-APR-24

BULLOCK, ANDREW, DO†

Provider ID: N/A

1855 1ST AVE STE 200
SAN DIEGO, CA 92101

Effective as of 01-JUL-22

CHANG, ENOCH, MD

Provider ID: N/A

6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-JUN-24

CHANG, ENOCH, MD

Provider ID: N/A

6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-SEP-23

CHANG, ENOCH, MD

Provider ID: N/A

6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-AUG-23

GAVRILYUK, OLEG, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2302

SAN DIEGO, CA 92120

Effective as of 01-SEP-22

GAVRILYUK, OLEG, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2302

SAN DIEGO, CA 92120

Effective as of 01-SEP-20

KATZEN, SETH, DO

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-NOV-22

KATZEN, SETH, DO

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

C1. 网络提供者名单 专科护理医生

Effective as of 01-APR-23

KO LODGE, GAVIN, DO

Provider ID: N/A

📍 3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-SEP-23

MERCADO, JEFFRY, MD

Provider ID: N/A

📍 6719 ALVARADO RD STE
308
SAN DIEGO, CA 92120
Effective as of 01-JUL-24

SCOTT, ROBERT, MD

Provider ID: N/A

📍 6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

TAHAEI, SEYED, MD†

Provider ID: N/A

📍 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice
Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

ABRAHAMSEN, KELSEY, PA

Provider ID: N/A

📍 555 W C ST STE 102
SAN DIEGO, CA 92101
Effective as of 01-JAN-21

ABRAHAMSEN, KELSEY, PA

Provider ID: N/A

📍 4142 ADAMS AVE STE 102
SAN DIEGO, CA 92116
Effective as of 01-APR-22

ABRAHAMSEN, KELSEY, PA

Provider ID: N/A

📍 3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Effective as of 01-JAN-21

AHN, JORDAN, PA

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JUN-24

ALBRIGHT, KELSEY, PA†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

ALYAS, ALISIA, PA

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-21

ALYAS, ALISIA, PA

Provider ID: N/A

📍 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-21

ANDERSON, MATTHEW, PA

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

ANDERSON, CARLEY, PA†

Provider ID: N/A

📍 11865 CARMEL MOUNTAIN
RD STE 1104
SAN DIEGO, CA 92128
Effective as of 01-DEC-21

ARMENTA, JORGE, PA

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-MAY-21

ARROYO, VANIA, PA

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-MAR-23

BASIN, NATALIE, PA†

Provider ID: N/A

📍 12843 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130
Teleservice
Effective as of 01-FEB-21

BERRY, MEGHAN, PA

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

BRAVO, RICARDO, PA

Provider ID: N/A

📍 3490 PALM AVE
SAN DIEGO, CA 92154
Effective as of 01-JUL-23

BROWN, COLLEEN, PA

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-24

BRUECKNER, TAMMIE, PA

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

C1. 网络提供者名单 专科护理医生

Effective as of 01-AUG-24

CRITES, LAURA, PA

Provider ID: N/A

3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117

Teleservice

Effective as of 01-SEP-22

DANESHVAR, ABRAHAM, PA†

Provider ID: N/A

9610 GRANITE RIDGE DR
STE B
SAN DIEGO, CA 92123

Effective as of 01-SEP-22

DARZI, MARIAM, PA

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Effective as of 01-OCT-23

DU, SARAH, PA

Provider ID: N/A

5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-APR-24

ELLIOTT, GRACE, PA

Provider ID: N/A

3180 UNIVERSITY AVE STE
120
SAN DIEGO, CA 92104

Teleservice

Effective as of 01-JUN-24

ELLIOTT, GRACE, PA

Provider ID: N/A

3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117

Teleservice

Effective as of 01-JUN-24

ENCE, EMILY, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

ESTES, SAMANTHA, PA†

Provider ID: N/A

3969 4TH AVE STE 208
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

ESTES, SAMANTHA, PA†

Provider ID: N/A

3969 4TH AVE STE 208
SAN DIEGO, CA 92103

Effective as of 01-MAR-23

FLORES, BRIANNA, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JUN-24

GUTH, CARA, PA†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-JAN-24

GUTH, CARA, PA†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-JUL-21

GUZMAN, HORTENCIA, PA

Provider ID: N/A

3490 PALM AVE
SAN DIEGO, CA 92154
Effective as of 01-JUL-23

HABBOUSH, RANA, PA

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-OCT-23

HABBOUSH, RANA, PA

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-OCT-23

HARMEYER, JENNA, PA

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-OCT-23

HARRIS, CHRISTINA, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-APR-24

HAZAN, ALISON, PA

Provider ID: N/A

12843 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130

Effective as of 01-DEC-21

HIGGINS, JOSHUA, PA†

Provider ID: N/A

203 W F ST
SAN DIEGO, CA 92101

Effective as of 01-JAN-22

HIGUERA, EDITH, PA

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-OCT-23

HIGUERA, EDITH, PA

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-OCT-23

HO, HOANG, PA

Provider ID: N/A

4551 EL CAJON BLVD
SAN DIEGO, CA 92115

Teleservice

Effective as of 01-OCT-23

HO, HOANG, PA

Provider ID: N/A

2418 ULRIC ST
SAN DIEGO, CA 92111

Teleservice

Effective as of 01-OCT-23

HUNTER, JACOB, PA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

HUNTER, JACOB, PA

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

HUNTER, JACOB, PA†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

KHALEGHI, MANI, PA†

Provider ID: N/A

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

KHALEGHI, MANI, PA†

Provider ID: N/A

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123

Effective as of 01-AUG-24

LAM, CLAUDIA, PA

Provider ID: N/A

3811 EL CAJON BLVD
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUL-24

LEE, JENNIFER, PA

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-24

LINDEMANN, CHRISTINA, PA†

Provider ID: N/A

4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121

Effective as of 01-AUG-21

LONGOBARDO, FRANCESCA, PA†

Provider ID: N/A

9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121

Effective as of 01-JAN-21

MADAN, SAKSHI, PA†

Provider ID: N/A

3900 5TH AVE STE 110

SAN DIEGO, CA 92103

Teleservice

Effective as of 01-AUG-22

MARTIN, HALEY, PA

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAR-24

MERCER, KELLY, PA†

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-APR-21

MERCER, KELLY, PA†

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-APR-21

MOLINA, MYRNA, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-APR-24

MOORMAN, KRISTA, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-MAR-23

MOREO, HUNTER, PA

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JUL-24

C1. 网络提供者名单 专科护理医生

MOREO, HUNTER, PA

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Teleservice

Effective as of 01-JUL-24

MURRAY, BREANNA, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-FEB-21

NELMS, MICHAEL, PA†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

NGUYEN, THUY-VY, PA†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-MAR-22

NGUYEN, THUY-VY, PA†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-NOV-23

NGUYEN, KHANH, PA

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-24

NGUYEN, THUY-VY, PA†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-AUG-22

NGUYEN, KHANH, PA

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-SEP-24

NGUYEN, THUY-VY, PA†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-NOV-23

NGUYEN, THUY-VY, PA†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-MAR-22

PAUL, ROBERT, PA

Provider ID: N/A

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123

Effective as of 01-JUL-24

PELIO, DARREN, PA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-22

PELIO, DARREN, PA†

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Effective as of 01-SEP-22

PERREAULT, MARK, PA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-21

PERREAULT, MARK, PA†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-AUG-21

PHAM, JENNIFER, PA

Provider ID: N/A

3900 5TH AVE STE 220
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-OCT-23

PHAM, SANDY, PA

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120

Effective as of 01-JUN-24

PHUNG, AIVI, PA†

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

PHUNG, AIVI, PA†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

PICKERING, OANA, PA

Provider ID: N/A

555 W C ST STE 102
SAN DIEGO, CA 92101

Effective as of 01-MAY-23

C1. 网络提供者名单 专科护理医生

POGGI, SARA, PA

Provider ID: N/A

📍 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-APR-24

POST, LACEY, PA

Provider ID: N/A

📍 12843 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130

Effective as of 01-DEC-21

PRIJATEL, SABRINA, PA

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

PYLE, ALEXANDRA, PA

Provider ID: N/A

📍 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-JAN-24

PYLE, ALEXANDRA, PA

Provider ID: N/A

📍 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-JAN-21

QUIJANO, GLENN, PA

Provider ID: N/A

📍 5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123

Effective as of 01-MAY-24

QUIJANO, GLENN, PA†

Provider ID: N/A

📍 2100 5TH AVE STE 200
SAN DIEGO, CA 92101

Teleservice

Effective as of 01-AUG-22

RAI, GEORGINA, PA†

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

RALL, EMILY, PA

Provider ID: N/A

📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Effective as of 01-JAN-21

SCHOELLER, BIANCA, PA†

Provider ID: N/A

📍 3180 UNIVERSITY AVE STE
120
SAN DIEGO, CA 92104

Effective as of 01-DEC-21

SHARPE, NORMA, PA

Provider ID: N/A

📍 316 25TH ST
SAN DIEGO, CA 92102

Teleservice

Effective as of 01-JAN-23

SHIVELY, JEANNINE, PA†

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-FEB-21

SMITH, ALLISON, PA

Provider ID: N/A

📍 9095 RIO SAN DIEGO DR
STE 300
SAN DIEGO, CA 92108

Effective as of 01-AUG-24

SMITH, ALLISON, PA

Provider ID: N/A

📍 4060 4TH AVE STE 415

SAN DIEGO, CA 92103

Effective as of 01-MAY-24

SMITH, ALLISON, PA

Provider ID: N/A

📍 9339 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-MAY-24

SMITH, ALLISON, PA

Provider ID: N/A

📍 9339 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-MAY-24

SNYDER, AMANDA, PA

Provider ID: N/A

📍 4033 3RD AVE STE 104
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-OCT-23

SNYDER, AMANDA, PA

Provider ID: N/A

📍 4033 3RD AVE STE 104
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JUN-24

SPEH, BRIAN, PA

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-MAR-24

STIFF, TYLER, PA

Provider ID: N/A

📍 5395 RUFFIN RD STE 201
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-APR-24

SUPERNAW, AMY, PA†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-FEB-21

TAYLOR, RYAN, PA

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JAN-24

TAYLOR, RYAN, PA

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-NOV-23

TAYLOR, RYAN, PA

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-NOV-23

TRIMLETT, COLLEEN, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-MAY-21

VALENCIA, JESUS, PA

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 202

SAN DIEGO, CA 92102

Teleservice

Effective as of 01-NOV-23

VANOCKER, KARI, PA

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-MAR-23

VAQUERA, JACQUELINE, PA

Provider ID: N/A

3811 EL CAJON BLVD
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-AUG-24

WAHLIN, TAMARA, PA

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

WAHLIN, TAMARA, PA

Provider ID: N/A

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Effective as of 01-JUN-23

WAHLIN, TAMARA, PA

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JUN-23

WALSH, HEATHER, PA†

Provider ID: N/A

3969 4TH AVE STE 208
SAN DIEGO, CA 92103

Effective as of 01-SEP-21

WEBB, SHANNON, PA

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-MAR-24

WEBB, SHANNON, PA

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-MAY-23

WEIR, JACQUELINE, PA†

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Effective as of 01-APR-21

WEIR, JACQUELINE, PA†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-APR-21

WEIR, JACQUELINE, PA†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-APR-21

WHITEAKER, ARIKA, PA

Provider ID: N/A

12843 EL CAMINO REAL
STE 203

SAN DIEGO, CA 92130

Teleservice

Effective as of 01-JUN-24

WILAND, WINONA, PA

Provider ID: N/A

5405 OBERLIN DR STE 2
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-JUN-23

WRIGHT, DEREK, PA

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice

C1. 网络提供者名单 专科护理医生

Effective as of 01-NOV-23

WRIGHT, DEREK, PA

Provider ID: N/A

☐ 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice

Effective as of 01-AUG-23

WRIGHT, DEREK, PA

Provider ID: N/A

☐ 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice

Effective as of 01-JUL-23

PODIATRIST

ALMIRANTE, MARIA ELENA, DPM

Provider ID: N/A

☐ 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-JUL-22

ALMIRANTE, MARIA ELENA, DPM

Provider ID: N/A

☐ 4290 POLK AVE
SAN DIEGO, CA 92105

Effective as of 01-JUL-22

ALMIRANTE, MARIA ELENA, DPM

Provider ID: N/A

☐ 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

Effective as of 01-JUL-22

ALMIRANTE, MARIA ELENA, DPM

Provider ID: N/A

☐ 1016 OUTER RD

SAN DIEGO, CA 92154

Effective as of 01-JUL-22

BROOKSHIER, TRENT, DPM

Provider ID: N/A

☐ 3989 32ND ST
SAN DIEGO, CA 92104

Teleservice

Effective as of 01-DEC-23

BUI, JOSEPH, DPM

Provider ID: N/A

☐ 11205 VIA CARROZA
SAN DIEGO, CA 92124

Effective as of 01-APR-23

BUI, JOSEPH, DPM

Provider ID: N/A

☐ 5354 UNIVERSITY AVE STE
2
SAN DIEGO, CA 92105

Effective as of 01-AUG-23

COLLINS, MICHAEL, DPM†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121

Effective as of 01-JAN-21

COLLINS, MICHAEL, DPM†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121

Effective as of 01-SEP-22

COLLINS, MICHAEL, DPM†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-NOV-15

COLLINS, MICHAEL, DPM†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-JAN-21

COLLINS, MICHAEL, DPM†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121

Effective as of 01-AUG-23

COLLINS, MICHAEL, DPM†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-APR-23

CULLEN, BENJAMIN, DPM†

Provider ID: N/A

☐ 2650 CAMINO DEL RIO N
STE 101
SAN DIEGO, CA 92108

Effective as of 01-APR-17

FOYGELMAN, ALEKSANDR, DPM†

Provider ID: N/A

☐ 4712 EL CAJON BLVD STE D
SAN DIEGO, CA 92115

Effective as of 01-JUL-22

FOYGELMAN, ALEKSANDR, DPM†

Provider ID: N/A

☐ 4712 EL CAJON BLVD STE D
SAN DIEGO, CA 92115

Effective as of 01-JAN-21

FOYGELMAN, ALEKSANDR, DPM†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

4712 EL CAJON BLVD STE D
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

FOYGELMAN, ALEKSANDR, DPM†

Provider ID: N/A

4712 EL CAJON BLVD STE D
SAN DIEGO, CA 92115
Effective as of 01-JAN-24

JOLLEY, WALTER, DPM

Provider ID: N/A

5222 BALBOA AVE STE 41
SAN DIEGO, CA 92117
Effective as of 01-APR-15

JOLLEY, WALTER, DPM

Provider ID: N/A

5222 BALBOA AVE STE 41
SAN DIEGO, CA 92117
Effective as of 01-SEP-20

LEE, RYAN, DPM†

Provider ID: N/A

2650 CAMINO DEL RIO N
STE 101
SAN DIEGO, CA 92108
Effective as of 01-APR-17

MANCHEL, BRUCE, DPM

Provider ID: N/A

1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Effective as of 01-JUL-24

QUINN, MICHAEL, DPM†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-FEB-07

QUINN, MICHAEL, DPM†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-JUL-17

RICE, BRITTANY, DPM†

Provider ID: N/A

2650 CAMINO DEL RIO N
STE 200
SAN DIEGO, CA 92108
Effective as of 01-OCT-17

TOUMA, ELIE, DPM

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Effective as of 01-APR-23

VALLONE, ROBERT, DPM†

Provider ID: N/A

3363 4TH AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-17

WILSON, MATTHEW, DPM†

Provider ID: N/A

5555 RESERVOIR DR STE
104
SAN DIEGO, CA 92120
Effective as of 01-FEB-22

PREVENTATIVE MEDICINE GENERAL

HERR, RAYMOND, MD

Provider ID: N/A

3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Teleservice
Effective as of 01-MAR-23

JACKSON, CODY, MD

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22

JACKSON, CODY, MD

Provider ID: N/A

6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-SEP-22

NAJAR, FAUZI, MD

Provider ID: N/A

3490 PALM AVE
SAN DIEGO, CA 92154
Effective as of 01-JUL-23

ROMERO, CAMILA, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

ROMERO, CAMILA, MD

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

ROMERO, CAMILA, MD

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

STERN, ANNA, MD

Provider ID: N/A

4142 ADAMS AVE STE 102
SAN DIEGO, CA 92116
Effective as of 01-JAN-21

PSYCHIATRY

C1. 网络提供者名单 专科护理医生

BECKER, OLGA, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

BECKER, OLGA, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

BEVINS, ELIZABETH, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BEVINS, ELIZABETH, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BINDAL, ANKUR, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

BINDAL, ANKUR, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

BINDAL, ANKUR, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

BINDAL, ANKUR, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

BINDAL, ANKUR, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

BINDAL, ANKUR, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

BOBO, JERRY, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

BOBO, JERRY, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

CHAUHAN, SMIT, MD†

Provider ID: N/A

7850 VISTA HILL AVE
SAN DIEGO, CA 92123
Effective as of 01-MAY-22

CHAUHAN, SMIT, MD†

Provider ID: N/A

7850 VISTA HILL AVE
SAN DIEGO, CA 92123

Effective as of 01-MAY-22

DIXON, THOMAS, MD

Provider ID: N/A

10717 SORRENTO VALLEY
RD
STE 210
SAN DIEGO, CA 92121
Effective as of 01-SEP-24

DIXON, THOMAS, MD

Provider ID: N/A

10717 SORRENTO VALLEY
RD
STE 210
SAN DIEGO, CA 92121
Effective as of 01-SEP-24

FANOUS, ASHRAF, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

FANOUS, ASHRAF, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

FANOUS, ASHRAF, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

FANOUS, ASHRAF, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

FITZGERALD, MICHAEL, MD†

Provider ID: N/A

16918 DOVE CANYON RD

C1. 网络提供者名单 专科护理医生

STE 100
SAN DIEGO, CA 92127
Effective as of 01-APR-22

FITZGERALD, MICHAEL, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-APR-22

GLEICHMAN, JULIA, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

GLEICHMAN, JULIA, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

GUTFLAIS, ERIC, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

GUTFLAIS, ERIC, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HANAGAMI, CORI, MD

Provider ID: N/A

📍 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

HANAGAMI, CORI, MD

Provider ID: N/A

📍 4550 KEARNY VILLA RD

STE 116
SAN DIEGO, CA 92123
Effective as of 01-FEB-23

HANAGAMI, CORI, MD

Provider ID: N/A

📍 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

HANAGAMI, CORI, MD

Provider ID: N/A

📍 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

HANAGAMI, CORI, MD

Provider ID: N/A

📍 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

HANAGAMI, CORI, MD

Provider ID: N/A

📍 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-FEB-23

HERSEVOORT, SHAWN, MD

Provider ID: N/A

📍 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-FEB-23

HERSEVOORT, SHAWN, MD

Provider ID: N/A

📍 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

HERSEVOORT, SHAWN, MD

Provider ID: N/A

📍 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

HERSEVOORT, SHAWN, MD

Provider ID: N/A

📍 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-FEB-23

HOLLEMAN, KEVIN, DO

Provider ID: N/A

📍 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

HOLLEMAN, KEVIN, DO

Provider ID: N/A

📍 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-APR-23

HOLLEMAN, KEVIN, DO

Provider ID: N/A

📍 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-APR-23

HOLLEMAN, KEVIN, DO

Provider ID: N/A

📍 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

JOHN, TANNER, MD

Provider ID: N/A

📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Teleservice
Effective as of 01-OCT-23

C1. 网络提供者名单 专科护理医生

JOHN, TANNER, MD

Provider ID: N/A

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Teleservice

Effective as of 01-OCT-23

JOSHI, YASH, MD

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

JOSHI, YASH, MD

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

KARANJIA, NAVAZ, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

KARANJIA, NAVAZ, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

KARANJIA, NAVAZ, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

KARANJIA, NAVAZ, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

KARIPPOT, ANOOP, MD†

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-SEP-15

KARIPPOT, ANOOP, MD†

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-SEP-15

KARIPPOT, ANOOP, MD†

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUN-22

KARRIS, BIANCA, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123

Effective as of 01-JUN-24

KARRIS, BIANCA, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123

Effective as of 01-MAR-23

KARRIS, BIANCA, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123

Effective as of 01-MAR-23

KARRIS, BIANCA, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123

Effective as of 01-JUN-24

KEIFER, JASON, MD

Provider ID: N/A

4452 PARK BLVD STE 302
SAN DIEGO, CA 92116

Effective as of 01-APR-23

KEIFER, JASON, MD

Provider ID: N/A

4452 PARK BLVD STE 302
SAN DIEGO, CA 92116

Effective as of 01-APR-23

LEDBETTER, ALEX, DO

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-JAN-24

LEDBETTER, ALEX, DO

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-JAN-24

LI, XIA, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127

Effective as of 01-AUG-21

LI, XIA, MD†

Provider ID: N/A

16918 DOVE CANYON RD

C1. 网络提供者名单 专科护理医生

STE 100
SAN DIEGO, CA 92127
Effective as of 01-AUG-21

MIRON, JEAN-PHILIPPE, MD
Provider ID: N/A

16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-MAR-24

MIRON, JEAN-PHILIPPE, MD
Provider ID: N/A

16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-MAR-24

MOORE, SHAVON, MD†
Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

MOORE, SHAVON, MD†
Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

MORRIS, RAPHAEL, MD
Provider ID: N/A

12264 EL CAMINO REAL
STE 202
SAN DIEGO, CA 92130
Effective as of 01-NOV-22

MORRIS, RAPHAEL, MD
Provider ID: N/A

12264 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130
Effective as of 01-JAN-21

MORRIS, RAPHAEL, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130
Effective as of 01-JAN-21

MORRIS, RAPHAEL, MD
Provider ID: N/A

12264 EL CAMINO REAL
STE 202
SAN DIEGO, CA 92130
Effective as of 01-NOV-22

NICHOLS, ALPHONSO, MD
Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131
Teleservice
Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD
Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131
Teleservice
Effective as of 01-JAN-23

NICHOLS, ALPHONSO, MD
Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131
Teleservice
Effective as of 01-JAN-23

NICHOLS, ALPHONSO, MD
Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131
Teleservice
Effective as of 01-JUL-22

OJHA, PRITI, MD

Provider ID: N/A
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Effective as of 01-JUN-23

OJHA, PRITI, MD
Provider ID: N/A

1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Effective as of 01-JUN-23

PARASHAR, ANUSHREE, MD
Provider ID: N/A

8775 AERO DR STE 238 FL 3
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

PARASHAR, ANUSHREE, MD
Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD
Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD
Provider ID: N/A

8775 AERO DR STE 238 FL 3
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

PLOESSER, MARKUS, MD
Provider ID: N/A

1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
Effective as of 01-FEB-23

PLOESSER, MARKUS, MD
Provider ID: N/A


1855 1ST AVE STE 200B

C1. 网络提供者名单 专科护理医生

SAN DIEGO, CA 92101
Effective as of 01-FEB-23


PLOESSER, MARKUS, MD

Provider ID: N/A

 1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
Effective as of 01-FEB-23


PLOESSER, MARKUS, MD

Provider ID: N/A

 1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
Effective as of 01-FEB-23


QAYOUMI, WALI, MD

Provider ID: N/A

 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24


QAYOUMI, WALI, MD†

Provider ID: N/A

 4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
Effective as of 01-OCT-21


QAYOUMI, WALI, MD

Provider ID: N/A

 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

QAYOUMI, WALI, MD†

Provider ID: N/A

 4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
Effective as of 01-OCT-21

RIBEIRO CALDAS DOMINGUES, ISABEL, MD†


Provider ID: N/A

 350 DICKINSON ST

SAN DIEGO, CA 92103
Effective as of 01-FEB-21


RIBEIRO CALDAS DOMINGUES, ISABEL, MD†

Provider ID: N/A

 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-21


SALGUEROGALLAND, MARIOLUIS, MD

Provider ID: N/A

 4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23


SALGUEROGALLAND, MARIOLUIS, MD

Provider ID: N/A

 4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23


SALGUEROGALLAND, MARIOLUIS, MD

Provider ID: N/A

 4175 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23


SALGUEROGALLAND, MARIOLUIS, MD†

Provider ID: N/A

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-SEP-21


SALGUEROGALLAND, MARIOLUIS, MD

Provider ID: N/A

 4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23


SALGUEROGALLAND, MARIOLUIS, MD

Provider ID: N/A

 4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23


SALGUEROGALLAND, MARIOLUIS, MD

Provider ID: N/A

 4175 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23


SALGUEROGALLAND, MARIOLUIS, MD

Provider ID: N/A

 4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23

SALGUEROGALLAND, MARIOLUIS, MD†

Provider ID: N/A

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-SEP-21

SALGUEROGALLAND, MARIOLUIS, MD

Provider ID: N/A

 4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105

C1. 网络提供者名单 专科护理医生

Teleservice

Effective as of 01-JUN-23

TADROS, EMAD, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 102
SAN DIEGO, CA 92103

Effective as of 01-FEB-07

TADROS, EMAD, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 102
SAN DIEGO, CA 92103

Effective as of 01-JAN-23

TADROS, EMAD, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 102
SAN DIEGO, CA 92103

Effective as of 01-JAN-23

TADROS, EMAD, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 102
SAN DIEGO, CA 92103

Effective as of 01-FEB-07

WEISSMAN, CORY, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127

Effective as of 01-DEC-21

WEISSMAN, CORY, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127

Effective as of 01-DEC-21

YAGUDAYEVA, RAISA, DO†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-22

YAGUDAYEVA, RAISA, DO†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-22

PSYCHIATRY CHILD

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-SEP-15

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JAN-23

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-SEP-15

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📍 10672 WEXFORD ST STE
280

SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JAN-23

NICHOLS, ALPHONSO, MD

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JAN-23

NICHOLS, ALPHONSO, MD

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

C1. 网络提供者名单 专科护理医生

Effective as of 01-JAN-23

PSYCHIATRY SLEEP MEDICINE

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📍 10672 WEXFORD ST STE
280

SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JAN-23

PSYCHOLOGIST

BADER, RACHEL, PSYD

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Effective as of 01-JUN-23

BADER, RACHEL, PSYD

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Effective as of 01-JUN-23

BAHENA-COLLEY, SANDRA, PSYD†

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-APR-21

BAHENA-COLLEY, SANDRA, PSYD†

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-APR-21

BHAJU, JESHMIN, PhD†

Provider ID: N/A

📍 330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

BHAJU, JESHMIN, PhD†

Provider ID: N/A

📍 330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

BOGUNIA, ARIKA, PSYD†

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Effective as of 01-NOV-22

BOGUNIA, ARIKA, PSYD†

Provider ID: N/A

📍 4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Effective as of 01-NOV-22

BOGUNIA, ARIKA, PSYD†

Provider ID: N/A

📍 4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Effective as of 01-NOV-22

BOGUNIA, ARIKA, PSYD†

Provider ID: N/A

📍 4189 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Effective as of 01-NOV-22

BOGUNIA, ARIKA, PSYD†

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Effective as of 01-NOV-22

BOGUNIA, ARIKA, PSYD†

Provider ID: N/A

📍 4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Effective as of 01-NOV-22

BOGUNIA, ARIKA, PSYD†

Provider ID: N/A

📍 4189 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Effective as of 01-NOV-22

BOGUNIA, ARIKA, PSYD†

Provider ID: N/A

📍 4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Effective as of 01-NOV-22

CARBONELL, SONIA, PSYD†

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUL-21

CARBONELL, SONIA, PSYD†

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUL-21

ESTRADA PATINO, ANGELA, PSYD

Provider ID: N/A

📍 4080 CENTRE ST STE 104
SAN DIEGO, CA 92103

Effective as of 01-MAR-23

ESTRADA PATINO, ANGELA, PSYD

Provider ID: N/A

📍 4080 CENTRE ST STE 104
SAN DIEGO, CA 92103

Effective as of 01-MAR-23

GALANT, DANIEL, PhD

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-APR-21

GALANT, DANIEL, PhD

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-APR-21

GOMEZ, JUANITA, PhD†

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130

Effective as of 01-AUG-22

GOMEZ, JUANITA, PhD†

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130

Effective as of 01-AUG-22

MINASSIAN, ARPI, PhD†

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

MINASSIAN, ARPI, PhD†

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

MIRANDA, CYNTHIA, PhD†

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-APR-21

MIRANDA, CYNTHIA, PhD†

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-APR-21

PARK, JESSIE, PSYD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Effective as of 01-DEC-21

PARK, JESSIE, PSYD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Effective as of 01-DEC-21

TARLE, STEPHANIE, PhD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-DEC-23

TARLE, STEPHANIE, PhD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-DEC-23

VANFOSSEN, BRIAN, PhD†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice

Effective as of 01-SEP-22

VANFOSSEN, BRIAN, PhD†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice

Effective as of 01-NOV-23

VANFOSSEN, BRIAN, PhD†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice

Effective as of 01-NOV-23

VANFOSSEN, BRIAN, PhD†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice

Effective as of 01-SEP-22

PULMONARY DISEASES

BAILEY, JACOB, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

BAILEY, JACOB, MD

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-JUN-23

BAO, GANG, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2306
SAN DIEGO, CA 92120

Teleservice

Effective as of 01-SEP-22

LE, HUAN, MD†

Provider ID: N/A

5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115

Teleservice

C1. 网络提供者名单 专科护理医生

Effective as of 01-JUL-22

LE, HUAN, MD†

Provider ID: N/A

5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115

Teleservice

Effective as of 01-JAN-21

LE, HUAN, MD†

Provider ID: N/A

5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115

Teleservice

Effective as of 01-JAN-14

LE, HUAN, MD†

Provider ID: N/A

5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115

Teleservice

Effective as of 01-JAN-21

MCGUIRE, WILLIAM, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

MUNOZ PINEDA, JORGE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

MUNOZ PINEDA, JORGE, MD

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-DEC-23

MUNOZ PINEDA, JORGE, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

PEARCE, ALEX, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

POKALA, SATHYA, MD

Provider ID: N/A

8031 LINDA VISTA RD STE
100
SAN DIEGO, CA 92111

Teleservice

Effective as of 01-JUN-24

RANCHES, GREGORY, MD†

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-AUG-20

RANCHES, GREGORY, MD†

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-APR-19

RANCHES, GREGORY, MD†

Provider ID: N/A

501 WASHINGTON ST STE
508
SAN DIEGO, CA 92103

Effective as of 01-MAY-20

RESNIKOFF, PAMELA, MD†

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-MAR-22

SPITZ, BRADLEY, MD

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

SPITZ, BRADLEY, MD

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

WONG, STEVEN, MD†

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-APR-19

WONG, STEVEN, MD†

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-APR-19

RADIATION ONCOLOGY

BRUGGEMAN, ANDREW, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Effective as of 01-JAN-21

BRUGGEMAN, ANDREW, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Effective as of 01-MAR-21

C1. 网络提供者名单

专科护理医生

BRUGGEMAN, ANDREW, MD

Provider ID: N/A

3075 HEALTH CENTER DR
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

CARMONA, RUBEN, MD

Provider ID: N/A

7901 FROST ST
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

COLEMAN, LORI, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

FULLER, DONALD, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

FULLER, DONALD, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

FULLER, DONALD, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

FULLER, DONALD, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

FULLER, DONALD, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103

SAN DIEGO, CA 92123

Effective as of 01-SEP-22

FULLER, DONALD, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

FULLER, DONALD, MD

Provider ID: N/A

5395 RUFFIN RD
SAN DIEGO, CA 92123
Effective as of 01-MAY-24

FULLER, DONALD, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

FULLER, DONALD, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-MAY-24

HATTANGADI-GLUTH, JONA, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

HOOPES, DAVID, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-SEP-22

HOOPES, DAVID, MD†

Provider ID: N/A

16918 DOVE CANYON RD

STE 103

SAN DIEGO, CA 92127
Effective as of 01-JAN-21

IJAZ, TAHIR, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-MAY-24

IJAZ, TAHIR, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

IJAZ, TAHIR, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103*
Effective as of 01-SEP-15

IJAZ, TAHIR, MD

Provider ID: N/A

5395 RUFFIN RD
SAN DIEGO, CA 92123
Effective as of 01-MAY-24

IJAZ, TAHIR, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

IJAZ, TAHIR, MD†

Provider ID: N/A

5395 RUFFIN RD STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

IJAZ, TAHIR, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

C1. 网络提供者名单 专科护理医生

IJAZ, TAHIR, MD†

Provider ID: N/A

📍 3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

IJAZ, TAHIR, MD†

Provider ID: N/A

📍 3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

JABBARI, SIAVASH, MD†

Provider ID: N/A

📍 3075 HEALTH CENTER DR
LEVEL 0
SAN DIEGO, CA 92123
Effective as of 01-OCT-22

MACEWAN, IAIN, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

MELL, LOREN, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

MURPHY, KEVIN, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

PEJAVAR, SUNANDA, MD†

Provider ID: N/A

📍 3075 HEALTH CENTER DR
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

SANDHU, AJAY PAL, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

SHARABI, ANDREW, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

SHIRAZI, REZA, MD

Provider ID: N/A

📍 5395 RUFFIN RD
SAN DIEGO, CA 92123
Effective as of 01-MAY-24

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-MAY-24

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

SIMPSON, DANIEL, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

STRAKA, CHRISTOPHER, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JAN-21

STRAKA, CHRISTOPHER, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

C1. 网络提供者名单 专科护理医生

Teleservice

Effective as of 01-APR-23

TYE, KAREN, MD

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Teleservice

Effective as of 01-JUN-23

TYE, KAREN, MD

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Teleservice

Effective as of 01-SEP-23

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-SEP-22

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-MAY-21

VAKILIAN, SIAVOSH, MD

Provider ID: N/A

5395 RUFFIN RD
SAN DIEGO, CA 92123

Effective as of 01-MAY-24

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-JUL-21

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-SEP-22

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-MAY-24

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-MAY-21

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JUL-21

VOLPP, PAUL, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

WHITE, EVAN, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Teleservice

Effective as of 01-NOV-22

YORK, JOHN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

YORK, JOHN, MD

Provider ID: N/A

330 LEWIS ST
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Effective as of 01-DEC-23

RADIOLOGY DIAGNOSTIC

AGANOVIC, LEJLA, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

AGANOVIC, LEJLA, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
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SAN DIEGO, CA 92122

Effective as of 01-APR-23

AGANOVIC, LEJLA, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

ANDERSON, GREGORY, MD

Provider ID: N/A

9095 RIO SAN DIEGO DR
STE 150

SAN DIEGO, CA 92108

Effective as of 01-OCT-23

ANDERSON, GREGORY, MD†

Provider ID: N/A

3939 RUFFIN RD STE 102
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Effective as of 01-AUG-23

C1. 网络提供者名单

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ANDERSON, GREGORY, MD†

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3939 RUFFIN RD STE 102
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ANDERSON, GREGORY, MD

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150 W WASHINGTON ST
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BOLAR, DIVYA, MD

Provider ID: N/A

6655 ALVARADO RD
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Effective as of 01-FEB-24

BOLAR, DIVYA, MD

Provider ID: N/A

408 DICKINSON ST
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BOLAR, DIVYA, MD

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BOSWELL, GILBERT, MD

Provider ID: N/A

330 LEWIS ST
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BOSWELL, GILBERT, MD

Provider ID: N/A

200 W ARBOR DR
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BRANCH, CODY, MD†

Provider ID: N/A

200 W ARBOR DR
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BRANCH, CODY, MD

Provider ID: N/A

6655 ALVARADO RD
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Effective as of 01-FEB-24

BROUHA, SHARON, MD

Provider ID: N/A

6655 ALVARADO RD
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BROUHA, SHARON, MD

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BROUHA, SHARON, MD

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408 DICKINSON ST
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BUI, KEVIN, MD

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BUI, KEVIN, MD†

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330 LEWIS ST STE 202
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BUI, KEVIN, MD†

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CARSWELL, AIMEE, MD

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CARSWELL, AIMEE, MD

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CARSWELL, AIMEE, MD

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6655 ALVARADO RD
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CHANG, JENNIFER, MD

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CHANG, JENNIFER, MD

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408 DICKINSON ST
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CHANG, JENNIFER, MD

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CHEN, KAREN, MD

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C1. 网络提供者名单 专科护理医生

CHEN, CHRISTINE, MD

Provider ID: N/A

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CHENG, KAREN, MD

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CHENG, KAREN, MD†

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CHENG, KAREN, MD†

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CHENG, KAREN, MD

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CHENG, KAREN, MD

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CHO, AARON, MD

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CHO, AARON, MD

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CHO, AARON, MD

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📍 6655 ALVARADO RD
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CHUNG, CHRISTINE, MD

Provider ID: N/A

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CHUNG, CHRISTINE, MD

Provider ID: N/A

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CHUNG, CHRISTINE, MD

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COOPER, JAMES, MD†

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COOPER, JAMES, MD

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DORROS, STEPHEN, MD

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DORROS, STEPHEN, MD

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DORROS, STEPHEN, MD

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EAJAZI, ALIREZA, MD†

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EGHTEDARI, MOHAMMAD, MD

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C1. 网络提供者名单 专科护理医生

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FAZELI, SOUDABEH, MD

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FEDERHART, JAY, MD

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FEDERHART, JAY, MD

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FOWLER, KATHRYN, MD

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HAHN, MICHAEL, MD

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HAHN, LEWIS, MD

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HAHN, LEWIS, MD

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HANDWERKER, JASON, MD

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HANDWERKER, JASON, MD

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HAWLEY, DANIEL, MD

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HAWLEY, DANIEL, MD

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📄 330 LEWIS ST
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Effective as of 01-JUN-23

HAWLEY, DANIEL, MD

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

HOROWITZ, MICHAEL, MD

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HOROWITZ, MICHAEL, MD

Provider ID: N/A

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HOROWITZ, MICHAEL, MD

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HSIAO, ALBERT, MD

Provider ID: N/A

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HSIAO, ALBERT, MD

Provider ID: N/A

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HSIAO, ALBERT, MD

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📄 6655 ALVARADO RD
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Effective as of 01-FEB-24

HUANG, BRADY, MD

Provider ID: N/A

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SAN DIEGO, CA 92120
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HUANG, BRADY, MD

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Effective as of 01-APR-23

HUANG, BRADY, MD

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📄 408 DICKINSON ST
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HUGHES, TUDOR, MD

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📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

JACOBS, KATHLEEN, MD

Provider ID: N/A

📄 6655 ALVARADO RD
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Effective as of 01-FEB-24

JACOBS, KATHLEEN, MD

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📄 408 DICKINSON ST
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JACOBS, KATHLEEN, MD

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Effective as of 01-APR-23

JACOBSON, JON, MD

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📄 6655 ALVARADO RD
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JACOBSON, JON, MD

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C1. 网络提供者名单 专科护理医生

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JACOBSON, JON, MD

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📍 330 LEWIS ST
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JAFFRAY, PAUL, MD

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📍 330 LEWIS ST
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JAFFRAY, PAUL, MD

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JAFFRAY, PAUL, MD

Provider ID: N/A

📍 6655 ALVARADO RD
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KANSAGRA, AKASH, MD

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📍 11199 SORRENTO VALLEY
RD STE 203
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KAROW, DAVID, MD

Provider ID: N/A

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Effective as of 01-APR-23

KAROW, DAVID, MD

Provider ID: N/A

📍 408 DICKINSON ST
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Effective as of 01-APR-23

KAROW, DAVID, MD

Provider ID: N/A

📍 6655 ALVARADO RD
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KAROW, DAVID, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
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KAROW, DAVID, MD†

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📍 330 LEWIS ST
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KARUNAMUNI, JENNIFER, MD

Provider ID: N/A

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KARUNAMUNI, JENNIFER, MD

Provider ID: N/A

📍 200 W ARBOR DR
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KHURANA, AMAN, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
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KIM, ERIC, MD†

Provider ID: N/A

📍 200 W ARBOR DR
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KIM, ERIC, MD†

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KIM, ERIC, MD

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📍 150 W WASHINGTON ST
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KLIGERMAN, SETH, MD

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📍 6655 ALVARADO RD
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KLIGERMAN, SETH, MD

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KLIGERMAN, SETH, MD

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KONDILI, DHIMITER, MD†

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LAKE, MENORE, MD

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C1. 网络提供者名单 专科护理医生

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LAKE, MENORE, MD

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LEE, ROLAND, MD

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LEE, ROLAND, MD

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LEE, ROLAND, MD

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📄 408 DICKINSON ST
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LIM, VIVIAN, MD

Provider ID: N/A

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LIM, VIVIAN, MD

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LIM, VIVIAN, MD

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MAREK BYKOWSKI, JULIE, MD

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MAREK BYKOWSKI, JULIE, MD

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MAREK BYKOWSKI, JULIE, MD

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MARKS, ROBERT, MD

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MARKS, ROBERT, MD

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MCDONALD, MARIN, MD[†]

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MCDONALD, MARIN, MD[†]

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MCDONALD, MARIN, MD

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MCDONALD, MARIN, MD

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MCNAMEE, CAIRINE, MD

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6655 ALVARADO RD
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OBOYLE, MARY, MD

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SAN DIEGO, CA 92127
Effective as of 01-FEB-22

OJEDA-FOURNIER, HAYDEE, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

OJEDA-FOURNIER, HAYDEE, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

OJEDA-FOURNIER, HAYDEE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

PATHRIA, MINI, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

PATHRIA, MINI, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

PATHRIA, MINI, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

RAKOW-PENNER, REBECCA, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

RAKOW-PENNER, REBECCA, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

C1. 网络提供者名单 专科护理医生

**RAKOW-PENNER, REBECCA,
MD**

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

RATTNER, ZACHARY, MD†

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-SEP-22

RATTNER, ZACHARY, MD†

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-JAN-21

RATTNER, ZACHARY, MD†

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-SEP-20

RATTNER, ZACHARY, MD†

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-AUG-21

RATTNER, ZACHARY, MD†

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-JUL-23

RESNICK, DONALD, MD

Provider ID: N/A

6655 ALVARADO RD

SAN DIEGO, CA 92120
Effective as of 01-FEB-24

RESNICK, DONALD, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

RESNICK, DONALD, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

RITCHIE, DAVID, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

ROTHENBERG, EDWARD, MD

Provider ID: N/A

150 W WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

SABIR, SHARJEEL, MD

Provider ID: N/A

150 W WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

SADAT, SAYED, DO

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SADAT, SAYED, DO

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SADAT, SAYED, DO

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SAMPATH, SRINATH, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

SAMPATH, SRIHARI, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

SAMPATH, SRIHARI, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

SAMPATH, SRINATH, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

SANTILLAN, CYNTHIA, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

SANTILLAN, CYNTHIA, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

C1. 网络提供者名单 专科护理医生

SEARLEMAN, ADAM, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SEARLEMAN, ADAM, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SLATER, JERRY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

SLATER, JERRY, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

SMITAMAN, EDWARD, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

SMITAMAN, EDWARD, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SMITAMAN, EDWARD, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

SPENGLER, NATHAN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SPENGLER, NATHAN, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

SPENGLER, NATHAN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

STEPENOSKY, JAMES, DO

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

STEPENOSKY, JAMES, DO

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

STRAKA, CHRISTOPHER, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-FEB-21

SWEET, JASON, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-MAR-24

TAMAYO-MURILLO, DORATHY, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

TAMAYO-MURILLO, DORATHY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

TAMAYO-MURILLO, DORATHY, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

TRINH, BRIAN, MD

Provider ID: N/A

150 W WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

UNSDORFER, KYLE, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

UNSDORFER, KYLE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

VAHDAT, NOUSHIN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

VAHDAT, NOUSHIN, MD

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Teleservice

Effective as of 01-SEP-22

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Teleservice

Effective as of 01-SEP-22

WONG, FELIX, MD†

Provider ID: N/A

3939 RUFFIN RD
SAN DIEGO, CA 92123
Effective as of 01-AUG-23

WONG, FELIX, MD

Provider ID: N/A

9095 RIO SAN DIEGO DR
STE 150
SAN DIEGO, CA 92108
Effective as of 01-OCT-23

WONG, FELIX, MD†

Provider ID: N/A

3939 RUFFIN RD
SAN DIEGO, CA 92123
Effective as of 01-MAY-22

YORK, JOHN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

YORK, VINCENT, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

YORK, VINCENT, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

ZAPALA, MATTHEW, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

ZAPALA, MATTHEW, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

ZAPALA, MATTHEW, MD

Provider ID: N/A

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Effective as of 01-JUL-24

ZINK-BRODY, GORDON, MD†

Provider ID: N/A

3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123
Effective as of 01-OCT-23

ZINK-BRODY, GORDON, MD†

Provider ID: N/A

3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123
Effective as of 01-DEC-21

ZINK-BRODY, GORDON, MD

Provider ID: N/A

9095 RIO SAN DIEGO DR
STE 150
SAN DIEGO, CA 92108

Effective as of 01-OCT-23

REGISTERED DIETITIAN / NUTRITIONIST

ATKINS, JOYCE, RD

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103*
Effective as of 01-OCT-24

BRECKON, SAMANTHA, RD

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-24

BUNDY, KATHLEEN, RD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

CALLAWAY, MALLORY, RD

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-MAR-22

DRIVICK, VALERIE, RD

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-21

DRIVICK, VALERIE, RD

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22

C1. 网络提供者名单 专科护理医生

FISHER, JENNIFER, RD

Provider ID: N/A

☒ 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

FISHER, JENNIFER, RD

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

FISHER, JENNIFER, RD

Provider ID: N/A

☒ 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

GONZALEZ, KRISTEN, RDN

Provider ID: N/A

☒ 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

RUBENSTEIN, KELLY, RD

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

RUBENSTEIN, KELLY, RD

Provider ID: N/A

☒ 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-JAN-24

SALCEDO, CARLA, RD

Provider ID: N/A

☒ 4910 DIRECTORS PL
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

SALCEDO, CARLA, RD

Provider ID: N/A

☒ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JAN-24

SALCEDO, ALEXANDRA, RD

Provider ID: N/A

☒ 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

VALDEZ, KELLY, RD

Provider ID: N/A

☒ 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-SEP-24

VERGARA RODRIGUEZ, DIANA, RD

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

REGISTERED PHYSICAL THERAPIST

ALLOS, ALEXANDER, PT

Provider ID: N/A

☒ 4445 EASTGATE MALL STE
105
SAN DIEGO, CA 92121
Effective as of 01-NOV-23

BOUTELLE, BARBARA, PT

Provider ID: N/A

☒ 9909 MIRA MESA BLVD
STE 120
SAN DIEGO, CA 92131
Effective as of 01-JAN-24

BOUTELLE, DAVID, PT

Provider ID: N/A

☒ 9909 MIRA MESA BLVD
STE 120
SAN DIEGO, CA 92131
Effective as of 01-JAN-24

BOUTELLE, DAVID, PT

Provider ID: N/A

☒ 9888 CARMEL MOUNTAIN
RD STE D
SAN DIEGO, CA 92129
Effective as of 01-JAN-24

BOUTELLE, BARBARA, PT

Provider ID: N/A

☒ 9888 CARMEL MOUNTAIN
RD STE D
SAN DIEGO, CA 92129
Effective as of 01-JAN-24

CORTEZ, AARON, PT†

Provider ID: N/A

☒ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-21

DANG, KAYLEE, PT†

Provider ID: N/A

☒ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-21

FARRAR, COURTNEY, PT†

Provider ID: N/A

☒ 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Effective as of 01-AUG-24

FARRAR, COURTNEY, PT†

Provider ID: N/A

☒ 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Effective as of 01-DEC-22

FARRAR, COURTNEY, PT†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

7525 METROPOLITAN DR
STE 302
SAN DIEGO, CA 92108
Teleservice
Effective as of 01-AUG-24

FARRAR, COURTNEY, PT†
Provider ID: N/A

7525 METROPOLITAN DR
STE 302
SAN DIEGO, CA 92108
Teleservice
Effective as of 01-JAN-21

FERRER, MIRON, PT
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

FUREY, CINDY, PT
Provider ID: N/A

5677 OBERLIN DR STE 106
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

FUREY, CINDY, PT
Provider ID: N/A

5555 RESERVOIR DR STE
300
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

GRIMES, KELLY, PT
Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

JOHNSON, KENNADY, PT
Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAR-24

LEVIE, ADAM, PT

Provider ID: N/A
5643 COPLEY DR STE 230
SAN DIEGO, CA 92111
Teleservice
Effective as of 01-AUG-24

MONROE, MAX, PT

Provider ID: N/A
11750 SORRENTO VALLEY
RD STE 130
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

OKINAGA, PATRICK, PT

Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JAN-24

OKINAGA, PATRICK, PT

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

PAPA, AMY, PT

Provider ID: N/A
4445 EASTGATE MALL STE
103
SAN DIEGO, CA 92121
Effective as of 01-AUG-23

PAPA, AMY, PT

Provider ID: N/A
4445 EASTGATE MALL STE
103
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

PERRONE, AIMEE, PT

Provider ID: N/A
4445 EASTGATE MALL STE
103
SAN DIEGO, CA 92121

Effective as of 01-NOV-21

PHILLIP, OMARI, PT†

Provider ID: N/A
4445 EASTGATE MALL STE
103
SAN DIEGO, CA 92121
Effective as of 01-DEC-21

ROSS, JENNY, PT

Provider ID: N/A
7525 METROPOLITAN DR
SAN DIEGO, CA 92108
Effective as of 01-JAN-23

TITH, JENNY, PT

Provider ID: N/A
4445 EASTGATE MALL STE
103
SAN DIEGO, CA 92121
Effective as of 01-MAY-22

TSAI, CINDY, PT

Provider ID: N/A
3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111
Effective as of 01-JUN-23

TSAI, CINDY, PT

Provider ID: N/A
3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111
Effective as of 01-AUG-23

VANDEWIELE, EMILY, PT†

Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-OCT-21

VASQUEZ, BENJAMIN, PT

Provider ID: N/A
4910 DIRECTORS PL
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

C1. 网络提供者名单 专科护理医生

RHEUMATOLOGY

ASFAR, RAFID, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 400
SAN DIEGO, CA 92123
Effective as of 01-AUG-24

CHITKARA, PUJA, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 400
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

CHITKARA, PUJA, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 400
SAN DIEGO, CA 92123
Effective as of 01-AUG-24

HUYNH, DOQUYEN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

HUYNH, DOQUYEN, MD

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-APR-23

KHANNA, SURABHI, MD

Provider ID: N/A

4282 GENESEE AVE STE
202
SAN DIEGO, CA 92117
Effective as of 01-JUL-24

KHANNA, SURABHI, MD

Provider ID: N/A

4282 GENESEE AVE STE
202
SAN DIEGO, CA 92117
Effective as of 01-NOV-23

PATEL, PUJA, DO

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-MAY-24

PATEL, PUJA, DO

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-MAY-24

PATEL, PUJA, DO

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-24

PRESS, RAYMOND, MD†

Provider ID: N/A

3965 5TH AVE STE 430
SAN DIEGO, CA 92103
Effective as of 01-OCT-19

SLEEP MEDICINE

BAO, GANG, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2306
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-JUN-21

DOMBROWSKY, JOSEPH, MD

Provider ID: N/A

5471 KEARNY VILLA RD STE
202
SAN DIEGO, CA 92123
Effective as of 01-APR-24

FINCH, CHRISTINA, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

FINCH, CHRISTINA, MD

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

FLEMING, WESLEY, MD†

Provider ID: N/A

5471 KEARNY VILLA RD STE
202
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-APR-22

PATEL, NIMIT, MD

Provider ID: N/A

5471 KEARNY VILLA RD STE
200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-JUN-24

SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS, SP

Provider ID: N/A

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127
Effective as of 01-JUN-22

AROCHO-SALGADO, MIRELIS, SP

Provider ID: N/A

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127

C1. 网络提供者名单 专科护理医生

Effective as of 01-JUN-22

AROCHO-SALGADO, MIRELIS, SP

Provider ID: N/A

📄 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

Effective as of 01-JUN-22

AROCHO-SALGADO, MIRELIS, SP

Provider ID: N/A

📄 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

Effective as of 01-JUN-22

BLUMENFELD, LIZA, SP

Provider ID: N/A

📄 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

CALDERON MORALES, ASTRID, SP

Provider ID: N/A

📄 7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111

Effective as of 01-APR-24

CALDERON MORALES, ASTRID, SP

Provider ID: N/A

📄 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

Effective as of 01-APR-24

CALDERON MORALES, ASTRID, SP

Provider ID: N/A

📄 11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127

Effective as of 01-APR-24

CLARK, MELISSA, SP

Provider ID: N/A

📄 11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127

Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

📄 11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127

Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

📄 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

📄 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

📄 7510 CLAIREMONT MESA
BLVD STE 102
SAN DIEGO, CA 92111

Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

📄 7510 CLAIREMONT MESA
BLVD STE 102
SAN DIEGO, CA 92111

Effective as of 01-APR-22

DOCKTER, ANDI, SP†

Provider ID: N/A

📄 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

DURNAN, CASSANDRA, SP

Provider ID: N/A

📄 8929 AERO DR STE E
SAN DIEGO, CA 92123

Effective as of 01-JUL-24

DURNAN, CASSANDRA, SP

Provider ID: N/A

📄 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

Effective as of 01-JUL-24

DURNAN, CASSANDRA, SP

Provider ID: N/A

📄 11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127

Effective as of 01-JUL-24

KOUKEYAN, KARIN, SP

Provider ID: N/A

📄 11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127

Effective as of 01-JAN-23

KOUKEYAN, KARIN, SP

Provider ID: N/A

📄 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

Effective as of 01-JAN-23

KOUKEYAN, KARIN, SP

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111

Teleservice

Effective as of 01-JAN-23

NAPOLEAN, REBECCA, SP

Provider ID: N/A

7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111

Effective as of 01-JUN-22

NAPOLEAN, REBECCA, SP

Provider ID: N/A

7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111

Effective as of 01-JUN-22

SCHIEDERMAYER, BENJAMIN, SP†

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-APR-22

THOMPSON, DANIELLE, SP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

THOMPSON, DANIELLE, SP

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JAN-24

WALSH, ERIN, SP

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL, MD†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-DEC-21

EISENSTEIN, SAMUEL, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Effective as of 01-DEC-21

EISENSTEIN, SAMUEL, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

ISHO, MATHEW, MD†

Provider ID: N/A

4060 4TH AVE STE 510
SAN DIEGO, CA 92103

Effective as of 01-NOV-11

ISHO, MATHEW, MD†

Provider ID: N/A

4060 4TH AVE STE 510
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

ISHO, MATHEW, MD†

Provider ID: N/A

4060 4TH AVE STE 510
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

LOPEZ, NICOLE, MD†

Provider ID: N/A

200 W ARBOR DR

SAN DIEGO, CA 92103

Effective as of 01-DEC-21

LOPEZ, NICOLE, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

Effective as of 01-DEC-21

PARRY, LISA, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

Effective as of 01-DEC-21

PARRY, LISA, MD†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-APR-21

RAMAMOORTHY, SONIA, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

Effective as of 01-DEC-21

TOMAN, JEFFREY, MD†

Provider ID: N/A

4060 4TH AVE STE 510
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

SURGERY CRITICAL CARE

ADAMS, LAURA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-21

OLSON, ERIK, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

VENTRO, GEORGE, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

SURGERY GENERAL

ARMANI, AVA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

BARNES, RYAN, DO†

Provider ID: N/A

7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

BATRA, MUNISH, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

BENCH, SHAWN, MD†

Provider ID: N/A

7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

BRODERICK, RYAN, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

BRODERICK, RYAN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

CASILLAS BERUMEN, SERGIO, MD

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CASILLAS BERUMEN, SERGIO, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-FEB-24

DIEFFENBACH, BRYAN, MD

Provider ID: N/A

550 WASHINGTON ST STE
641
SAN DIEGO, CA 92103
Effective as of 01-MAY-24

ELLNER, JULIE, MD

Provider ID: N/A

2878 CAMINO DEL RIO S
STE 303
SAN DIEGO, CA 92108
Effective as of 01-OCT-21

FARINAS, LEAH, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2309
SAN DIEGO, CA 92120
Effective as of 01-OCT-20

GIURGIU, DAN, MD†

Provider ID: N/A

4060 4TH AVE STE 440
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

HALLDORSON, JEFFREY, MD

Provider ID: N/A

8010 FROST ST STE 100
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

HALLDORSON, JEFFREY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-FEB-18

HALLDORSON, JEFFREY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-DEC-17

HART, MARQUIS, MD

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

8010 FROST ST STE 100
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

HART, MARQUIS, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JUL-21

HART, MARQUIS, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

HORGAN, SANTIAGO, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

HORGAN, SANTIAGO, MD

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

JACOBSEN, GARTH, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

JACOBSEN, GARTH, MD†

Provider ID: N/A

4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121
Effective as of 01-DEC-21

JACOBSEN, GARTH, MD†

Provider ID: N/A

200 W ARBOR DR

SAN DIEGO, CA 92103
Effective as of 01-DEC-21

KING, JUSTIN, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2309
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

LANGENBERG, BRET, DO†

Provider ID: N/A

4033 3RD AVE STE 204
SAN DIEGO, CA 92103
Effective as of 01-JAN-19

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-MAR-24

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-MAR-24

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-AUG-24

MUELLER, GEORGE, MD†

Provider ID: N/A

7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

POLLACK, LARRY, MD†

Provider ID: N/A

7910 FROST ST STE 250
SAN DIEGO, CA 92123*
Effective as of 01-JAN-21

PRICE, ERIN, MD†

Provider ID: N/A

4060 4TH AVE STE 440
SAN DIEGO, CA 92103
Effective as of 01-SEP-20

SANDLER, BRYAN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

SANDLER, BRYAN, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

SISE, MICHAEL, MD†

Provider ID: N/A

550 WASHINGTON ST STE
641
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

WOODWARD, STEPHANIE, MD†

Provider ID: N/A

7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

ZORN, GEORGE, MD†

Provider ID: N/A

4060 4TH AVE STE 330
SAN DIEGO, CA 92103
Effective as of 01-JAN-14

**C1. 网络提供者名单
专科护理医生**

***SURGERY GENERAL
VASCULAR***

CHAMMAS, JOSEPH, MD†

Provider ID: N/A

6719 ALVARADO RD STE
303

SAN DIEGO, CA 92120

Effective as of 01-JUL-24

DIEFFENBACH, BRYAN, MD

Provider ID: N/A

550 WASHINGTON ST STE
641

SAN DIEGO, CA 92103

Effective as of 01-JAN-24

**MORENO MARTINEZ,
ENRIQUE, MD†**

Provider ID: N/A

6719 ALVARADO RD STE
303

SAN DIEGO, CA 92120

Teleservice

Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

6719 ALVARADO RD STE
303

SAN DIEGO, CA 92120

Teleservice

Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

6719 ALVARADO RD STE
303

SAN DIEGO, CA 92120

Teleservice

Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
102

SAN DIEGO, CA 92115

Effective as of 01-JUN-23

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
100

SAN DIEGO, CA 92115

Effective as of 01-JAN-23

SISE, MICHAEL, MD†

Provider ID: N/A

550 WASHINGTON ST STE
641

SAN DIEGO, CA 92103

Effective as of 01-JAN-14

SISE, MICHAEL, MD†

Provider ID: N/A

550 WASHINGTON ST STE
641

SAN DIEGO, CA 92103

Effective as of 01-FEB-07

SURGERY HAND

RICKARDS, ENASS, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JAN-21

SHILLITO, MATTHEW, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-AUG-24

***SURGERY HAND
ORTHOPEDIC***

STEPHENSON, SAMUEL, MD†

Provider ID: N/A

200 W ARBOR DR

SAN DIEGO, CA 92103

Effective as of 01-OCT-21

SURGERY

NEUROLOGICAL

FLORES, BRUNO, MD†

Provider ID: N/A

5395 RUFFIN RD STE 102
SAN DIEGO, CA 92123

Effective as of 01-APR-22

FLORES, BRUNO, MD†

Provider ID: N/A

5395 RUFFIN RD STE 102
SAN DIEGO, CA 92123

Effective as of 01-FEB-21

FLORES, BRUNO, MD†

Provider ID: N/A

11199 SORRENTO VALLEY
RD STE 203

SAN DIEGO, CA 92121

Effective as of 01-JAN-23

GOEL, GUNJAN, MD†

Provider ID: N/A

3750 CONVOY ST STE 301
SAN DIEGO, CA 92111

Effective as of 01-JUL-19

HATEFI, DUSTIN, MD

Provider ID: N/A

200 W ARBOR DR

SAN DIEGO, CA 92103

Effective as of 01-SEP-24

LEVINE, REED, MD

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

C1. 网络提供者名单

专科护理医生

Effective as of 01-FEB-24

OSTRUP, RICHARD, MD†

Provider ID: N/A

📍 3750 CONVOY ST STE 301
SAN DIEGO, CA 92111*

Effective as of 01-SEP-20

UDANI, VIKRAM, MD

Provider ID: N/A

📍 11199 SORRENTO VALLEY
RD STE 203
SAN DIEGO, CA 92121

Effective as of 01-JAN-23

ZACHARIAH, MARCUS, MD

Provider ID: N/A

📍 3750 CONVOY ST STE 301
SAN DIEGO, CA 92111

Effective as of 01-MAY-23

SURGERY ORTHOPEDIC

ABITBOL, JEAN-JACQUES, MD†

Provider ID: N/A

📍 7625 MESA COLLEGE DR
STE 315A
SAN DIEGO, CA 92111

Effective as of 01-JUN-22

ANDRY, JAMES, MD

Provider ID: N/A

📍 7910 FROST ST STE 340
SAN DIEGO, CA 92123

Effective as of 01-MAR-24

ANDRY, JAMES, MD

Provider ID: N/A

📍 7910 FROST ST STE 340
SAN DIEGO, CA 92123*

Effective as of 01-MAR-24

BAWA, MANEESH, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 700
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

BEHR, CHRISTOPHER, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 700
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

BLAIS, MICAH, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

BOURLAND, BRYAN, DO

Provider ID: N/A

📍 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121*

Effective as of 01-SEP-23

BOURLAND, BRYAN, DO

Provider ID: N/A

📍 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121

Effective as of 01-OCT-23

BRERETON, DANIEL, DO†

Provider ID: N/A

📍 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121

Effective as of 01-NOV-22

BUKATA, SUSAN, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAR-21

BUKATA, SUSAN, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

BURNIKEL, DAVID, MD†

Provider ID: N/A

📍 6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-JAN-21

BURNIKEL, DAVID, MD†

Provider ID: N/A

📍 6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-FEB-23

BURNIKEL, DAVID, MD†

Provider ID: N/A

📍 6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-SEP-23

BURNIKEL, DAVID, MD†

Provider ID: N/A

📍 6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-JUN-24

CAGE, DORI, MD†

Provider ID: N/A

📍 8008 FROST ST STE 403
SAN DIEGO, CA 92123

Effective as of 01-NOV-14

CHOI, JIHOON, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-21

DAVID, TAL, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

☒ 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

DOWNING, KRISTOPHER, MD

Provider ID: N/A

☒ 7910 FROST ST STE 340
SAN DIEGO, CA 92123*
Effective as of 01-MAR-24

DOWNING, KRISTOPHER, MD

Provider ID: N/A

☒ 7910 FROST ST STE 340
SAN DIEGO, CA 92123
Effective as of 01-MAR-24

DUTTON, PASCUAL, MD

Provider ID: N/A

☒ 6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 401
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

☒ 5395 RUFFIN RD STE 201
SAN DIEGO, CA 92123
Effective as of 01-OCT-23

DUTTON, PASCUAL, MD

Provider ID: N/A

☒ 5395 RUFFIN RD STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

☒ 3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

☒ 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

GOEB, YANNICK, MD†

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

GROTTING, JOHN, MD

Provider ID: N/A

☒ 6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

GROTTING, JOHN, MD

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 401
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

GROTTING, JOHN, MD

Provider ID: N/A

☒ 3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-JAN-24

GROTTING, JOHN, MD†

Provider ID: N/A

☒ 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

GROTTING, JOHN, MD†

Provider ID: N/A

☒ 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-AUG-23

GROTTING, JOHN, MD†

Provider ID: N/A

☒ 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

GRUHONJIC, IMRAN, DO

Provider ID: N/A

☒ 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121*
Effective as of 01-OCT-24

HOFMEISTER, ERIC, MD

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 401
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

HONG, THOMAS, MD

Provider ID: N/A

☒ 3750 CONVOY ST STE 201
SAN DIEGO, CA 92111*
Effective as of 01-OCT-24

HONG, THOMAS, MD

Provider ID: N/A

☒ 3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-AUG-24

HONG, THOMAS, MD

Provider ID: N/A

☒ 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121

C1. 网络提供者名单 专科护理医生

Effective as of 01-AUG-24

JAIN, RINA, MD†

Provider ID: N/A

📍 3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-JAN-21

KANSARA, DEVANSHU, MD†

Provider ID: N/A

📍 7485 MISSION VALLEY RD
STE 104A

SAN DIEGO, CA 92108

Effective as of 01-JUN-22

KANSARA, DEVANSHU, MD†

Provider ID: N/A

📍 7485 MISSION VALLEY RD
STE 104A

SAN DIEGO, CA 92108

Effective as of 01-MAY-22

KASIR, RAFID, MD

Provider ID: N/A

📍 4060 4TH AVE STE 700
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

KIM, PAUL, MD†

Provider ID: N/A

📍 6719 ALVARADO RD STE
308

SAN DIEGO, CA 92120

Effective as of 01-JAN-14

KIM, PAUL, MD†

Provider ID: N/A

📍 6719 ALVARADO RD STE
308

SAN DIEGO, CA 92120

Effective as of 01-SEP-22

KIMBALL, MICHAEL, MD†

Provider ID: N/A

📍 9333 GENESEE AVE STE

350

SAN DIEGO, CA 92121

Effective as of 01-JAN-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A

📍 9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JAN-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A

📍 9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JUL-23

KIMBALL, MICHAEL, MD†

Provider ID: N/A

📍 9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-SEP-20

KIMBALL, MICHAEL, MD†

Provider ID: N/A

📍 9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JAN-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A

📍 9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-DEC-14

KOLODGE, GAVIN, DO†

Provider ID: N/A

📍 9339 GENESEE AVE STE
150

SAN DIEGO, CA 92121

Effective as of 01-NOV-21

KOLODGE, GAVIN, DO

Provider ID: N/A

📍 3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-AUG-23

KRUEGER, VAN, MD

Provider ID: N/A

📍 4910 DIRECTORS PL STE
350

SAN DIEGO, CA 92121*

Effective as of 01-OCT-23

KRUEGER, VAN, MD

Provider ID: N/A

📍 4910 DIRECTORS PL STE
350

SAN DIEGO, CA 92121

Effective as of 01-OCT-23

KUSNEZOV, NICHOLAS, MD

Provider ID: N/A

📍 7910 FROST ST STE 340
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-APR-24

LENIHAN, MICHAEL, MD

Provider ID: N/A

📍 3444 KEARNY VILLA RD
STE 401

SAN DIEGO, CA 92123

Effective as of 01-SEP-23

MACK, GREGORY, MD

Provider ID: N/A

📍 8008 FROST ST STE 403
SAN DIEGO, CA 92123

Effective as of 01-JAN-15

MCCANDLESS, JEREMY, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 700
SAN DIEGO, CA 92103

C1. 网络提供者名单 专科护理医生

Effective as of 01-OCT-17

MCKNIGHT, BRADEN, MD

Provider ID: N/A

7910 FROST ST STE 340
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-APR-24

MOHLER, LESTER, MD†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108

Effective as of 01-FEB-07

MOHLER, LESTER, MD†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108

Effective as of 01-JAN-14

MULDOON, MICHAEL, MD†

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-NOV-21

MULDOON, MICHAEL, MD†

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-AUG-23

MYER, JONATHAN, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121

Effective as of 01-NOV-21

MYER, JONATHAN, MD†

Provider ID: N/A

4910 DIRECTORS PL STE

350

SAN DIEGO, CA 92121

Effective as of 01-AUG-23

NELSON, MARK, MD

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108

Effective as of 01-MAY-24

POMERANTZ, MICHAEL, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 401
SAN DIEGO, CA 92123

Effective as of 01-SEP-23

RAISZADEH, RAMIN, MD†

Provider ID: N/A

6719 ALVARADO RD STE
308
SAN DIEGO, CA 92120

Effective as of 01-SEP-22

RAISZADEH, RAMIN, MD†

Provider ID: N/A

6719 ALVARADO RD STE
308
SAN DIEGO, CA 92120

Effective as of 01-JAN-23

RICKARDS, ENASS, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-FEB-17

RICKARDS, ENASS, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-APR-23

RICKARDS, ENASS, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-JAN-21

RICKARDS, ENASS, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-JUL-23

RICKARDS, ENASS, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-SEP-22

ROBKER, JERRICK, DO†

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121

Effective as of 01-AUG-23

ROBKER, JERRICK, DO†

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121

Effective as of 01-MAY-22

ROSENFELD, ALAN, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121*

Effective as of 01-SEP-20

ROSENFELD, ALAN, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

ROSENFELD, ALAN, MD†
Provider ID: N/A

9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-AUG-23

ROSENFELD, ALAN, MD†
Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-APR-23

ROSENFELD, ALAN, MD†
Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

ROSENFELD, ALAN, MD†
Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-15

ROSENFELD, ALAN, MD†
Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

SCHULTZ, JEFFREY, MD†
Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108

Effective as of 01-JAN-14

SCHULTZ, JEFFREY, MD†
Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-FEB-07

SCHULTZEL, MARK, MD†
Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-NOV-21

SHAH, KALPIT, MD†
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

SHILLITO, MATTHEW, MD†
Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

SHILLITO, MATTHEW, MD†
Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-AUG-23

SHILLITO, MATTHEW, MD†
Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-SEP-23

SHILLITO, MATTHEW, MD†
Provider ID: N/A

6719 ALVARADO RD STE

200
SAN DIEGO, CA 92120
Effective as of 01-JUN-24

SIROTA, MICHAEL, MD†
Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JUN-24

SIROTA, MICHAEL, MD†
Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

SIROTA, MICHAEL, MD†
Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-AUG-23

SIROTA, MICHAEL, MD†
Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

SULLIVAN, THOMAS, MD
Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SUN, MICHAEL, MD
Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-DEC-23

C1. 网络提供者名单 专科护理医生

TANAKA, SCOTT, MD†

Provider ID: N/A

☐ 4060 4TH AVE STE 700
SAN DIEGO, CA 92103
Effective as of 01-AUG-17

TASTO, JAMES, MD†

Provider ID: N/A

☐ 6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120*
Effective as of 01-AUG-23

TASTO, JAMES, MD†

Provider ID: N/A

☐ 6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

TASTO, JAMES, MD†

Provider ID: N/A

☐ 6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-SEP-23

TAYYAB, NEIL, MD†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

TAYYAB, NEIL, MD†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

TAYYAB, NEIL, MD†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350A

SAN DIEGO, CA 92121
Effective as of 01-AUG-23

TAYYAB, NEIL, MD†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

TAYYAB, NEIL, MD†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-MAR-16

TRADONSKY, STEVEN, MD†

Provider ID: N/A

☐ 7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-JAN-14

TRADONSKY, STEVEN, MD†

Provider ID: N/A

☐ 7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-SEP-15

URBAND, LINDSEY, MD†

Provider ID: N/A

☐ 8008 FROST ST STE 403
SAN DIEGO, CA 92123
Effective as of 01-JUL-19

VALK, JOSIAH, DO

Provider ID: N/A

☐ 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121*
Effective as of 01-OCT-24

WHEATLEY, BENJAMIN, MD

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

WHEATLEY, BENJAMIN, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

☐ 6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-OCT-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

☐ 3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-NOV-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

☐ 3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-OCT-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

☐ 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-OCT-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

☐ 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-OCT-23

YOUNGBLOOD, SCOT, MD

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-23

SURGERY PLASTIC

APOSTOLIDES, JOHN, MD

Provider ID: N/A

1322 SCOTT ST STE 102
SAN DIEGO, CA 92106
Effective as of 01-AUG-15

BATRA, MUNISH, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-MAR-02

CHAO, JAMES, MD†

Provider ID: N/A

8901 ACTIVITY RD
SAN DIEGO, CA 92126
Effective as of 01-JUL-15

CHEN, STEVEN, MD†

Provider ID: N/A

8901 ACTIVITY RD
SAN DIEGO, CA 92126
Effective as of 01-JUL-15

GOSMAN, AMANDA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

GOSMAN, AMANDA, MD†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

HANDLER, BARRY, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2305
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

KUPFER, DAVID, MD†

Provider ID: N/A

5395 RUFFIN RD STE 201
SAN DIEGO, CA 92123
Effective as of 01-JUL-14

NGUYEN, KHANG, MD

Provider ID: N/A

6610 FLANDERS DR STE 101
SAN DIEGO, CA 92121
Effective as of 01-FEB-23

SURGERY THORACIC

HEMP, JAMES, MD†

Provider ID: N/A

4033 3RD AVE STE 210
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

HUDSON, JESSICA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

SURGICAL ONCOLOGY

MEHTSUN, WINTA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

UROLOGY

ABITBOL, JEAN-JACQUES, MD†

Provider ID: N/A

5395 RUFFIN RD STE 202
SAN DIEGO, CA 92123*
Effective as of 01-NOV-21

AHMADIEH, KIAN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

ANGER, JENNIFER, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

ANGER, JENNIFER, MD†

Provider ID: N/A

4520 EXECUTIVE DR STE
360
SAN DIEGO, CA 92121
Effective as of 01-OCT-21

BAGRODIA, ADITYA, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

BASTUBA, MARTIN, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2207
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

BUTLER, PHILIP, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

BUTLER, PHILIP, MD

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

BUTLER, PHILIP, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

BUTLER, PHILIP, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-24

CHEN, TONY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

COHEN, EDWARD, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

COHEN, EDWARD, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-SEP-21

COHEN, EDWARD, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

COHEN, EDWARD, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

COHEN, EDWARD, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

COHEN, EDWARD, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-NOV-22

COHEN, EDWARD, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-24

DATO, PAUL, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-FEB-24

DATO, PAUL, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

DICKS, BRIAN, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

C1. 网络提供者名单 专科护理医生

DICKS, BRIAN, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

DICKS, BRIAN, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-FEB-24

HOLDEN, MARC, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-OCT-22

HOLDEN, MARC, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-SEP-22

HOLDEN, MARC, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

HOLDEN, MARC, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

HOLDEN, MARC, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

JUMA, SAAD, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

JUMA, SAAD, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

JUMA, SAAD, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-FEB-24

KATZ, JONATHAN, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

KEILLER, DANNY, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-24

KEILLER, DANNY, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

KEILLER, DANNY, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202

SAN DIEGO, CA 92123
Effective as of 01-JAN-21

KEILLER, DANNY, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

NGUYEN, HUNG, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

NGUYEN, HUNG, MD


Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

NGUYEN, HUNG, MD


Provider ID: N/A

C1. 网络提供者名单 专科护理医生

 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

NGUYEN, HUNG, MD†

Provider ID: N/A


 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Teleservice

Effective as of 01-JAN-24

NGUYEN, HUNG, MD†

Provider ID: N/A


 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Teleservice

Effective as of 01-NOV-22

NGUYEN, HUNG, MD†

Provider ID: N/A


 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Teleservice

Effective as of 01-SEP-21

PE, MARK-RALLY, MD


Provider ID: N/A

 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Effective as of 01-JAN-24

PE, MARK-RALLY, MD

Provider ID: N/A

 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-FEB-24

PE, MARK-RALLY, MD


Provider ID: N/A

 3444 KEARNY VILLA RD

STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

ROBERTS, JAMES, MD†


Provider ID: N/A

 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

ROBERTS, JAMES, MD†


Provider ID: N/A

 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-SEP-22


ROBERTS, JAMES, MD

Provider ID: N/A

 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

ROBERTS, JAMES, MD


Provider ID: N/A

 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Effective as of 01-JAN-24

SALEM, CAROL, MD


Provider ID: N/A

 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Effective as of 01-JAN-24


SALEM, CAROL, MD†

Provider ID: N/A

 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-NOV-21


SALEM, CAROL, MD†

Provider ID: N/A

 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JUL-22


SALEM, CAROL, MD†

Provider ID: N/A

 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-SEP-22


SALEM, CAROL, MD†

Provider ID: N/A

 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21


SALEM, CAROL, MD†

Provider ID: N/A

 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21


SALEM, CAROL, MD†

Provider ID: N/A

 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-OCT-19


SALEM, CAROL, MD†

Provider ID: N/A

 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-OCT-07

SALEM, CAROL, MD

Provider ID: N/A

 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

SALEM, CAROL, MD

Provider ID: N/A

 3444 KEARNY VILLA RD

C1. 网络提供者名单 专科护理医生

STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-NOV-22

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-NOV-22

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JUL-21

SHEETZ, TYLER, MD

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JAN-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-DEC-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-AUG-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-NOV-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☒ 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-DEC-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☒ 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☒ 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-SEP-22

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☒ 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-SEP-21

VAPNEK, EVAN, MD

Provider ID: N/A

☒ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

VAPNEK, EVAN, MD†

Provider ID: N/A

☒ 4033 3RD AVE STE 400
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

VAPNEK, EVAN, MD†

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-SEP-21

VAPNEK, EVAN, MD†

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-SEP-21

VAPNEK, EVAN, MD†

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

VAPNEK, EVAN, MD†

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

C1. 网络提供者名单 专科护理医生

VAPNEK, EVAN, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

VAPNEK, EVAN, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

VAPNEK, EVAN, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

VAPNEK, EVAN, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

VAPNEK, EVAN, MD

Provider ID: N/A

230 PROSPECT PL STE 210
SAN DIEGO, CA 92118
Effective as of 01-JAN-24

WANG, LUKE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

ADDICTIVE MEDICINE

NAFICY, K, MD†

Provider ID: N/A

30448 RANCHO VIEJO RD

STE 150

SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-MAY-21

CLINICAL

NEUROPSYCHOLOGIST

HOCHBERGER, WILLIAM, PhD

Provider ID: N/A

29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

HOCHBERGER, WILLIAM, PhD

Provider ID: N/A

29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A

30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A

30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

EMERGENCY MEDICINE

FAHIM, ASHRAF, MD

Provider ID: N/A

27372 CALLE ARROYO
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-APR-24

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

FAMILY PRACTICE

LEWIS, GEORGE, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

LEWIS, GEORGE, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

LEWIS, GEORGE, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

OBZEJTA, NATALIA, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,

C1. 网络提供者名单 专科护理医生

CA 92675
Effective as of 01-APR-22

OBZEJTA, NATALIA, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-22

OBZEJTA, NATALIA, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-22

PETERSON, TYLER, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

PETERSON, TYLER, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

PETERSON, TYLER, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

RAD, SHERVIN, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-24

RAD, SHERVIN, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-24

RAD, SHERVIN, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-24

TAKHAR, JASMINE, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

TAKHAR, JASMINE, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

TAKHAR, JASMINE, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

INTERNAL MEDICINE

CARABULEA, GABRIEL, MD

Provider ID: N/A

30250 RANCHO VIEJO RD
STE C
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-23

CARABULEA, GABRIEL, MD

Provider ID: N/A

30250 RANCHO VIEJO RD
STE C
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-23

KALE, RAHUL, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-19

KOHLI, SANJIVAN, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

KOHLI, SANJIVAN, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

KOHLI, SANJIVAN, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD

C1. 网络提供者名单

专科护理医生

STE 200
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-JUN-17

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-NOV-22

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-NOV-22

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

KALE, RAHUL, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-17

KALE, RAHUL, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

KALE, RAHUL, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,

CA 92675
Effective as of 01-OCT-20

KOHLI, SANJIVAN, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-19

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-24

NEPHROLOGY

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-22

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-22

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-22

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-22

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

LUI, STEPHEN, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-24

PANG, JASON, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-14

PANG, JASON, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-NOV-14

OPHTHALMOLOGY

KIM, ESTHER, MD

Provider ID: N/A

31451 RANCHO VIEJO RD


C1. 网络提供者名单

专科护理医生

STE 101
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-OCT-23

KIM, ESTHER, MD

Provider ID: N/A

 31451 RANCHO VIEJO RD
STE 101
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

WILLIAMS, MARK, MD

Provider ID: N/A

 31451 RANCHO VIEJO RD
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

WILLIAMS, MARK, MD

Provider ID: N/A

 31451 RANCHO VIEJO RD
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

WILLIAMS, MARK, MD

Provider ID: N/A


 31451 RANCHO VIEJO RD
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-24

PODIATRIST

ANGAROLA, JEFF, DPM


Provider ID: N/A

 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-22

ANGAROLA, JEFF, DPM

Provider ID: N/A


 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-22

PSYCHIATRY

KURKJIAN, AZAD, MD†


Provider ID: N/A

 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-18

KURKJIAN, AZAD, MD†

Provider ID: N/A


 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-18

PSYCHIATRY CHILD

KURKJIAN, AZAD, MD†


Provider ID: N/A

 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-18

KURKJIAN, AZAD, MD†

Provider ID: N/A


 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-18

PSYCHOLOGIST

HANSINK, RAYMOND, PhD†


Provider ID: N/A

 30290 RANCHO VIEJO RD
STE 104
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-20

HANSINK, RAYMOND, PhD†


Provider ID: N/A

 30290 RANCHO VIEJO RD
STE 104
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-20

HANSINK, RAYMOND, PhD†


Provider ID: N/A

 30290 RANCHO VIEJO RD
STE 104
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-20

HANSINK, RAYMOND, PhD†


Provider ID: N/A

 30290 RANCHO VIEJO RD
STE 104
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-20

KALINIAN, HAYGOUSH, PhD


Provider ID: N/A

 30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A

 30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,

C1. 网络提供者名单 专科护理医生

CA 92675
Effective as of 01-AUG-23

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A

📄 30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A

📄 30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

SEIDER, TALIA, PhD

Provider ID: N/A

📄 29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

SEIDER, TALIA, PhD

Provider ID: N/A

📄 29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

SEIDER, TALIA, PhD

Provider ID: N/A

📄 29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

SEIDER, TALIA, PhD

Provider ID: N/A

📄 29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

PULMONARY DISEASES

KALE, RAHUL, MD†

Provider ID: N/A

📄 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-NOV-19

KALE, RAHUL, MD†

Provider ID: N/A

📄 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-17

KALE, RAHUL, MD†

Provider ID: N/A

📄 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-24

KALE, RAHUL, MD†

Provider ID: N/A

📄 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-18

KOHLI, SANJIVAN, MD†

Provider ID: N/A

📄 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,

CA 92675
Effective as of 01-JAN-18

KOHLI, SANJIVAN, MD†

Provider ID: N/A

📄 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-24

KOHLI, SANJIVAN, MD†

Provider ID: N/A

📄 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-17

KOHLI, SANJIVAN, MD†

Provider ID: N/A

📄 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-20

PATEL, JAY, MD†

Provider ID: N/A

📄 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-JUN-23

PATEL, JAY, MD†

Provider ID: N/A

📄 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-OCT-22

C1. 网络提供者名单 专科护理医生

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-NOV-22

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-NOV-22

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-JUN-24

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-DEC-22

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-JUN-24

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-DEC-22

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-18

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-18

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-24

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-24

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD

STE 200

SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-21

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-24

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-24

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-20

C1. 网络提供者名单 专科护理医生

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-FEB-21

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-FEB-21

YEAM, INCHEL, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-16

YEAM, INCHEL, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-16

YEAM, INCHEL, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUL-21

YEAM, INCHEL, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,

CA 92675

Effective as of 01-DEC-23

YEAM, INCHEL, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUL-21

SURGERY HAND

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-20

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-20

SURGERY ORTHOPEDIC

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
92675
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
92675
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE

C1. 网络提供者名单 专科护理医生

92675
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-AUG-20

HUO, KEUN-HENG, MD

Provider ID: N/A
☐ 31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-OCT-23

HUO, KEUN-HENG, MD

Provider ID: N/A
☐ 31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-JAN-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A
☐ 31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-MAR-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A
☐ 31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-OCT-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A
☐ 31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-APR-23

LEE, RICHARD, MD

Provider ID: N/A
☐ 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-JAN-21

SOHN, ROGER, MD†

Provider ID: N/A
☐ 31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-FEB-20

SOHN, ROGER, MD†

Provider ID: N/A
☐ 31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-FEB-20

SOHN, ROGER, MD†

Provider ID: N/A
☐ 31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-SEP-21

SOHN, ROGER, MD†

Provider ID: N/A
☐ 31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-SEP-21

SOHN, ROGER, MD†

Provider ID: N/A
☐ 31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,

CA 92675
Effective as of 01-OCT-23

SOHN, ROGER, MD†

Provider ID: N/A
☐ 31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-JAN-23

SOHN, ROGER, MD†

Provider ID: N/A
☐ 31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-FEB-20

CARDIAC

ELECTROPHYSIOLOGY

LERNER, JONATHAN, MD

Provider ID: N/A
☐ 955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-JUL-23

SHAH, ABHISHEK, MD†

Provider ID: N/A
☐ 955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-JAN-23

CARDIOVASCULAR DISEASE

CARLSON, STEVEN, MD†

Provider ID: N/A
☐ 955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Teleservice
Effective as of 01-SEP-22

CARLSON, STEVEN, MD†

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-JAN-21

CARLSON, STEVEN, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-APR-21

DO, HULBERT, MD

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-OCT-23

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-SEP-22

NARAYANAN, MEENA, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-SEP-22

NARAYANAN, MEENA, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-APR-21

PARIKH, MILIND, DO†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-SEP-22

SARSAM, LUAY, MD

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-JUL-23

SHAH, KULIN, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-JAN-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-SEP-22

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-JAN-23

CERTIFIED

ACUPUNCTURIST

CARRA, BARBARA, LAC

Provider ID: N/A

150 VALPREDA RD
SAN MARCOS, CA 92069

Effective as of 01-JUL-24

GONZALEZ, ANDRES, LAC

Provider ID: N/A

1595 GRAND AVE STE 100
SAN MARCOS, CA 92078

Effective as of 01-MAY-23

CERTIFIED NURSE

PRACTITIONER

BRACEY-ASIEDU, ALEKSANDRYA, NP

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069*

Effective as of 01-OCT-24

FAIQ, JAMILA, NP†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-NOV-22

FAIQ, JAMILA, NP†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-JAN-21

FODDA, RAMI, NPF

Provider ID: N/A

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Effective as of 01-FEB-23

KOHOUT, KATHRYN, NP†

Provider ID: N/A

150 VALPREDA RD
SAN MARCOS, CA 92069

Effective as of 01-SEP-22

KROCHMAL, RACHEL, NP

Provider ID: N/A

120 CRAVEN RD STE 101
SAN MARCOS, CA 92078

Effective as of 01-OCT-23

MAROSOK, MICHELLE, NP

Provider ID: N/A

838 NORDAHL RD STE 300

C1. 网络提供者名单 专科护理医生

SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAR-24

MOONEY, PATRICIA, NP†

Provider ID: N/A
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAY-21

MOONEY, PATRICIA, NP†

Provider ID: N/A
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-JUL-21

MWAURA, WAIRIMU, NP†

Provider ID: N/A
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-JUN-21

MWAURA, WAIRIMU, NP†

Provider ID: N/A
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-SEP-22

PARSONS, MEKRAE, NP

Provider ID: N/A
150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-DEC-23

VAHDAT, VALERIE, NP†

Provider ID: N/A
2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-NOV-22

VICK, ALINA, NP

Provider ID: N/A
314 S TWIN OAKS VALLEY
RD STE 114
SAN MARCOS, CA 92078
Teleservice
Effective as of 01-NOV-23

WILLEY, MARTI, NP†

Provider ID: N/A
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-JUN-21

YCASAS, EMILY, NP

Provider ID: N/A
150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUN-24

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA, CRNM†

Provider ID: N/A
150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

MATEO, MARIE, CRNM†

Provider ID: N/A
150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

CHIROPRACTOR

HINES, TAYTE, DC

Provider ID: N/A
2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-JAN-24

JEPPESEN, LANCE, DC

Provider ID: N/A
1146 SAN MARINO DR STE L
SAN MARCOS, CA 92078
Effective as of 01-JAN-01

JIMENEZ, CLARIBEL, DC

Provider ID: N/A
150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUL-24

MAUSER, JILL ELLEN, DC

Provider ID: N/A
1146 SAN MARINO DR
SAN MARCOS, CA 92078
Effective as of 01-JUN-21

PATEL, BRIJESH, DC

Provider ID: N/A
2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-JUL-24

PATEL, BRIJESH, DC

Provider ID: N/A
2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-JUN-24

TRAINER, JASON, DC†

Provider ID: N/A
150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

TRAINER, JASON, DC

Provider ID: N/A
1595 GRAND AVE STE 100
SAN MARCOS, CA 92078
Effective as of 01-MAR-24

C1. 网络提供者名单 专科护理医生

DERMATOLOGY

BROWN, REGINA, MD

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-SEP-24

BROWN, REGINA, MD

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-AUG-24

GILBOA, RUTH, MD†

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-AUG-21

SIRICHOTIRATANA, MELISSA, MD†

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-JAN-23

VENKAT, ARUN, MD†

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-MAR-17

VENKAT, ARUN, MD†

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-JUL-22

VENKAT, ARUN, MD†

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-AUG-20

FAMILY PRACTICE

MATIAS, JULIE, DO

Provider ID: N/A

150 VALPREDA RD
SAN MARCOS, CA 92069

Effective as of 01-AUG-24

MCHENRY, KATHRYN, DO

Provider ID: N/A

2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069

Effective as of 01-MAY-24

NATH, DEVARSHI, MD

Provider ID: N/A

150 VALPREDA RD
SAN MARCOS, CA 92069*

Effective as of 01-JUN-24

NATH, DEVARSHI, MD

Provider ID: N/A

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Effective as of 01-FEB-23

HEMATOLOGY / ONCOLOGY

BESSUDO, ALBERTO, MD†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-JAN-21

BESSUDO, ALBERTO, MD†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-NOV-21

FINDAKLY, DAWOOD, MD

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069*

Effective as of 01-OCT-24

KOSMO, MICHAEL, MD†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-JAN-21

MARJON, PHILIP, MD

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-APR-24

SULLIVAN, JESSICA, DO†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Effective as of 01-OCT-22

INFECTIOUS DISEASE

PONIACHIK, SAMUEL, MD†

Provider ID: N/A

150 VALPREDA RD
SAN MARCOS, CA 92069

Effective as of 01-JUN-24

INTERNAL MEDICINE

NARAYANAN, MEENA, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078*

Effective as of 01-JAN-21

PONIACHIK, SAMUEL, MD

Provider ID: N/A

1595 GRAND AVE STE 100
SAN MARCOS, CA 92078

C1. 网络提供者名单 专科护理医生

Effective as of 01-JUN-23

INTERVENTIONAL CARDIOLOGY

DO, HULBERT, MD[†]

Provider ID: N/A

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

Effective as of 01-AUG-22

JOHN, ALAN, MD

Provider ID: N/A

📍 955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-MAY-23

MOHAMEDALI, BURHAN, MD[†]

Provider ID: N/A

📍 955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-JAN-21

PARIKH, MILIND, DO[†]

Provider ID: N/A

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

Effective as of 01-SEP-22

RUBIO GARCIA, MANOLO, MD[†]

Provider ID: N/A

📍 955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-MAY-23

RUBIO GARCIA, MANOLO, MD[†]

Provider ID: N/A

📍 955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-DEC-22

SHAH, KULIN, MD[†]

Provider ID: N/A

📍 955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-APR-23

SUDHAKAR, DEEPTHI, MD[†]

Provider ID: N/A

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

Effective as of 01-SEP-22

SUDHAKAR, DEEPTHI, MD[†]

Provider ID: N/A

📍 955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-APR-23

LICENSED CLINICAL

SOCIAL WORKER

MARTINEZ, NORAYMA, LCSW[†]

Provider ID: N/A

📍 1510 E MISSION RD STE
RV035
SAN MARCOS, CA 92069

Effective as of 01-NOV-22

MEDICAL ONCOLOGY

FRAKES, LAURIE, MD[†]

Provider ID: N/A

📍 838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-OCT-22

FRAKES, LAURIE, MD[†]

Provider ID: N/A

📍 838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-JAN-21

MCCLAY, EDWARD, MD[†]

Provider ID: N/A

📍 838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Effective as of 01-FEB-21

NEPHROLOGY

AFSHAR, MASOUD, MD[†]

Provider ID: N/A

📍 960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-MAY-22

Effective as of 01-MAY-22

AFSHAR, MASOUD, MD[†]

Provider ID: N/A

📍 960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-OCT-23

Effective as of 01-OCT-23

KAYAL, ANAS, MD[†]

Provider ID: N/A

📍 960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078

Effective as of 01-OCT-23

Effective as of 01-OCT-23

KAYAL, ANAS, MD[†]

Provider ID: N/A

📍 960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078

Effective as of 01-MAY-22

Effective as of 01-MAY-22

KAYAL, ANAS, MD[†]

Provider ID: N/A

📍 960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078

Effective as of 01-AUG-24

Effective as of 01-AUG-24

KAYAL, ANAS, MD[†]

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-AUG-24

NEUROLOGY

ANDER, AZIZ, MD†

Provider ID: N/A

838 NORDAHL RD STE 310
SAN MARCOS, CA 92069

Effective as of 01-JUL-22

ANDER, AZIZ, MD†

Provider ID: N/A

838 NORDAHL RD STE 310
SAN MARCOS, CA 92069

Effective as of 01-NOV-21

FARHIDVASH, FARIBA, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-SEP-24

FARHIDVASH, FARIBA, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JUL-24

FARHIDVASH, FARIBA, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-DEC-22

GRATIANNE, ROBERTO, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JUN-22

GUPTA, MONIKA, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JUL-24

GUPTA, MONIKA, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JUN-22

HOSSEINZADEHMALEKI, ANA, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

HOSSEINZADEHMALEKI, ANA, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

HUISA-GARATE, BRANKO, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-MAR-24

HUISA-GARATE, BRANKO, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JUN-22

KAYAL, ANAS, MD†

Provider ID: N/A

334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-SEP-22

MANDEVILLE, ROSS, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-SEP-24

MAREK, MAKSYM, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-OCT-23

MAREK, MAKSYM, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAY-24

MAREK, MAKSYM, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-AUG-23

OLENSKI, KLARI, DO†

Provider ID: N/A

838 NORDAHL RD STE 200

C1. 网络提供者名单 专科护理医生

SAN MARCOS, CA 92069
Effective as of 01-MAY-24

OLENSKI, KLARI, DO†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Effective as of 01-JUN-22

PHAM, ALISE, DO

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAR-24

PHAM, ALISE, DO

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAY-24

PHAM, ALISE, DO

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-AUG-23

SILVER, BRENT, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-DEC-22

SILVER, BRENT, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-SEP-24

SORIALOPEZ, JOSE, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Effective as of 01-SEP-24

SORIALOPEZ, JOSE, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Effective as of 01-JUN-22

WU, MELANIE, DO†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Effective as of 01-JAN-23

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE, MD†

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

POUNTNEY, MARLENE, MD†

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-APR-14

OPHTHALMOLOGY

GUAN, HOWARD, MD

Provider ID: N/A

100 N RANCHO SANTA FE
RD STE 126
SAN MARCOS, CA 92069
Effective as of 01-FEB-24

PRESTERA, TORY, MD†

Provider ID: N/A

100 N RANCHO SANTA FE
RD STE 126
SAN MARCOS, CA 92069
Effective as of 01-JAN-21

PRESTERA, TORY, MD†

Provider ID: N/A

100 N RANCHO SANTA FE
RD STE 126
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

PEDIATRICS

LUMHO, RACHEL, MD

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-NOV-23

QUINTERO, CAROLYN, MD

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-NOV-23

PHYSICIANS ASSISTANT

BASIN, NATALIE, PA

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-AUG-23

BECKER, JANTIMA, PA

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-APR-24

BERNARDO, RACHELLE, PA

Provider ID: N/A

1595 GRAND AVE STE 106

C1. 网络提供者名单 专科护理医生

SAN MARCOS, CA 92078
Effective as of 01-FEB-23

ESCALANTE, JUVY, PA

Provider ID: N/A

☐ 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-FEB-23

MONTES, VIVIAN, PA

Provider ID: N/A

☐ 150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUN-24

POLLEY, SHANNON, PA

Provider ID: N/A

☐ 150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-MAR-23

PODIATRIST

FARMER, STEVEN, DPM

Provider ID: N/A

☐ 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069*
Effective as of 01-JAN-24

PSYCHIATRY

CABREJOS, CLAUDIO, MD

Provider ID: N/A

☐ 150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUN-24

CABREJOS, CLAUDIO, MD

Provider ID: N/A

☐ 150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUN-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A

☐ 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A

☐ 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-AUG-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

☐ 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A

☐ 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-AUG-23

PHAM, ALISE, DO

Provider ID: N/A

☐ 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-AUG-23

PHAM, ALISE, DO

Provider ID: N/A

☐ 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAR-24

PHAM, ALISE, DO

Provider ID: N/A

☐ 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice
Effective as of 01-AUG-23

PHAM, ALISE, DO

Provider ID: N/A

☐ 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAR-24

PSYCHOLOGIST

CARLTON-PENN, CORNELIA, PhD

Provider ID: N/A

☐ 1510 E MISSION RD SPC
RV035
SAN MARCOS, CA 92069
Effective as of 01-NOV-22

CARLTON-PENN, CORNELIA, PhD

Provider ID: N/A

☐ 1510 E MISSION RD SPC
RV035
SAN MARCOS, CA 92069
Effective as of 01-NOV-22

LOVE, YVONNE, PSYD

Provider ID: N/A

☐ 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-JUL-23

LOVE, YVONNE, PSYD

Provider ID: N/A

☐ 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-JUL-23

REGISTERED PHYSICAL THERAPIST

BOUTELLE, DAVID, PT

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

935 W SAN MARCOS BLVD
STE 102
SAN MARCOS, CA 92078
Effective as of 01-JAN-24

BOUTELLE, BARBARA, PT

Provider ID: N/A

935 W SAN MARCOS BLVD
STE 102
SAN MARCOS, CA 92078
Effective as of 01-JAN-24

SPURRELL, KATHRYN, PT

Provider ID: N/A

2115 MONTIEL RD STE 103
SAN MARCOS, CA 92069
Effective as of 01-JAN-24

RHEUMATOLOGY

ALNAHLAWI, BASMA, MD†

Provider ID: N/A

334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078
Teleservice
Effective as of 01-OCT-21

ALNAHLAWI, BASMA, MD†

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078
Effective as of 01-OCT-23

ALNAHLAWI, BASMA, MD†

Provider ID: N/A

334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078
Teleservice
Effective as of 01-SEP-22

ALNAHLAWI, BASMA, MD†

Provider ID: N/A

334 VIA VERA CRUZ STE 251

SAN MARCOS, CA 92078

Teleservice

Effective as of 01-JUL-22

ALNAHLAWI, BASMA, MD†

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078
Effective as of 01-MAY-22

DIKRANIAN, ARA, MD

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078
Effective as of 01-MAY-24

DIKRANIAN, ARA, MD

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078
Effective as of 01-MAR-24

ANESTHESIOLOGY

FONTANA, LOUIS, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

CARDIOVASCULAR DISEASE

AIZIN, VITALI, MD†

Provider ID: N/A

4630 BORDER VILLAGE RD
STE H
SAN YSIDRO, CA 92173
Effective as of 01-FEB-21

AIZIN, VITALI, MD†

Provider ID: N/A

4630 BORDER VILLAGE RD
STE H
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

CERTIFIED NURSE PRACTITIONER

CELIZ, ADRIANA, NP†

Provider ID: N/A

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

DRISCOLL, SUSAN, NP†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

HACINAS, REYNALDO, NP†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

KANTAS, PARIS, NP†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-MAY-22

ROSCOE, SYDNEY, NP

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-24

SANCHEZ, MYRNA, NP

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUN-24

VAZQUEZ-ERLBECK, MARTHA,

C1. 网络提供者名单 专科护理医生

NP

Provider ID: N/A

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-MAY-24

VAZQUEZ-ERLBECK, MARTHA, NP

Provider ID: N/A

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-DEC-21

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL, MD†

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-DEC-22

ARRIETA, NOEMI, DO

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-APR-23

CORONADO, MYRNA, MD

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173*
Teleservice
Effective as of 01-APR-23

CORONADO, MYRNA, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173*
Teleservice
Effective as of 01-APR-23

DALUGDUGAN, ESTHER, MD

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-NOV-23

ESTRADA, JOHANNA, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-JUL-22

POSADA, SEAN, MD

Provider ID: N/A

3364 BEYER BLVD STE
102-103
SAN YSIDRO, CA 92173
Effective as of 01-SEP-24

QURESHI, SOFIA, MD

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-24

ROJAS, SARAH, MD

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUN-24

SHAHTAJI, ALAN, DO

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-24

STALEY, MICHAELA, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-NOV-23

TRAN, KIM, MD

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-SEP-24

INFECTIOUS DISEASE

ALDOUS, JEANNETTE, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-22

PROMER, KATHERINE, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

INTERNAL MEDICINE

HURST, MICHAEL, DO†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-SEP-22

KAUFER, DAVID, MD

Provider ID: N/A

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUN-24

LAMANTIA, MICHELE, MD

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-AUG-23

PATEL, BHAVESH, DO

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-JUN-24

C1. 网络提供者名单 专科护理医生

PROMER, KATHERINE, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-SEP-22

SANCHEZ, LUIS, MD

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-SEP-24

LICENSED CLINICAL SOCIAL WORKER

JENNINGS, AMY, LCSW†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-SEP-22

LAD, NIKISHA, LCSW

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-APR-24

LOPEZ, MARIBEL, LCSW

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

MARRIAGE FAMILY THERAPIST

ALVAREZ, IRAIDA, MFT

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-DEC-22

BALTRUS, JUSTINEANN, MFT

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-NOV-22

ESTAVILLO, SAUL, MFT

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-OCT-22

JIMENEZ, NANCY, MFT

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-FEB-24

NEONATAL / PERINATAL MEDICINE

GOMEZ, DANIELA, MD

Provider ID: N/A

4004 BEYER BLVD STE 400
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-OCT-22

GOMEZ, DANIELA, MD

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-OCT-22

NEPHROLOGY

SOLTERO, RICARDO, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

OBSTETRICS / GYNECOLOGY

BERGGREN, ERICA, MD†

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-SEP-21

BUTLER, KELLEY, MD

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-SEP-24

BUTLER, KELLEY, MD

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-SEP-24

CARR, MIANDA, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

CARR, MIANDA, MD

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-MAY-24

DANESHMAND, SHAHRAM, MD†


Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173*
Teleservice
Effective as of 01-JUL-22

DANESHMAND, SHAHRAM, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-SEP-21

DINH, MY, DO[†]

Provider ID: N/A

 4050 BEYER BLVD
SAN YSIDRO, CA 92173*

Effective as of 01-JUL-22

GOLDSTEIN, EDWARD, MD[†]

Provider ID: N/A

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JAN-21

MENDEZ, DIEGO, MD[†]

Provider ID: N/A

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-NOV-21

SEO, CHANMEE, MD


Provider ID: N/A

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-SEP-24

SEO, CHANMEE, MD

Provider ID: N/A


 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

Effective as of 01-SEP-24

OCCUPATIONAL THERAPIST

BROWN, JOHNNY, OT

Provider ID: N/A

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JUL-22

PEDIATRICS

DILLON, BENEDICT, MD[†]


Provider ID: N/A

 4050 BEYER BLVD
SAN YSIDRO, CA 92173*

Effective as of 01-JAN-21

TAYLOR, TASHA, MD[†]

Provider ID: N/A


 4050 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JUL-22

PHYSICIANS ASSISTANT

BUCKNER, JOSEPH, PA


Provider ID: N/A

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-FEB-22

HARMIS, NATASHA, PA[†]

Provider ID: N/A


 3364 BEYER BLVD STE 102
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-MAY-21

MARTINEZ-MURGUIA, IRENE, PA


Provider ID: N/A

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-FEB-24

PORTOMADURSKI, KRISTINE, PA[†]

Provider ID: N/A

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JAN-21

ROSENBLATT, SHERILYN, PA[†]


Provider ID: N/A

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JAN-21

SMITH, DOUGLAS, PA[†]

Provider ID: N/A


 4004 BEYER BLVD
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-MAY-21

SUNA-SITTO, MOHEEN, PA[†]

Provider ID: N/A

 3364 BEYER BLVD STE 102
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-FEB-21

THOMAS, KIMBERLY, PA


Provider ID: N/A

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JUL-24

TRUJILLO, MIGUEL, PA[†]

Provider ID: N/A

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JAN-21

PODIATRIST

MANCHEL, BRUCE, DPM[†]


Provider ID: N/A

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JUL-22

MANCHEL, BRUCE, DPM[†]

Provider ID: N/A

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JAN-21

C1. 网络提供者名单

专科护理医生

PSYCHIATRY

BERGGREN, ERICA, MD[†]

Provider ID: N/A

📍 4050 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-JUL-22

BERGGREN, ERICA, MD[†]

Provider ID: N/A

📍 4050 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-JUL-22

CRAWFORD-DAY, ANN, MD

Provider ID: N/A

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

CRAWFORD-DAY, ANN, MD

Provider ID: N/A

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

FONTANA, LOUIS, MD[†]

Provider ID: N/A

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

FONTANA, LOUIS, MD[†]

Provider ID: N/A

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

JAMES, CHRISTINE, DO

Provider ID: N/A

📍 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-FEB-24

JAMES, CHRISTINE, DO

Provider ID: N/A

📍 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-FEB-24

OJHA, PRITI, MD

Provider ID: N/A

📍 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-JUN-24

OJHA, PRITI, MD

Provider ID: N/A

📍 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-JUN-24

REGISTERED PHYSICAL THERAPIST

SALAZAR, SERGIO, PT

Provider ID: N/A

📍 3364 BEYER BLVD STE 102
SAN YSIDRO, CA 92173
Effective as of 01-AUG-24

RHEUMATOLOGY

LWIN, THUTHIRI, MD

Provider ID: N/A

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUN-24

SPEECH PATHOLOGIST

HILL, CARLA, SP[†]

Provider ID: N/A

📍 3364 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-MAY-22

SURGERY ORTHOPEDIC

ROSENFELD, ALAN, MD[†]

Provider ID: N/A

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

UROLOGY

SALEM, CAROL, MD[†]

Provider ID: N/A

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

MARRIAGE FAMILY THERAPIST

HAWTHORNE, KAREN, MFT

Provider ID: N/A

📍 30240 HWY 78
SANTA YSABEL, CA 92070
Teleservice
Effective as of 01-JUL-24

CERTIFIED NURSE PRACTITIONER

LARSON, LINDSAY, NP

Provider ID: N/A

📍 9325 MISSION GORGE RD
STE 102
SANTEE, CA 92071
Teleservice
Effective as of 01-JUN-24

CHIROPRACTOR

KELCHNER, MATTHEW, DC[†]

Provider ID: N/A

📍 120 TOWN CENTER PKWY
SANTEE, CA 92071
Effective as of 01-DEC-22

GASTROENTEROLOGY

C1. 网络提供者名单 专科护理医生

REDDY, ANANTHRAM, MD†

Provider ID: N/A

9456 CUYAMACA ST STE
102
SANTEE, CA 92071
Effective as of 01-JUL-22

REDDY, ANANTHRAM, MD†

Provider ID: N/A

9456 CUYAMACA ST STE
102
SANTEE, CA 92071
Effective as of 01-JAN-21

INTERNAL MEDICINE

ALI, ABBAS, MD

Provider ID: N/A

120 TOWN CENTER PKWY
SANTEE, CA 92071
Effective as of 01-SEP-24

CORBIN, DAVID, MD†

Provider ID: N/A

120 TOWN CENTER PKWY
SANTEE, CA 92071
Teleservice
Effective as of 01-NOV-23

LICENSED CLINICAL

SOCIAL WORKER

MEAGHER, RAISHELLE, LCSW

Provider ID: N/A

120 TOWN CENTER PKWY
SANTEE, CA 92071
Teleservice
Effective as of 01-NOV-23

PEDIATRICS

IKE, ERICA, DO†

Provider ID: N/A

120 TOWN CENTER PKWY

SANTEE, CA 92071
Effective as of 01-JAN-21

IKE, ERICA, DO†

Provider ID: N/A

120 TOWN CENTER PKWY
SANTEE, CA 92071
Effective as of 01-SEP-24

PHYSICIANS ASSISTANT

ROSENBLATT, SHERILYN, PA†

Provider ID: N/A

120 TOWN CENTER PKWY
SANTEE, CA 92071
Teleservice
Effective as of 01-OCT-21

PSYCHIATRY

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

8770 CUYAMACA ST STE 4
SANTEE, CA 92071
Effective as of 01-MAY-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

8770 CUYAMACA ST STE 4
SANTEE, CA 92071
Effective as of 01-MAY-22

PSYCHOLOGIST

ALVAREZ, ILIAN, PSYD

Provider ID: N/A

120 TOWN CENTER PKWY
SANTEE, CA 92071
Teleservice
Effective as of 01-AUG-24

ALVAREZ, ILIAN, PSYD

Provider ID: N/A

120 TOWN CENTER PKWY
SANTEE, CA 92071

Teleservice

Effective as of 01-AUG-24

RADIOLOGY DIAGNOSTIC

MOORE, BRIAN, MD†

Provider ID: N/A

9640 MISSION GORGE RD
STE H
SANTEE, CA 92071
Effective as of 01-JAN-21

VENKATESH, VIJAY, MD†

Provider ID: N/A

9640 MISSION GORGE RD
STE H
SANTEE, CA 92071
Effective as of 01-SEP-22

REGISTERED PHYSICAL THERAPIST

BOUTELLE, BARBARA, PT

Provider ID: N/A

9830 PROSPECT AVE STE A
SANTEE, CA 92071
Effective as of 01-JAN-24

CERTIFIED NURSE PRACTITIONER

LINAMEN, NICHOLA, NP

Provider ID: N/A

380 STEVENS AVE STE 310
SOLANA BEACH, CA 92075
Effective as of 01-JUN-24

DERMATOLOGY

AGUIRRE, KRISTEN, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

C1. 网络提供者名单

专科护理医生

Effective as of 01-JAN-23

AGUIRRE, KRISTEN, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JUN-22

GILBOA, RUTH, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JUL-22

GILBOA, RUTH, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JUN-22

GILBOA, RUTH, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-AUG-08

GILBOA, RUTH, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075

Effective as of 01-FEB-21

ROSS, ANDREW, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-AUG-20

ROSS, ANDREW, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JUN-22

ROSS, ANDREW, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JUL-22

SIRICHOTIRATANA, MELISSA, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JAN-23

THIELE, JENS, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JUN-22

THIELE, JENS, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-SEP-09

TSE, YARDY, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JUN-22

VENKAT, ARUN, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR

STE D

SOLANA BEACH, CA 92075

Effective as of 01-MAR-16

VENKAT, ARUN, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-MAR-16

VENKAT, ARUN, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075

Effective as of 01-FEB-21

VENKAT, ARUN, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JUL-22

ENDOCRINOLOGY

METABOLISM DIABETES

ARGOUD, GEORGES, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075

Effective as of 01-MAR-15

ARGOUD, GEORGES, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075*

Effective as of 01-JAN-24

ARGOUD, GEORGES, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR

C1. 网络提供者名单 专科护理医生

STE 8
SOLANA BEACH, CA 92075
Effective as of 01-JUL-22

ARGOUD, GEORGES, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-MAR-15

ARGOUD, GEORGES, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-JAN-21

ARGOUD, GEORGES, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-JAN-21

PHYSICIANS ASSISTANT

BOYDSTON, EMILY, PA

Provider ID: N/A

380 STEVENS AVE STE 310
SOLANA BEACH, CA 92075
Teleservice
Effective as of 01-APR-24

GIBSON, JULIA, PA

Provider ID: N/A

380 STEVENS AVE STE 310
SOLANA BEACH, CA 92075
Effective as of 01-MAY-23

LEE, MYUNGHEE, PA

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075

Teleservice

Effective as of 01-NOV-23

ROBINSON, JENELLE, PA

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-NOV-23

CERTIFIED NURSE PRACTITIONER

CISTRONE, MONICA, NPF

Provider ID: N/A

9239 CAMPO RD STE A
SPRING VALLEY, CA 91977

Teleservice

Effective as of 01-JUL-23

GORDON, DANIELLE, NP†

Provider ID: N/A

9239 CAMPO RD STE A
SPRING VALLEY, CA 91977

Teleservice

Effective as of 01-MAR-22

ALLERGY IMMUNOLOGY

BROWN, HOSEA, MD†

Provider ID: N/A

26960 CHERRY HILLS
BLVD STE D
SUN CITY, CA 92586
Effective as of 01-FEB-22

AUDIOLOGIST

ACEVEDO-FREY, SYLVIA, AuD

Provider ID: N/A

28071 BRADLEY RD
SUN CITY, CA 92586
Effective as of 01-JUN-23

CARDIOVASCULAR DISEASE

AGGARWAL, SAURABH, MD†

Provider ID: N/A

26962 CHERRY HILLS
BLVD STE A
SUN CITY, CA 92586
Effective as of 01-DEC-21

SARSAM, SINAN, MD†

Provider ID: N/A

26960 CHERRY HILLS
BLVD STE C
SUN CITY, CA 92586
Effective as of 01-JUN-21

CERTIFIED NURSE PRACTITIONER

SHIH, LU-HSUN, NP

Provider ID: N/A

26960 CHERRY HILLS
BLVD STE A
SUN CITY, CA 92586
Effective as of 01-APR-24

GASTROENTEROLOGY

RAGHUWANSHI, NAISHADH, MD†

Provider ID: N/A

26960 CHERRY HILLS
BLVD
SUN CITY, CA 92586
Effective as of 01-FEB-11

RAGHUWANSHI, NAISHADH, MD†

Provider ID: N/A

26960 CHERRY HILLS
BLVD
SUN CITY, CA 92586
Effective as of 01-SEP-09

C1. 网络提供者名单

专科护理医生

MARRIAGE FAMILY THERAPIST

PORTER, TERRY, MFT†

Provider ID: N/A

28125 BRADLEY RD STE 220
SUN CITY, CA 92586

Effective as of 01-JAN-23

PORTER, TERRY, MFT†

Provider ID: N/A

28125 BRADLEY RD STE 220
SUN CITY, CA 92586

Effective as of 01-JAN-23

NEPHROLOGY

ISHAK, SALAM, MD†

Provider ID: N/A

28125 BRADLEY RD STE 270
SUN CITY, CA 92586

Effective as of 01-JUN-12

ISHAK, SALAM, MD†

Provider ID: N/A

28125 BRADLEY RD STE 270
SUN CITY, CA 92586

Effective as of 01-SEP-12

OPHTHALMOLOGY

JACOBSON, ARTHUR, MD†

Provider ID: N/A

29826 HAUN RD STE 100
SUN CITY, CA 92586

Effective as of 01-JUL-23

LEE, JOHN, MD†

Provider ID: N/A

28125 BRADLEY RD STE 189
SUN CITY, CA 92586

Effective as of 01-FEB-11

OPTOMETRIST

LANE, KEVIN, OD†

Provider ID: N/A

29826 HAUN RD STE 100
SUN CITY, CA 92586

Effective as of 01-JUL-23

RADIOLOGY DIAGNOSTIC

BURROUGHS, GLORIA, MD†

Provider ID: N/A

26870 CHERRY HILLS
BLVD
SUN CITY, CA 92586

Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD†

Provider ID: N/A

26870 CHERRY HILLS
BLVD
SUN CITY, CA 92586

Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD†

Provider ID: N/A

26870 CHERRY HILLS
BLVD
SUN CITY, CA 92586

Effective as of 01-OCT-17

GRIFFETH, BRADLEY, MD

Provider ID: N/A

26870 CHERRY HILLS
BLVD
SUN CITY, CA 92586

Effective as of 01-SEP-24

GRIFFETH, BRADLEY, MD

Provider ID: N/A

26870 CHERRY HILLS
BLVD
SUN CITY, CA 92586

Effective as of 01-SEP-24

GRIFFETH, BRADLEY, MD

Provider ID: N/A

26870 CHERRY HILLS
BLVD
SUN CITY, CA 92586

Effective as of 01-SEP-24

GRIFFETH, BRADLEY, MD

Provider ID: N/A

26870 CHERRY HILLS
BLVD
SUN CITY, CA 92586

Effective as of 01-SEP-24

ALLERGY IMMUNOLOGY

GUPTA, SAMEER, MD†

Provider ID: N/A

41715 WINCHESTER RD STE
206
TEMECULA, CA 92590

Effective as of 01-DEC-21

GUPTA, SAMEER, MD†

Provider ID: N/A

41715 WINCHESTER RD STE
206
TEMECULA, CA 92590

Effective as of 01-FEB-15

GUPTA, SAMEER, MD†

Provider ID: N/A

41715 WINCHESTER RD STE
206
TEMECULA, CA 92590

Effective as of 01-JUL-23

GUPTA, SAMEER, MD†

Provider ID: N/A

41715 WINCHESTER RD STE
206
TEMECULA, CA 92590

Effective as of 01-JAN-16

ANESTHESIOLOGY

C1. 网络提供者名单 专科护理医生

DORAISWAMY, ARUL, MD†

Provider ID: N/A

28975 OLD TOWN FRONT
ST STE 200
TEMECULA, CA 92590
Effective as of 01-JUL-17

DORAISWAMY, ARUL, MD†

Provider ID: N/A

28975 OLD TOWN FRONT
ST STE 200
TEMECULA, CA 92590
Effective as of 01-JUL-17

GUIANG, RAINIER, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-SEP-19

HYUN, SUZANNE, MD

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-MAR-24

JEDAMSKI, WALDTRAUT, MD

Provider ID: N/A

28975 OLD TOWN FRONT
ST STE 200
TEMECULA, CA 92590
Effective as of 01-OCT-19

KANU, ABDUL, MD

Provider ID: N/A

27699 JEFFERSON AVE
TEMECULA, CA 92590
Teleservice
Effective as of 01-AUG-20

PANG, GARY, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-MAR-24

ANESTHESIOLOGY PAIN MANAGEMENT

CHEN, HAMILTON, MD

Provider ID: N/A

27450 YNEZ RD STE 202
TEMECULA, CA 92591
Effective as of 01-SEP-23

CHEN, HAMILTON, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-SEP-19

CHEN, HAMILTON, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-SEP-19

DADACHANJI, CYRUS, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590
Effective as of 01-JUL-23

DORAISWAMY, ARUL, MD†

Provider ID: N/A

28975 OLD TOWN FRONT
ST STE 200
TEMECULA, CA 92590
Effective as of 01-JUL-17

GUIANG, RAINIER, MD

Provider ID: N/A

27450 YNEZ RD STE 202
TEMECULA, CA 92591
Effective as of 01-SEP-23

GUIANG, RAINIER, MD†

Provider ID: N/A

27450 YNEZ RD STE 128

TEMECULA, CA 92591
Effective as of 01-MAR-24

GUIANG, RAINIER, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-JUL-24

HYUN, SUZANNE, MD

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-JUL-24

LEIER, TIM, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAY-18

LEIER, TIM, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-SEP-19

MOELLER-BERTRAM, TOBIAS, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-JUN-18

PANG, GARY, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-JUL-24

CARDIOVASCULAR DISEASE

C1. 网络提供者名单 专科护理医生

ALFAY, WISAM, MD

Provider ID: N/A

📍 28780 SINGLE OAK DR STE 290
TEMECULA, CA 92590
Effective as of 01-JAN-22

ALFAY, WISAM, MD

Provider ID: N/A

📍 27450 YNEZ RD STE 109
TEMECULA, CA 92591
Effective as of 01-MAR-22

AMIN, JATIN, MD†

Provider ID: N/A

📍 31515 RANCHO PUEBLO RD STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

ATTIA, NADER, DO†

Provider ID: N/A

📍 31515 RANCHO PUEBLO RD STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

ATTIA, NADER, DO†

Provider ID: N/A

📍 31515 RANCHO PUEBLO RD STE 103
TEMECULA, CA 92592
Effective as of 01-JUL-22

ATTIA, NADER, DO†

Provider ID: N/A

📍 31515 RANCHO PUEBLO RD STE 103
TEMECULA, CA 92592
Effective as of 01-AUG-24

ATTIA, NADER, DO†

Provider ID: N/A

📍 31515 RANCHO PUEBLO RD

STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

BISWAS, MIMI, MD

Provider ID: N/A

📍 31515 RANCHO PUEBLO RD STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

COX, JEREMY, DO

Provider ID: N/A

📍 31515 RANCHO PUEBLO RD STE 103
TEMECULA, CA 92592
Effective as of 01-MAR-24

COX, JEREMY, DO

Provider ID: N/A

📍 31515 RANCHO PUEBLO RD STE 103
TEMECULA, CA 92592
Effective as of 01-MAR-24

MAPLETON, SHARINA, DO

Provider ID: N/A

📍 41840 ENTERPRISE CIR N
TEMECULA, CA 92590*
Effective as of 01-NOV-24

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A

📍 31515 RANCHO PUEBLO RD STE 103
TEMECULA, CA 92592
Effective as of 01-FEB-22

SANGODKAR, SANDEEP, DO

Provider ID: N/A

📍 31515 RANCHO PUEBLO RD STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

SARSAM, SINAN, MD†

Provider ID: N/A

📍 27450 YNEZ RD STE 109
TEMECULA, CA 92591
Effective as of 01-MAR-22

SARSAM, SINAN, MD†

Provider ID: N/A

📍 27450 YNEZ RD STE 109
TEMECULA, CA 92591
Effective as of 01-MAR-22

CERTIFIED

ACUPUNCTURIST

LEE, KYUNG HAN, LAC

Provider ID: N/A

📍 27455 TIERRA ALTA WAY STE A
TEMECULA, CA 92590
Effective as of 01-MAR-21

LEE, KYUNG HAN, LAC

Provider ID: N/A

📍 27455 TIERRA ALTA WAY STE A
TEMECULA, CA 92590
Effective as of 01-MAR-21

WACHNER, KRISTELYN, LAC†

Provider ID: N/A

📍 41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-OCT-22

WACHNER, KRISTELYN, LAC†

Provider ID: N/A

📍 41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-OCT-22

CERTIFIED NURSE

PRACTITIONER

C1. 网络提供者名单

专科护理医生

AGORRILLA, MARIA, NP

Provider ID: N/A

44274 GEORGE CUSHMAN
CT STE 212
TEMECULA, CA 92592
Effective as of 01-OCT-23

ALVAREZ, ARMANDA, NP

Provider ID: N/A

27555 YNEZ RD STE 102
TEMECULA, CA 92591
Effective as of 01-FEB-24

BEDFORD, RONALD, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

BEDFORD, RONALD, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

BEDFORD, RONALD, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

BEDFORD, RONALD, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

BEDFORD, RONALD, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202

TEMECULA, CA 92592

Effective as of 01-SEP-22

DONLON, RYAN, NPF

Provider ID: N/A

31150 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

31150 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

31150 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

31150 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-24

GEISINGER, TERESA, NP

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592
Effective as of 01-APR-23

HARTMAN, JULIE, NPF

Provider ID: N/A

31170 TEMECULA PKWY
STE 100
TEMECULA, CA 92592
Effective as of 01-SEP-23

HASAN, BUSHRA, NP

Provider ID: N/A

31170 TEMECULA PKWY
STE 100

TEMECULA, CA 92592

Effective as of 01-OCT-22

HLAVAC, SANDRA, NP

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592
Effective as of 01-APR-24

HLAVAC, SANDRA, NP

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592
Effective as of 01-JUN-24

HUERTA, CARMEN, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-22

HUERTA, CARMEN, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-OCT-22

LIRA, SHANNON, NPF

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592
Effective as of 01-JUL-24

LIRA, SHANNON, NPF

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592
Effective as of 01-FEB-24

C1. 网络提供者名单 专科护理医生

LUCACI, BIANCA, NP

Provider ID: N/A

27555 YNEZ RD STE 400
TEMECULA, CA 92591
Effective as of 01-SEP-22

ONUOHA, NOJA, NP†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591*
Effective as of 01-NOV-22

ONUOHA, NOJA, NP†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591*
Effective as of 01-NOV-22

SMITH, PAIGE, NP

Provider ID: N/A

27555 YNEZ RD STE 400
TEMECULA, CA 92591
Effective as of 01-OCT-23

THOMASII, STEPHEN, NPF†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-OCT-23

THOMASII, STEPHEN, NPF†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAR-21

THOMASII, STEPHEN, NPF†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Effective as of 01-AUG-22

VAHDAT, VALERIE, NP

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JUN-24

ZELEDON, JAIME, NP

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAY-18

CHIROPRACTOR

BARTZ, PAUL, DC†

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JUL-22

FARSHLER, ANTHONY, DC†

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JUL-22

FARSHLER, ANTHONY, DC†

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-NOV-23

MYREN, DONALD, DC

Provider ID: N/A

26790 YNEZ CT STE 2B
TEMECULA, CA 92591
Effective as of 01-JUN-23

MYREN, DONALD, DC

Provider ID: N/A

26790 YNEZ CT STE 2B
TEMECULA, CA 92591

Effective as of 01-JUN-23

DERMATOLOGY

ABAZA, SAM, MD

Provider ID: N/A

30589 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-JUL-24

AWADALLA, FARAH, MD

Provider ID: N/A

30589 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-JUL-24

BROWN, REGINA, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 102
TEMECULA, CA 92592
Effective as of 01-AUG-24

CABRAL, ERIK, MD

Provider ID: N/A

30589 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-JUL-24

DRAYER, JEFFREY, MD

Provider ID: N/A

30589 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-JUL-24

JACOBS, RANDOLPH, MD

Provider ID: N/A

40971 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-AUG-24

JACOBS, RANDOLPH, MD

Provider ID: N/A

40971 WINCHESTER RD
TEMECULA, CA 92591

C1. 网络提供者名单 专科护理医生

Effective as of 01-AUG-24

JACOBS, RANDOLPH, MD

Provider ID: N/A

📍 40971 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-DEC-18

KHERADMAND, SHIVA, DO†

Provider ID: N/A

📍 44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

Provider ID: N/A

📍 44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

Provider ID: N/A

📍 44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Effective as of 01-APR-22

KHERADMAND, SHIVA, DO†

Provider ID: N/A

📍 44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Effective as of 01-APR-22

KHERADMAND, SHIVA, DO†

Provider ID: N/A

📍 44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

Provider ID: N/A

📍 44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Effective as of 01-JAN-22

KOUPAIE, JAFAR, MD

Provider ID: N/A

📍 31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592

Effective as of 01-JUL-24

KOUPAIE, JAFAR, MD

Provider ID: N/A

📍 31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592

Effective as of 01-MAY-24

MEHDI, RAZA, MD

Provider ID: N/A

📍 30589 TEMECULA PKWY
TEMECULA, CA 92592

Effective as of 01-JUL-24

MITCHELL, JESSE, MD†

Provider ID: N/A

📍 31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592

Effective as of 01-FEB-22

MITCHELL, JESSE, MD†

Provider ID: N/A

📍 31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592

Effective as of 01-OCT-20

MITCHELL, JESSE, MD†

Provider ID: N/A

📍 31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592

Effective as of 01-OCT-20

MITCHELL, JESSE, MD†

Provider ID: N/A

📍 31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592

Effective as of 01-OCT-20

MITCHELL, JESSE, MD†

Provider ID: N/A

📍 31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592

Effective as of 01-JUL-21

MITCHELL, JESSE, MD†

Provider ID: N/A

📍 31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592

Effective as of 01-JUL-24

MITCHELL, JESSE, MD†

Provider ID: N/A

📍 31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592

Effective as of 01-JUL-21

MITCHELL, JESSE, MD†

Provider ID: N/A

📍 31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592

Effective as of 01-OCT-20

ROSS, ANDREW, MD†

Provider ID: N/A

📍 31515 RANCHO PUEBLO RD
STE 102
TEMECULA, CA 92592

Effective as of 01-JUL-22

SAIED, NAGI, MD

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Teleservice

Effective as of 01-NOV-23

SHAPIRO, STEVEN, MD

Provider ID: N/A

30589 TEMECULA PKWY
TEMECULA, CA 92592

Effective as of 01-JUL-24

WINKELMANN, RICHARD, DO

Provider ID: N/A

30589 TEMECULA PKWY
TEMECULA, CA 92592

Effective as of 01-JUL-24

EMERGENCY MEDICINE

ELLIS, JOHN, MD†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-SEP-22

WARD, NICHOLAS, MD†

Provider ID: N/A

31700 TEMECULA PKWY
TEMECULA, CA 92592

Effective as of 01-MAR-21

WARD, NICHOLAS, MD†

Provider ID: N/A

31700 TEMECULA PKWY
TEMECULA, CA 92592

Effective as of 01-MAR-21

WARD, NICHOLAS, MD†

Provider ID: N/A

31700 TEMECULA PKWY
TEMECULA, CA 92592

Effective as of 01-MAR-21

ENDOCRINOLOGY

METABOLISM DIABETES

JOO, KATHY, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 134
TEMECULA, CA 92591

Effective as of 01-JUL-23

JOO, KATHY, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 134
TEMECULA, CA 92591

Effective as of 01-JUN-16

JOO, KATHY, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 134
TEMECULA, CA 92591

Effective as of 01-JUN-16

JOO, KATHY, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 134
TEMECULA, CA 92591

Effective as of 01-JUN-16

JOU, BILL, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 205
TEMECULA, CA 92592

Teleservice

Effective as of 01-FEB-17

JOU, BILL, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 205
TEMECULA, CA 92592

Teleservice

Effective as of 01-FEB-17

FAMILY PRACTICE

ZURITA, DANIELA, MD†

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-SEP-24

FAMILY PRACTICE

SPORTS MEDICINE

CHEUNG, SUNNY, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

CHEUNG, SUNNY, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

CHEUNG, SUNNY, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

CHEUNG, SUNNY, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

GASTROENTEROLOGY

ARDIGO, GREGORY, MD

Provider ID: N/A

29645 RANCHO

C1. 网络提供者名单 专科护理医生

CALIFORNIA RD STE 209
TEMECULA, CA 92591
Effective as of 01-AUG-23

DINH, JACK, MD

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 209
TEMECULA, CA 92591
Effective as of 01-AUG-23

KEMMERLY, THOMAS, MD

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 209
TEMECULA, CA 92591
Effective as of 01-AUG-23

SAUNDERS, ANGELA, DO†

Provider ID: N/A

31625 DE PORTOLA RD
SUITE 101
TEMECULA, CA 92592
Effective as of 01-MAY-23

SAUNDERS, ANGELA, DO†

Provider ID: N/A

31625 DE PORTOLA RD
SUITE 101
TEMECULA, CA 92592
Effective as of 01-DEC-22

SAUNDERS, ANGELA, DO†

Provider ID: N/A

31625 DE PORTOLA RD
SUITE 101
TEMECULA, CA 92592
Effective as of 01-MAR-24

SAUNDERS, ANGELA, DO†

Provider ID: N/A

31625 DE PORTOLA RD
SUITE 101
TEMECULA, CA 92592
Effective as of 01-NOV-23

TEYMOORIAN, ARIAN, MD

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 209
TEMECULA, CA 92591
Effective as of 01-AUG-23

HEMATOLOGY / ONCOLOGY

ANDREY, JEFFREY, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 202
TEMECULA, CA 92592
Effective as of 01-JUL-24

BASERI, BABAK, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 202
TEMECULA, CA 92592
Effective as of 01-JUL-24

BASERI, BABAK, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 202
TEMECULA, CA 92592
Effective as of 01-APR-24

BASERI, BABAK, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 202
TEMECULA, CA 92592
Effective as of 01-JUL-21

BASERI, BABAK, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 202
TEMECULA, CA 92592
Effective as of 01-JUL-21

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-20

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 202
TEMECULA, CA 92592
Effective as of 01-JUL-24

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 202
TEMECULA, CA 92592
Effective as of 01-APR-20

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

INTERNAL MEDICINE

AL HARASH, ABDALHAMID, MD†

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 205
TEMECULA, CA 92592
Effective as of 01-OCT-22

AL HARASH, ABDALHAMID, MD†

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 205
TEMECULA, CA 92592

C1. 网络提供者名单 专科护理医生

Effective as of 01-OCT-22

AL HARASH, ABDALHAMID, MD†

Provider ID: N/A

31565 RANCHO PUEBLO RD STE 205
TEMECULA, CA 92592

Effective as of 01-OCT-22

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Effective as of 01-OCT-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Effective as of 01-OCT-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Effective as of 01-NOV-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Effective as of 01-NOV-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Effective as of 01-JAN-22

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Effective as of 01-MAR-21

AMIN, SAJNI, MD

Provider ID: N/A

31625 DE PORTOLA RD STE 101
TEMECULA, CA 92592

Effective as of 01-JUL-24

COX, JEREMY, DO

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 103
TEMECULA, CA 92592

Effective as of 01-JUN-23

HADDADIN, HASSAN, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590

Effective as of 01-SEP-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590

Effective as of 01-SEP-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590

Effective as of 01-SEP-22

JACOBS, NATALIA, MD

Provider ID: N/A

40971 WINCHESTER RD

TEMECULA, CA 92591

Effective as of 01-MAY-23

QUACH, DUC, MD

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Effective as of 01-SEP-24

QUACH, DUC, MD

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Effective as of 01-SEP-24

QUACH, DUC, MD

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Effective as of 01-SEP-24

QUACH, DUC, MD

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Effective as of 01-SEP-24

WHITE, XUANHA, DO†

Provider ID: N/A

44605 AVENIDA DE MISSIONES STE 206
TEMECULA, CA 92592

Effective as of 01-FEB-22

YU, JERRY, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Effective as of 01-DEC-23

C1. 网络提供者名单 专科护理医生

YU, JERRY, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAR-21

YU, JERRY, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592
Effective as of 01-JUL-18

YU, JERRY, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592
Effective as of 01-JUL-18

YU, JERRY, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592
Effective as of 01-AUG-18

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

SALEK, MUNIF, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-FEB-22

SALEK, MUNIF, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-FEB-22

SALEK, MUNIF, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-FEB-22

VEGA, RICARDO, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-MAR-22

VEGA, RICARDO, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-JAN-22

INTERVENTIONAL CARDIOLOGY

MESSENGER, BRADLEY, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

SEAMAN, CHRISTOPHER, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

LICENSED CLINICAL SOCIAL WORKER

CARTWRIGHT, SHANIQUA, LCSW

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-NOV-23

JONES, VALORIA, LCSW

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-JUL-23

JONES, VALORIA, LCSW

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-JUL-23

JONES, VALORIA, LCSW

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-JUL-23

LURINKS GARCIA, MARIA, LCSW

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JAN-21

ONEILL, ANDREW, LCSW

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 102
TEMECULA, CA 92592
Effective as of 01-JUL-24

C1. 网络提供者名单

专科护理医生

ROBLEDO, DAMIAN, LCSW

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-APR-23

THOMAS, PAULA, LCSW

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-APR-23

VALDEZ-HERNANDEZ, ISRAEL, LCSW†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-JAN-23

VALDEZ-HERNANDEZ, ISRAEL, LCSW†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-JAN-23

VALDEZ-HERNANDEZ, ISRAEL, LCSW†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-APR-23

VALDEZ-HERNANDEZ, ISRAEL, LCSW†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-APR-23

MEDICAL ONCOLOGY

BENDER, RICHARD, MD

Provider ID: N/A

27450 YNEZ RD STE 116
TEMECULA, CA 92591
Effective as of 01-JUL-24

BENDER, RICHARD, MD

Provider ID: N/A

27450 YNEZ RD STE 116
TEMECULA, CA 92591
Effective as of 01-JUL-24

SHAIKH, ANWER, MD

Provider ID: N/A

27450 YNEZ RD STE 116
TEMECULA, CA 92591
Effective as of 01-JUL-24

NEPHROLOGY

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 205
TEMECULA, CA 92592
Effective as of 01-JAN-20

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAY-23

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAY-23

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-APR-15

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-JUL-23

NANDI, SHANKHA, DO†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

C1. 网络提供者名单 专科护理医生

Effective as of 01-DEC-23

NANDI, SHANKHA, DO[†]

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Effective as of 01-DEC-23

NANDI, SHANKHA, DO[†]

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Effective as of 01-AUG-20

NANDI, SHANKHA, DO[†]

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Effective as of 01-DEC-23

NANDI, SHANKHA, DO[†]

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Effective as of 01-DEC-23

NANDI, SHANKHA, DO[†]

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Effective as of 01-JUN-23

NANDI, SHANKHA, DO[†]

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Effective as of 01-MAR-21

YAN, ERIC, MD[†]

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Teleservice

Effective as of 01-JUL-18

YAN, ERIC, MD[†]

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Teleservice

Effective as of 01-JUL-18

YAN, ERIC, MD[†]

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Teleservice

Effective as of 01-JUL-18

YAN, ERIC, MD[†]

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Teleservice

Effective as of 01-JUL-23

YAN, ERIC, MD[†]

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Teleservice

Effective as of 01-JUL-23

YAN, ERIC, MD[†]

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Teleservice

Effective as of 01-MAY-20

NEUROLOGY

CHOUDRY, BILAL, MD[†]

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 104
TEMECULA, CA 92592

Effective as of 01-JUN-21

CHOUDRY, BILAL, MD[†]

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 104
TEMECULA, CA 92592

Effective as of 01-MAY-23

DELANEY, MICHAEL, MD[†]

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 104
TEMECULA, CA 92592

Teleservice

Effective as of 01-MAR-21

DELANEY, MICHAEL, MD[†]

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 104
TEMECULA, CA 92592

Teleservice

Effective as of 01-OCT-21

DELANEY, MICHAEL, MD[†]

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 104
TEMECULA, CA 92592

Teleservice

Effective as of 01-MAY-23

FARHIDVASH, FARIBA, MD[†]

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

☒ 44045 MARGARITA RD STE 106
TEMECULA, CA 92592
Effective as of 01-NOV-22

FARNSWORTH, WILLIAM, MD
Provider ID: N/A

☒ 31515 RANCHO PUEBLO RD STE 104
TEMECULA, CA 92592
Effective as of 01-AUG-24

FARNSWORTH, WILLIAM, MD
Provider ID: N/A

☒ 31515 RANCHO PUEBLO RD STE 104
TEMECULA, CA 92592
Effective as of 01-AUG-24

GRATIANNE, ROBERTO, MD†
Provider ID: N/A

☒ 44045 MARGARITA RD STE 106
TEMECULA, CA 92592
Effective as of 01-JUN-22

GUPTA, MONIKA, MD†
Provider ID: N/A

☒ 44045 MARGARITA RD STE 106
TEMECULA, CA 92592
Effective as of 01-OCT-19

HALL, JACOB, MD†
Provider ID: N/A

☒ 31515 RANCHO PUEBLO RD STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-21

HALL, JACOB, MD†
Provider ID: N/A

☒ 31515 RANCHO PUEBLO RD STE 104
TEMECULA, CA 92592

Effective as of 01-MAY-23

HOSSEINZADEHMALEKI, ANA, MD

Provider ID: N/A

☒ 44045 MARGARITA RD STE 106
TEMECULA, CA 92592
Effective as of 01-FEB-24

HUOTT, PATRICK, MD

Provider ID: N/A

☒ 31515 RANCHO PUEBLO RD STE 104
TEMECULA, CA 92592
Effective as of 01-FEB-24

HUOTT, PATRICK, MD

Provider ID: N/A

☒ 31515 RANCHO PUEBLO RD STE 104
TEMECULA, CA 92592
Effective as of 01-FEB-24

MAREK, MAKSYM, MD

Provider ID: N/A

☒ 44045 MARGARITA RD STE 106
TEMECULA, CA 92592
Effective as of 01-DEC-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

☒ 44045 MARGARITA RD STE 106
TEMECULA, CA 92592
Effective as of 01-JUL-23

PHAM, ALISE, DO

Provider ID: N/A

☒ 44045 MARGARITA RD STE 106
TEMECULA, CA 92592
Effective as of 01-DEC-23

SAHAGIAN, GREGORY, MD

Provider ID: N/A

☒ 31515 RANCHO PUEBLO RD STE 104
TEMECULA, CA 92592
Effective as of 01-MAY-23

SILVER, BRENT, MD†

Provider ID: N/A

☒ 44045 MARGARITA RD STE 106
TEMECULA, CA 92592
Effective as of 01-NOV-22

SORIALOPEZ, JOSE, MD†

Provider ID: N/A

☒ 44045 MARGARITA RD STE 106
TEMECULA, CA 92592
Effective as of 01-MAR-21

TALANKI, VARUN, MD

Provider ID: N/A

☒ 31565 RANCHO PUEBLO RD STE 205
TEMECULA, CA 92592
Effective as of 01-DEC-22

WU, MELANIE, DO†

Provider ID: N/A

☒ 44045 MARGARITA RD STE 106
TEMECULA, CA 92592
Effective as of 01-JAN-20

NEUROLOGY CHILD

OLENSKI, KLARI, DO†

Provider ID: N/A

☒ 44045 MARGARITA RD STE 106
TEMECULA, CA 92592
Effective as of 01-MAR-22

OBSTETRICS /

C1. 网络提供者名单 专科护理医生

GYNECOLOGY

ELFELT, TIMOTHY, MD†

Provider ID: N/A

41637 MARGARITA RD STE 100
TEMECULA, CA 92590
Effective as of 01-AUG-19

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

27625 JEFFERSON AVE STE 101
TEMECULA, CA 92590
Effective as of 01-JUL-21

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

27625 JEFFERSON AVE STE 101
TEMECULA, CA 92590
Effective as of 01-JUL-21

NEAL, JAMES, MD†

Provider ID: N/A

31170 TEMECULA PKWY STE 201
TEMECULA, CA 92592
Effective as of 01-JUL-23

RIZVI, SYED, MD†

Provider ID: N/A

31493 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAR-22

OPHTHALMOLOGY

BAKHTIARY, PEJMAN, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N STE 110
TEMECULA, CA 92590
Effective as of 01-SEP-21

BAKHTIARY, PEJMAN, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N STE 110
TEMECULA, CA 92590
Effective as of 01-SEP-21

BEKENDAM, PAMELA, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20

BEKENDAM, PETER, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20

BEKENDAM, PAMELA, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

BEKENDAM, PETER, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

BURNS, RICHARD, MD†

Provider ID: N/A

41637 MARGARITA RD STE 100
TEMECULA, CA 92591
Effective as of 01-SEP-09

BURNS, RICHARD, MD†

Provider ID: N/A

41637 MARGARITA RD STE 100
TEMECULA, CA 92591
Effective as of 01-NOV-08

BURNS, RICHARD, MD†

Provider ID: N/A

41637 MARGARITA RD STE 100
TEMECULA, CA 92591
Effective as of 01-JUL-23

CHING, ANDREA SHERYL, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

CHOW, JASON, MD†

Provider ID: N/A

31950 TEMECULA PKWY STE B-7
TEMECULA, CA 92592
Effective as of 01-JUL-23

JACOBSON, ARTHUR, MD†

Provider ID: N/A

41637 MARGARITA RD STE 100
TEMECULA, CA 92591
Effective as of 01-JUL-23

JACOBSON, ARTHUR, MD†

Provider ID: N/A

41637 MARGARITA RD STE 100
TEMECULA, CA 92591
Effective as of 01-SEP-09

JOSEPH, JEFFREY, MD†

Provider ID: N/A

31950 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-JUL-23

C1. 网络提供者名单 专科护理医生

LAZZARINI, THOMAS, MD

Provider ID: N/A

41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590
Effective as of 01-FEB-24

LEE, JOHN, MD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-JUL-23

LIN, THEODORE, MD†

Provider ID: N/A

41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590
Effective as of 01-APR-24

LIN, THEODORE, MD†

Provider ID: N/A

41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590
Effective as of 01-APR-24

LIN, THEODORE, MD†

Provider ID: N/A

41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590
Effective as of 01-SEP-17

LOBUE, THOMAS, MD

Provider ID: N/A

40945 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-NOV-09

SATTERFIELD, KELLIE, MD

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-DEC-23

SAVAR, LOUIS, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20

SAVAR, AARON, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20

SAVAR, AARON, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

SAVAR, LOUIS, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

SHEILS, CATHERINE, MD

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-JAN-24

SKINNER, ANTHONY, MD

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-JUN-24

SKINNER, ANTHONY, MD

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-JUN-24

SMITH, WILLIAM, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20

SONI, NISHANT, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20

SONI, NISHANT, MD†

Provider ID: N/A

C1. 网络提供者名单

专科护理医生

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

SORENSEN, ROBERT, MD†
Provider ID: N/A

31950 US HWY 79 S B7
TEMECULA, CA 92592
Effective as of 01-JUL-23

WARNER, MICHAEL, MD†
Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Teleservice
Effective as of 01-JUL-23

YUNG, EDWARD, MD†
Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

YUNG, EDWARD, MD†
Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20

ZHOU, SIWEI, MD†
Provider ID: N/A

31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-JUL-23

OPTOMETRIST

ABDOU, MARINA AWADALLA, OD†
Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-FEB-22

ABDOU, MARINA AWADALLA, OD†
Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-FEB-22

ABDOU, MARINA AWADALLA, OD†
Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-JUN-23

ARCHIBALD, JOHN, OD†
Provider ID: N/A

31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-DEC-23

ARCHIBALD, JOHN, OD†
Provider ID: N/A

31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-JUL-23

BARR, AUSTIN, OD
Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-MAR-23

BARR, AUSTIN, OD
Provider ID: N/A

41637 MARGARITA RD STE

100
TEMECULA, CA 92591
Effective as of 01-NOV-22

BARR, AUSTIN, OD
Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-NOV-22

BARR, AUSTIN, OD
Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-NOV-22

COLEMAN, BROOKE, OD†
Provider ID: N/A

31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-FEB-22

COOPER, MICHAEL, OD†
Provider ID: N/A

31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-SEP-22

FARAMARZI, FARNAZ, OD
Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-JUL-23

FARAMARZI, FARNAZ, OD
Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-JUL-23

C1. 网络提供者名单 专科护理医生

FARAMARZI, FARNAZ, OD

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-DEC-23

LANE, KEVIN, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-SEP-09

LANE, KEVIN, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-JUL-23

LANE, KEVIN, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-FEB-11

LARSON, BRETT, OD†

Provider ID: N/A

31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-AUG-20

LARSON, BRETT, OD†

Provider ID: N/A

31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-FEB-22

MC DIARMID, JOHN, OD†

Provider ID: N/A

31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-FEB-22

MCINTYRE, DEBRA, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-DEC-17

MCINTYRE, DEBRA, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-DEC-17

MCINTYRE, DEBRA, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-DEC-17

MCINTYRE, DEBRA, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-JUL-23

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-JUL-23

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-JAN-22

OTOLARYNGOLOGY

GIAMMANCO, PIERRE, MD

Provider ID: N/A

27455 TIERRA ALTA WAY
STE A
TEMECULA, CA 92590
Effective as of 01-SEP-22

GIAMMANCO, PIERRE, MD

Provider ID: N/A

27455 TIERRA ALTA WAY
STE A
TEMECULA, CA 92590
Effective as of 01-SEP-22

KALKANIS, JAMES, MD†

Provider ID: N/A

40285 WINCHESTER RD
STE 104
TEMECULA, CA 92591
Effective as of 01-SEP-09

KALKANIS, JAMES, MD†

Provider ID: N/A

40285 WINCHESTER RD
STE 104
TEMECULA, CA 92591
Effective as of 01-JUL-23

KALKANIS, JAMES, MD†

Provider ID: N/A

40285 WINCHESTER RD
STE 104
TEMECULA, CA 92591
Effective as of 01-MAR-21

KALKANIS, JAMES, MD†

Provider ID: N/A

40285 WINCHESTER RD
STE 104
TEMECULA, CA 92591
Effective as of 01-AUG-20

C1. 网络提供者名单 专科护理医生

TINT, DERRICK, MD†

Provider ID: N/A

40285 WINCHESTER RD
STE 104
TEMECULA, CA 92591
Effective as of 01-AUG-21

PHYS MED/ REHAB PAIN MEDICINE

CHEN, HAMILTON, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-JUL-24

PHYSICAL MEDICINE / REHABILITATION

AILINANI, HARY, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAY-21

CHEN, HAMILTON, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-MAR-24

PHYSICIANS ASSISTANT

ASHIER, SAURABH, PA†

Provider ID: N/A

31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592
Effective as of 01-JUL-23

ASHIER, SAURABH, PA†

Provider ID: N/A

31573 RANCHO PUEBLO

RD STE 210
TEMECULA, CA 92592
Effective as of 01-JUL-23

ASHIER, SAURABH, PA†

Provider ID: N/A

31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592
Effective as of 01-AUG-22

BAKER, ROBERT, PA

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAR-24

BASIN, NATALIE, PA

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 102
TEMECULA, CA 92592
Teleservice
Effective as of 01-AUG-23

CAGATAY, HARRIER, PA†

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-AUG-20

LYNCH, GREGORY, PA†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

LYNCH, GREGORY, PA†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

LYNCH, GREGORY, PA†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

MITCHELL, PAUL, PA

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-JUN-18

ROWAN, RYAN, PA†

C1. 网络提供者名单

专科护理医生

Provider ID: N/A

44054 MARGARITA RD STE 1

TEMECULA, CA 92592

Effective as of 01-MAR-23

PODIATRIST

NEGRON, RICARDO, DPM

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-JUL-21

NEGRON, RICARDO, DPM

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-JUL-22

NEGRON, RICARDO, DPM

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-JUL-21

PSYCHIATRY

ANDERSEN, CLAIRE, MD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-DEC-20

ANDERSEN, CLAIRE, MD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-DEC-20

JAKKULA, JAGAN, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-NOV-23

JAKKULA, JAGAN, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-AUG-22

JAKKULA, JAGAN, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-NOV-23

JAKKULA, JAGAN, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-AUG-22

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-AUG-22

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-OCT-23

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-AUG-22

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-OCT-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

44045 MARGARITA RD STE 106

TEMECULA, CA 92592

Effective as of 01-JUL-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

44045 MARGARITA RD STE 106

TEMECULA, CA 92592

Effective as of 01-JUL-23

PERSAUD, PRIA, MD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-AUG-20

PERSAUD, PRIA, MD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-AUG-20

PHAM, ALISE, DO

Provider ID: N/A

44045 MARGARITA RD STE 106

TEMECULA, CA 92592

Effective as of 01-DEC-23

PHAM, ALISE, DO

Provider ID: N/A

44045 MARGARITA RD STE 106

TEMECULA, CA 92592

Effective as of 01-DEC-23

C1. 网络提供者名单 专科护理医生

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

☐ 29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-SEP-23

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

☐ 29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-AUG-22

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

☐ 29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-AUG-22

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

☐ 29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-SEP-23

PSYCHIATRY CHILD

ANDERSEN, CLAIRE, MD

Provider ID: N/A

☐ 41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-DEC-20

ANDERSEN, CLAIRE, MD

Provider ID: N/A

☐ 41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-DEC-20

PSYCHOLOGIST

THODE, LAURA, PSYD

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 102
TEMECULA, CA 92592

Effective as of 01-JUL-24

THODE, LAURA, PSYD

Provider ID: N/A

☐ 41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-MAR-24

THODE, LAURA, PSYD

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 102
TEMECULA, CA 92592

Effective as of 01-JUL-24

THODE, LAURA, PSYD

Provider ID: N/A

☐ 41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-MAR-24

WERNER, KRISTINE, PhD

Provider ID: N/A

☐ 27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590

Effective as of 01-MAY-18

WERNER, KRISTINE, PhD

Provider ID: N/A

☐ 27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590

Effective as of 01-MAY-18

WOODWORTH, JENNIFER,

PSYD

Provider ID: N/A

☐ 41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-JAN-21

WOODWORTH, JENNIFER, PSYD

Provider ID: N/A

☐ 43385 BUSINESS PARK DR
STE 110
TEMECULA, CA 92590

Effective as of 01-JAN-21

WOODWORTH, JENNIFER, PSYD

Provider ID: N/A

☐ 41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-JAN-21

WOODWORTH, JENNIFER, PSYD

Provider ID: N/A

☐ 43385 BUSINESS PARK DR
STE 110
TEMECULA, CA 92590

Effective as of 01-JAN-21

PULMONARY DISEASES

CHUA, WILLY, MD

Provider ID: N/A

☐ 44605 AVENIDA DE
MISSIONES STE 206
TEMECULA, CA 92592

Effective as of 01-APR-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

☐ 27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590

Effective as of 01-JUL-22

C1. 网络提供者名单 专科护理医生

HADDADIN, HASSAN, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590

Effective as of 01-APR-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590

Effective as of 01-APR-22

LEE, DAVID, MD

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592

Effective as of 01-APR-24

VEGA, RICARDO, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590

Effective as of 01-AUG-22

VEGA, RICARDO, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590

Effective as of 01-AUG-22

VEGA, RICARDO, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590

Effective as of 01-AUG-22

RADIATION ONCOLOGY

DAROUI, PARIMA, MD

Provider ID: N/A

44274 GEORGE CUSHMAN
CT STE 100
TEMECULA, CA 92592

Effective as of 01-APR-24

DAROUI, PARIMA, MD

Provider ID: N/A

44274 GEORGE CUSHMAN
CT STE 100
TEMECULA, CA 92592

Effective as of 01-APR-24

DAROUI, PARIMA, MD

Provider ID: N/A

44274 GEORGE CUSHMAN
CT
TEMECULA, CA 92592

Effective as of 01-JUN-24

DAROUI, PARIMA, MD

Provider ID: N/A

44274 GEORGE CUSHMAN
CT
TEMECULA, CA 92592

Effective as of 01-JUN-24

DAROUI, PARIMA, MD

Provider ID: N/A

44274 GEORGE CUSHMAN
CT
TEMECULA, CA 92592

Effective as of 01-JUN-24

REGISTERED PHYSICAL THERAPIST

AGENA, CYAN, PT†

Provider ID: N/A

27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590

Effective as of 01-NOV-21

AGENA, CYAN, PT†

Provider ID: N/A

27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590

Effective as of 01-NOV-21

ATKINS, WILLIAM, PT

Provider ID: N/A

27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590

Effective as of 01-JUN-23

ATKINS, WILLIAM, PT

Provider ID: N/A

27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590

Effective as of 01-JUN-23

ATKINS, WILLIAM, PT

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 101
TEMECULA, CA 92592

Effective as of 01-JUN-23

ATKINS, WILLIAM, PT

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 101
TEMECULA, CA 92592

Effective as of 01-JUN-23

BRYANS, BRIANNA, PT†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD
TEMECULA, CA 92591

Effective as of 01-JAN-22

BRYANS, BRIANNA, PT†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD

C1. 网络提供者名单
专科护理医生

TEMECULA, CA 92591
 Effective as of 01-JAN-22

BURRUEL, KAYLA, PT

Provider ID: N/A
 27699 JEFFERSON AVE STE 202
 TEMECULA, CA 92590
 Effective as of 01-SEP-23

BURRUEL, KAYLA, PT

Provider ID: N/A
 27699 JEFFERSON AVE STE 202
 TEMECULA, CA 92590
 Effective as of 01-SEP-23

BURRUEL, KAYLA, PT

Provider ID: N/A
 31515 RANCHO PUEBLO RD STE 101
 TEMECULA, CA 92592
 Effective as of 01-SEP-23

BURRUEL, KAYLA, PT

Provider ID: N/A
 31515 RANCHO PUEBLO RD STE 101
 TEMECULA, CA 92592
 Effective as of 01-SEP-23

ESTELLE, KIRA, PT

Provider ID: N/A
 31515 RANCHO PUEBLO RD STE 101
 TEMECULA, CA 92592
 Effective as of 01-MAY-23

ESTELLE, KIRA, PT

Provider ID: N/A
 31515 RANCHO PUEBLO RD STE 101
 TEMECULA, CA 92592
 Effective as of 01-MAY-23

ESTELLE, KIRA, PT

Provider ID: N/A
 27699 JEFFERSON AVE STE 202
 TEMECULA, CA 92590
 Effective as of 01-MAY-23

ESTELLE, KIRA, PT

Provider ID: N/A
 27699 JEFFERSON AVE STE 202
 TEMECULA, CA 92590
 Effective as of 01-MAY-23

HANSON, ADRIENNE, PT

Provider ID: N/A
 27699 JEFFERSON AVE STE 202
 TEMECULA, CA 92590
 Effective as of 01-JUL-23

HANSON, ADRIENNE, PT

Provider ID: N/A
 27699 JEFFERSON AVE STE 202
 TEMECULA, CA 92590
 Effective as of 01-JUL-23

HANSON, ADRIENNE, PT

Provider ID: N/A
 32785 TEMECULA PKWY STE 110
 TEMECULA, CA 92592
 Effective as of 01-JUL-24

HANSON, ADRIENNE, PT

Provider ID: N/A
 32785 TEMECULA PKWY STE 110
 TEMECULA, CA 92592
 Effective as of 01-JUL-24

HORN, TREVOR, PT†

Provider ID: N/A
 31515 RANCHO PUEBLO RD

STE 101
 TEMECULA, CA 92592
 Effective as of 01-APR-20

HORN, TREVOR, PT†

Provider ID: N/A
 31515 RANCHO PUEBLO RD STE 101
 TEMECULA, CA 92592
 Effective as of 01-APR-20

HORN, TREVOR, PT†

Provider ID: N/A
 27699 JEFFERSON AVE STE 202
 TEMECULA, CA 92590
 Effective as of 01-APR-20

HORN, TREVOR, PT†

Provider ID: N/A
 27699 JEFFERSON AVE STE 202
 TEMECULA, CA 92590
 Effective as of 01-APR-20

ROLTSCH, IAN, PT

Provider ID: N/A
 27699 JEFFERSON AVE STE 202
 TEMECULA, CA 92590
 Effective as of 01-MAY-23

ROLTSCH, IAN, PT

Provider ID: N/A
 27699 JEFFERSON AVE STE 202
 TEMECULA, CA 92590
 Effective as of 01-MAY-23

ROLTSCH, IAN, PT

Provider ID: N/A
 32785 TEMECULA PKWY STE 110
 TEMECULA, CA 92592
 Effective as of 01-JUL-24

C1. 网络提供者名单 专科护理医生

ROLTSCH, IAN, PT

Provider ID: N/A

32785 TEMECULA PKWY
STE 110
TEMECULA, CA 92592
Effective as of 01-JUL-24

SABIN, SCOTT, PT

Provider ID: N/A

32785 TEMECULA PKWY
STE 110
TEMECULA, CA 92592
Effective as of 01-JUL-24

SABIN, SCOTT, PT

Provider ID: N/A

32785 TEMECULA PKWY
STE 110
TEMECULA, CA 92592
Effective as of 01-JUL-24

SIVA, ANDREW, PT

Provider ID: N/A

32785 TEMECULA PKWY
STE 110
TEMECULA, CA 92592
Effective as of 01-JUL-24

SIVA, ANDREW, PT

Provider ID: N/A

32785 TEMECULA PKWY
STE 110
TEMECULA, CA 92592
Effective as of 01-JUL-24

SIVA, ANDREW, PT†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 4
TEMECULA, CA 92591
Effective as of 01-JUN-21

SIVA, ANDREW, PT†

Provider ID: N/A

27699 JEFFERSON AVE STE 202
TEMECULA, CA 92590
Effective as of 01-NOV-21

SIVA, ANDREW, PT†

Provider ID: N/A

27699 JEFFERSON AVE STE 202
TEMECULA, CA 92590
Effective as of 01-NOV-21

SIVA, ANDREW, PT†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 4
TEMECULA, CA 92591
Effective as of 01-JUN-21

SIVA, ANDREW, PT†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 234
TEMECULA, CA 92591
Effective as of 01-NOV-21

SIVA, ANDREW, PT†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 234
TEMECULA, CA 92591
Effective as of 01-NOV-21

VIZCARRA, DAVID, PT†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 234
TEMECULA, CA 92591
Effective as of 01-JUN-20

VIZCARRA, DAVID, PT†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 234
TEMECULA, CA 92591

Effective as of 01-JUN-20

VIZCARRA, DAVID, PT

Provider ID: N/A

32785 TEMECULA PKWY
STE 110
TEMECULA, CA 92592
Effective as of 01-JUL-24

VIZCARRA, DAVID, PT

Provider ID: N/A

32785 TEMECULA PKWY
STE 110
TEMECULA, CA 92592
Effective as of 01-JUL-24

RHEUMATOLOGY

AL HARASH, ABDALHAMID, MD

Provider ID: N/A

31493 RANCHO PUEBLO
RD STE 204
TEMECULA, CA 92592
Effective as of 01-JUL-24

AL HARASH, ABDALHAMID, MD

Provider ID: N/A

31493 RANCHO PUEBLO
RD STE 204
TEMECULA, CA 92592
Effective as of 01-JUL-24

AL HARASH, ABDALHAMID, MD†

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 205
TEMECULA, CA 92592
Effective as of 01-AUG-23

AL HARASH, ABDALHAMID, MD

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

31493 RANCHO PUEBLO
RD STE 204
TEMECULA, CA 92592
Effective as of 01-JUL-24

AL HARASH, ABDALHAMID, MD

Provider ID: N/A

31493 RANCHO PUEBLO
RD STE 204
TEMECULA, CA 92592
Effective as of 01-JUL-24

AL HARASH, ABDALHAMID, MD†

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 205
TEMECULA, CA 92592
Effective as of 01-AUG-23

BRAVO, ARLENE, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-APR-21

COLBURN, KEITH, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-MAR-21

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-MAR-21

MEHTA, AMAL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD

STE 203
TEMECULA, CA 92592
Effective as of 01-JUL-23

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-SEP-18

MEHTA, AMAL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-SEP-18

RAMASWAMY, DHARMARAJAN, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-SEP-18

TRIVEDI, JANKI, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-SEP-18

SPEECH PATHOLOGIST

O'DORAN, KAYLA, SP

Provider ID: N/A

40764 WINCHESTER RD
STE 590
TEMECULA, CA 92591
Teleservice

Effective as of 01-JUN-22

O'DORAN, KAYLA, SP

Provider ID: N/A

40764 WINCHESTER RD
STE 590
TEMECULA, CA 92591

Teleservice

Effective as of 01-JUN-22

WIRTH, LAURA, SP

Provider ID: N/A

40764 WINCHESTER RD
STE 590
TEMECULA, CA 92591
Effective as of 01-JUN-22

WIRTH, LAURA, SP

Provider ID: N/A

40764 WINCHESTER RD
STE 590
TEMECULA, CA 92591
Effective as of 01-JUN-22

SURGERY COLON SURGERY

GORSKI, TITO, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

GORSKI, TITO, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-16

GORSKI, TITO, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-15

SURGERY GENERAL

C1. 网络提供者名单

专科护理医生

BARRERA, KAYLENE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

CORDERO, RAYMUND, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

CORDERO, RAYMUND, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21

CORDERO, RAYMUND, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-15

CORDERO, RAYMUND, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

DADA, STEPHEN, MD

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-23

ESSIEN, FRANCIS, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

ESSIEN, FRANCIS, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-16

ESSIEN, FRANCIS, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-15

ESSIEN, FRANCIS, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-MAY-22

ESSIEN, FRANCIS, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-15

ESSIEN, FRANCIS, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22

ESSIEN, FRANCIS, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-JUN-24

GORSKI, TITO, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-AUG-16

GORSKI, TITO, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22

GORSKI, YARA, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-16

GORSKI, TITO, MD†

C1. 网络提供者名单

专科护理医生

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

GORSKI, YARA, MD†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-16

JOHNSEN, HEGE, MD†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202

TEMECULA, CA 92592
Effective as of 01-MAY-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-AUG-16

JOHNSEN, HEGE, MD†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-17

MAC, OLIVIA, MD†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-19

NAFIU, BOLAJI, MD†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-20

NAFIU, BOLAJI, MD†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

NOURI, SARVENAZ, MD†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-NOV-22

ROGHANI, REZA, MD

Provider ID: N/A

☐ 40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-MAR-23

SHAPER, EMANUEL, MD

Provider ID: N/A

☐ 31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592
Effective as of 01-MAY-24

SHAPER, EMANUEL, MD

Provider ID: N/A

☐ 31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592
Effective as of 01-FEB-24

TIU, BRIAN, MD†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

TIU, BRIAN, MD†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-AUG-18

VU, STEVE, MD

Provider ID: N/A

☐ 27699 JEFFERSON AVE STE
305

C1. 网络提供者名单 专科护理医生

TEMECULA, CA 92590
Effective as of 01-APR-23

VU, STEVE, MD

Provider ID: N/A

📄 27699 JEFFERSON AVE STE
305

TEMECULA, CA 92590
Effective as of 01-APR-23

VU, STEVE, MD

Provider ID: N/A

📄 27699 JEFFERSON AVE STE
305

TEMECULA, CA 92590
Effective as of 01-APR-23

VU, STEVE, MD

Provider ID: N/A

📄 27699 JEFFERSON AVE STE
305

TEMECULA, CA 92590
Effective as of 01-APR-23

WANG, XIUJIE, MD†

Provider ID: N/A

📄 31573 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-SEP-19

WANG, NAN, MD†

Provider ID: N/A

📄 31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592

Effective as of 01-JUL-22

WANG, XIUJIE, MD†

Provider ID: N/A

📄 31573 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-MAR-20

WANG, NAN, MD†

Provider ID: N/A

📄 31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592

Effective as of 01-AUG-22

WANG, XIUJIE, MD†

Provider ID: N/A

📄 31573 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-DEC-21

SURGERY GENERAL VASCULAR

GORSKI, YARA, MD†

Provider ID: N/A

📄 31573 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-AUG-16

GORSKI, YARA, MD†

Provider ID: N/A

📄 31573 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-JUN-15

GORSKI, YARA, MD†

Provider ID: N/A

📄 31573 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-MAY-22

GREWAL, PRABHJOT, MD†

Provider ID: N/A

📄 27290 MADISON AVE STE
102
TEMECULA, CA 92590

Effective as of 01-NOV-20

GREWAL, PRABHJOT, MD†

Provider ID: N/A

📄 27290 MADISON AVE STE
102
TEMECULA, CA 92590

Effective as of 01-JUN-20

KARMUR, AMIT, DO†

Provider ID: N/A

📄 31573 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-MAY-22

KARMUR, AMIT, DO†

Provider ID: N/A

📄 31573 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-MAY-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

📄 31573 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-MAY-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

📄 31573 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-DEC-21

TIU, BRIAN, MD†

Provider ID: N/A

📄 31573 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-APR-22

TIU, BRIAN, MD†

Provider ID: N/A

📄 31573 RANCHO PUEBLO

C1. 网络提供者名单 专科护理医生

RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

TIU, BRIAN, MD†

Provider ID: N/A
☑ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

WANG, XIUJIE, MD†

Provider ID: N/A
☑ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-OCT-20

WANG, XIUJIE, MD†

Provider ID: N/A
☑ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

WANG, XIUJIE, MD†

Provider ID: N/A
☑ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-OCT-20

SURGERY HAND

KIM, KEVIN, DO

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

KIM, KEVIN, DO

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590
Effective as of 01-FEB-23

KIM, KEVIN, DO

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

KIM, KEVIN, DO

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

MONEYHON, MICHAEL, MD

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

MONEYHON, MICHAEL, MD

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

MONEYHON, MICHAEL, MD

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

MONEYHON, MICHAEL, MD

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

TRAN, TUAN, MD

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

TRAN, TUAN, MD

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-APR-23

TRAN, TUAN, MD

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-APR-23

TRAN, TUAN, MD

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-APR-23

SURGERY ORTHOPEDIC

ABITBOL, JEAN-JACQUES, MD†

Provider ID: N/A
☑ 28975 OLD TOWN FRONT
ST STE 200
TEMECULA, CA 92590
Effective as of 01-JUN-22

AMERI, BIJAN, DO

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

C1. 网络提供者名单 专科护理医生

AMERI, BIJAN, DO

Provider ID: N/A

☞ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

AMERI, BIJAN, DO

Provider ID: N/A

☞ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

BIAMA, RICHARD, MD

Provider ID: N/A

☞ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

BIAMA, RICHARD, MD

Provider ID: N/A

☞ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

BIAMA, RICHARD, MD

Provider ID: N/A

☞ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

BIAMA, RICHARD, MD

Provider ID: N/A

☞ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

ELLIS, JOHN, MD†

Provider ID: N/A

☞ 40949 WINCHESTER RD

TEMECULA, CA 92591
Effective as of 01-SEP-22

ELLIS, JOHN, MD†

Provider ID: N/A

☞ 40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUL-23

ELLIS, JOHN, MD†

Provider ID: N/A

☞ 40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUN-21

FOSTER, ANDREW DAVID, MD

Provider ID: N/A

☞ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

FOSTER, ANDREW DAVID, MD

Provider ID: N/A

☞ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

FOSTER, ANDREW DAVID, MD

Provider ID: N/A

☞ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

FOSTER, ANDREW DAVID, MD

Provider ID: N/A

☞ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

FRENCH, MICHAEL, DO†

Provider ID: N/A

☞ 40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUL-23

FRENCH, MICHAEL, DO†

Provider ID: N/A

☞ 40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-DEC-22

FRENCH, MICHAEL, DO†

Provider ID: N/A

☞ 40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUL-21

FRENCH, MICHAEL, DO†

Provider ID: N/A

☞ 40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-OCT-22

KELLEY, STEVEN, MD

Provider ID: N/A

☞ 40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUL-23

KELLEY, STEVEN, MD

Provider ID: N/A

☞ 40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUN-21

KELLEY, STEVEN, MD

Provider ID: N/A

☞ 40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-DEC-22

KELLEY, STEVEN, MD

Provider ID: N/A

☞ 40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-DEC-22

C1. 网络提供者名单 专科护理医生

LE, VU, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

LE, VU, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

LE, VU, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

LE, VU, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

LIN, RICHARD, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-DEC-22

LIN, RICHARD, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-DEC-22

LUNA, MARIO, MD†

Provider ID: N/A

28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590*
Effective as of 01-JUL-20

LUNA, MARIO, MD†

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-JUL-16

RICHTER, ALEXANDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

RICHTER, ALEXANDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

RICHTER, ALEXANDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

RICHTER, ALEXANDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

ROBINSON, MATTHEW, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591*
Effective as of 01-JUL-23

ROBINSON, MATTHEW, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUL-22

ROBINSON, MATTHEW, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUL-22

ROBINSON, MATTHEW, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUN-21

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591*
Effective as of 01-JUN-23

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591*
Effective as of 01-JUN-23

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591*
Effective as of 01-JUN-23

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-MAR-23

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

C1. 网络提供者名单 专科护理医生

Effective as of 01-MAR-23

ROSENBERG, GARY, DO

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

ROSENBERG, GARY, DO

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

ROSENBERG, GARY, DO

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

ROSENBERG, GARY, DO

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

SCHULTZEL, MARK, MD†

Provider ID: N/A

☐ 31170 TEMECULA PKWY
STE 100
TEMECULA, CA 92592

Teleservice

Effective as of 01-OCT-22

THOLCKE, LOREN, DO

Provider ID: N/A

☐ 40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-JAN-24

THOLCKE, LOREN, DO

Provider ID: N/A

☐ 40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-AUG-23

THOLCKE, LOREN, DO

Provider ID: N/A

☐ 40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-JAN-24

THOLCKE, LOREN, DO

Provider ID: N/A

☐ 40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-MAY-24

UPPAL, GURVINDER, MD

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

UPPAL, GURVINDER, MD

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

UPPAL, GURVINDER, MD

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

SURGERY PLASTIC

CHAO, JAMES, MD†

Provider ID: N/A

☐ 27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590

Effective as of 01-APR-20

MUDGE, BRADLEY, MD†

Provider ID: N/A

☐ 44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Teleservice

Effective as of 01-NOV-19

MUDGE, BRADLEY, MD†

Provider ID: N/A

☐ 44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Teleservice

Effective as of 01-OCT-19

URIAS, DANIEL, MD

Provider ID: N/A

☐ 27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590

Effective as of 01-APR-24

VU, STEVE, MD

Provider ID: N/A

☐ 27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590

Effective as of 01-JUN-23

VU, STEVE, MD

Provider ID: N/A

☐ 27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590

Effective as of 01-JUN-23

SURGERY THORACIC

BANSAL, NEERAJ, MD

Provider ID: N/A


☐ 31573 RANCHO PUEBLO
RD STE 210

C1. 网络提供者名单 专科护理医生

TEMECULA, CA 92592
Effective as of 01-APR-23


BANSAL, NEERAJ, MD

Provider ID: N/A

 31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592
Effective as of 01-MAY-23


RASI, ALFREDO, MD†

Provider ID: N/A

 31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592
Effective as of 01-NOV-20

WANG, NAN, MD†


Provider ID: N/A

 31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592
Effective as of 01-JUL-24

SURGICAL ONCOLOGY


SHAPER, EMANUEL, MD

Provider ID: N/A

 31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592
Effective as of 01-JUL-24

SHAPER, EMANUEL, MD

Provider ID: N/A

 31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592
Effective as of 01-JUL-24

UROLOGY

BRODAK, PHILIP, MD


Provider ID: N/A

 31565 RANCHO PUEBLO

RD STE 102B
TEMECULA, CA 92592
Effective as of 01-AUG-24


CONNER, RICHARD, MD†

Provider ID: N/A

 31565 RANCHO PUEBLO
RD STE 102B
TEMECULA, CA 92592
Effective as of 01-MAY-20


CRISELL, MONISHA, MD†

Provider ID: N/A

 31565 RANCHO PUEBLO
RD STE 102B
TEMECULA, CA 92592
Effective as of 01-MAY-20


LUTTGE, SCOTT, MD

Provider ID: N/A

 31565 RANCHO PUEBLO
RD STE 205
TEMECULA, CA 92592
Effective as of 01-MAY-23


TALANKI, VARUN, MD

Provider ID: N/A

 31565 RANCHO PUEBLO
RD STE 102B
TEMECULA, CA 92592
Effective as of 01-MAY-22

TALANKI, VARUN, MD

Provider ID: N/A

 31565 RANCHO PUEBLO
RD STE 102B
TEMECULA, CA 92592
Effective as of 01-MAY-22

FAMILY PRACTICE

RAY, ANNE, MD

Provider ID: N/A

 31951 DOVE CANYON DR
TRABUCO CANYON, CA

92679*
Effective as of 01-DEC-23

CERTIFIED REGISTERED NURSE MIDWIFE

ALLEN, ANNE, CRNM†

Provider ID: N/A

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Effective as of 01-JUL-22

ONEILL, THERESE, CRNM


Provider ID: N/A

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Effective as of 01-NOV-23

FAMILY PRACTICE


CASTANER, ZALYA, MD†

Provider ID: N/A

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Teleservice
Effective as of 01-FEB-24

MCHENRY, KATHRYN, DO

Provider ID: N/A

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Effective as of 01-FEB-24


PATEL, RAKESH, MD

Provider ID: N/A

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Effective as of 01-FEB-24

PATEL, JITENBHAI, MD

Provider ID: N/A

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA
92082*
Effective as of 01-FEB-24

C1. 网络提供者名单 专科护理医生

SCHULTZ, JAMES, MD

Provider ID: N/A

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Effective as of 01-FEB-24

PHYSICIANS ASSISTANT

WICKWARE, TRACY, PA

Provider ID: N/A

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Effective as of 01-MAY-23

ALLERGY IMMUNOLOGY

VOLPP, HEATHER, MD†

Provider ID: N/A

2067 W VISTA WAY
VISTA, CA 92083
Effective as of 01-MAR-14

VOLPP, HEATHER, MD†

Provider ID: N/A

2067 W VISTA WAY
VISTA, CA 92083
Effective as of 01-JAN-24

ZIERING, ROBERT, MD†

Provider ID: N/A

2067 W VISTA WAY STE 140
VISTA, CA 92083
Effective as of 01-AUG-20

ZIERING, ROBERT, MD†

Provider ID: N/A

2067 W VISTA WAY STE 140
VISTA, CA 92083
Effective as of 01-SEP-21

ZIERING, ROBERT, MD†

Provider ID: N/A

2067 W VISTA WAY STE 140
VISTA, CA 92083

Effective as of 01-JUL-01

ZIERING, ROBERT, MD†

Provider ID: N/A

2067 W VISTA WAY STE 140
VISTA, CA 92083
Effective as of 01-SEP-22

CARDIAC

ELECTROPHYSIOLOGY

BUI, HANH, MD

Provider ID: N/A

906 SYCAMORE AVE STE
104
VISTA, CA 92081

Teleservice

Effective as of 01-MAY-23

CARDIOVASCULAR DISEASE

BUI, HANH, MD

Provider ID: N/A

906 SYCAMORE AVE STE
104
VISTA, CA 92081

Teleservice

Effective as of 01-MAY-23

DO, HULBERT, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

DO, HULBERT, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-OCT-21

PARIKH, MILIND, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

PARKS, MONICA, MD

Provider ID: N/A

906 SYCAMORE AVE STE
104
VISTA, CA 92081
Teleservice
Effective as of 01-JAN-24

REDDY, PAVAN, MD

Provider ID: N/A

2095 W VISTA WAY STE 107
VISTA, CA 92083
Effective as of 01-SEP-24

CERTIFIED

ACUPUNCTURIST

DUFFIELD, GARY, LAC

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-SEP-24

DUFFIELD, GARY, LAC

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-SEP-24

C1. 网络提供者名单 专科护理医生

DUFFIELD, GARY, LAC

Provider ID: N/A

📄 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-SEP-24

DUFFIELD, GARY, LAC

Provider ID: N/A

📄 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-SEP-24

SONG, CAROL, LAC

Provider ID: N/A

📄 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

CERTIFIED NURSE PRACTITIONER

AYELE, MAHOGANY, NP

Provider ID: N/A

📄 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

BAEK, KILHYO, NP

Provider ID: N/A

📄 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-FEB-24

BAEK, KILHYO, NP

Provider ID: N/A

📄 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-FEB-24

BAEZ, ELIZABETH, NP

Provider ID: N/A

📄 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

BJORNSON, MICHELE, NP

Provider ID: N/A

📄 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

BJORNSON, MICHELE, NP

Provider ID: N/A

📄 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JUN-24

BRAAMSE, CHLOE, NP

Provider ID: N/A

📄 204 S SANTA FE AVE
VISTA, CA 92084

Teleservice

Effective as of 01-JUN-23

CARDINELL, ANNA, NP†

Provider ID: N/A

📄 910 SYCAMORE AVE STE
270
VISTA, CA 92081

Effective as of 01-AUG-22

CHAMBERLIN, KALIANA, NP

Provider ID: N/A

📄 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-21

CHATHAM, OLIVIA, NP†

Provider ID: N/A

📄 950 CIVIC CENTER DR STE
A
VISTA, CA 92083

Teleservice

Effective as of 01-NOV-22

CHILAKA, SAMUEL, NP

Provider ID: N/A

📄 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

CHILAKA, SAMUEL, NP

Provider ID: N/A

📄 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

CHRISTY, TYLER, NPF

Provider ID: N/A

📄 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

CHRISTY, TYLER, NPF

Provider ID: N/A

📄 105 DURIAN ST STE A
VISTA, CA 92083

Effective as of 01-JAN-24

CHRISTY, TYLER, NPF

Provider ID: N/A

📄 517 N HORNE ST
VISTA, CA 92083

Effective as of 01-JAN-24

CHRISTY, TYLER, NPF

Provider ID: N/A

📄 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

CLARK, CYNTHIA, NP†

Provider ID: N/A

📄 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-21

CORY, ALLISON, NP

Provider ID: N/A

📄 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-21

CORY, ALLISON, NP

C1. 网络提供者名单

专科护理医生

Provider ID: N/A

105 DURIAN ST STE B
VISTA, CA 92083
Effective as of 01-FEB-24

CORY, ALLISON, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

CROTTEAU, ALEX, NP

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084
Effective as of 01-MAY-21

DEKKERS-O'HARE, INGRID, NP†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-21

DO, JACKIE, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-AUG-24

DO, JACKIE, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-AUG-24

DO, JACKIE, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

EKLUND, BONNIE, NP†

Provider ID: N/A

134 GRAPEVINE RD

VISTA, CA 92083
Effective as of 01-JAN-24

EKLUND, BONNIE, NP†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

HALGEDAHL, YI TING, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-21

HALGEDAHL, YI TING, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

HOWELL, AMANDA, NP

Provider ID: N/A

105 DURIAN ST STE A
VISTA, CA 92083
Effective as of 01-JAN-24

HOWELL, AMANDA, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

HOWELL, AMANDA, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

HUERTA, STEVEN, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-24

HUERTA, STEVEN, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JUL-24

JONES, STACY, NP

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084
Effective as of 01-MAY-21

KAYE, ALYSON, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-APR-24

KAYE, ALYSON, NP

Provider ID: N/A

105 DURIAN ST
VISTA, CA 92083
Effective as of 01-FEB-24

KAYE, ALYSON, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

KELLEHER, BRIDGET, NP

Provider ID: N/A

105 DURIAN ST STE B
VISTA, CA 92083
Effective as of 01-FEB-24

KELLEHER, BRIDGET, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-APR-24

KELLEHER, BRIDGET, NP

Provider ID: N/A

1000 VALE TERRACE DR

C1. 网络提供者名单 专科护理医生

VISTA, CA 92084
Effective as of 01-APR-24

KESSLER, JENNIFER, NP

Provider ID: N/A
☑ 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-DEC-23

KORMANIK, PATRICIA, NP†

Provider ID: N/A
☑ 910 SYCAMORE AVE STE
102
VISTA, CA 92081
Effective as of 01-JUL-21

MERRITT, MARISA, NP

Provider ID: N/A
☑ 204 S SANTA FE AVE
VISTA, CA 92084
Teleservice
Effective as of 01-AUG-22

NAVA, PETER, NP

Provider ID: N/A
☑ 134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

NAVA, PETER, NP

Provider ID: N/A
☑ 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

NAVARRO, STEVEN, NPF

Provider ID: N/A
☑ 204 S SANTA FE AVE
VISTA, CA 92084
Effective as of 01-JUN-24

NICHOLAS, ESTELA, NP

Provider ID: N/A
☑ 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-21

NIZHEBORSKY, OKSANA, NP

Provider ID: N/A
☑ 2023 W VISTA WAY STE B
VISTA, CA 92083
Effective as of 01-SEP-24

NIZHEBORSKY, OKSANA, NP

Provider ID: N/A
☑ 2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-SEP-24

PATEMAN, CAROLYN, NP

Provider ID: N/A
☑ 134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

PATEMAN, CAROLYN, NP

Provider ID: N/A
☑ 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-21

PRITZKER, JOELY, NP

Provider ID: N/A
☑ 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-21

PRITZKER, JOELY, NP

Provider ID: N/A
☑ 134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-FEB-24

ROSS, BRIDGET, NPF

Provider ID: N/A
☑ 204 S SANTA FE AVE
VISTA, CA 92084
Teleservice
Effective as of 01-DEC-21

SCHAEPE, RHODORA, NP

Provider ID: N/A
☑ 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAR-24

SHAHBAZ, LINNAE, NPF

Provider ID: N/A
☑ 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAR-24

SHAHBAZ, LINNAE, NPF

Provider ID: N/A
☑ 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-APR-24

SRILASAK, MICHELE, NP†

Provider ID: N/A
☑ 910 SYCAMORE AVE STE
102
VISTA, CA 92081
Effective as of 01-JUL-21

TABARANZA, PHOEBE, NPF

Provider ID: N/A
☑ 204 S SANTA FE AVE
VISTA, CA 92084
Teleservice
Effective as of 01-OCT-22

WAGNER, TASIA, NP

Provider ID: N/A
☑ 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-APR-24

WAGNER, TASIA, NP

Provider ID: N/A
☑ 134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-APR-24

WAGNER, TASIA, NP

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

105 DURIAN ST
VISTA, CA 92083
Effective as of 01-FEB-24

WILLIAMS, JINA, NP

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-SEP-22

WINDHAM, SUZONNE, NP

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

WINDHAM, SUZONNE, NP

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

YCASAS, EMILY, NP

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

YCASAS, EMILY, NP

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAY-23

CERTIFIED REGISTERED NURSE MIDWIFE

GUIDI, CASEY, CRNM

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUN-23

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

CHIROPRACTOR

CORTEZ, JAIME, DC†

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

CORTEZ, JAIME, DC†

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

JU, NATHANIEL, DC†

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

JU, NATHANIEL, DC†

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JUL-22

JU, NATHANIEL, DC†

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

JU, NATHANIEL, DC†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

JU, NATHANIEL, DC†

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

LOVERN, JENNIFER, DC

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUN-24

LOVERN, JENNIFER, DC

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-AUG-24

LOVERN, JENNIFER, DC

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-AUG-24

LOVERN, JENNIFER, DC

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JUN-24

OLSON, ROBERT, DC

Provider ID: N/A
906 SYCAMORE AVE STE
210
VISTA, CA 92081
Effective as of 01-SEP-21

DERMATOLOGY

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

1934 VIA CTR STE B
VISTA, CA 92081
Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1934 VIA CTR STE B
VISTA, CA 92081
Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1934 VIA CTR STE B
VISTA, CA 92081
Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1934 VIA CTR STE B
VISTA, CA 92081
Effective as of 01-JAN-24

HENDERSON, GREGORY, MD[†]

Provider ID: N/A

1934 VIA CTR STE B
VISTA, CA 92081
Effective as of 01-SEP-21

HENDERSON, GREGORY, MD[†]

Provider ID: N/A

2395 S MELROSE DR
VISTA, CA 92081
Effective as of 01-SEP-21

STEIN, ALEXANDER, MD

Provider ID: N/A

2067 W VISTA WAY
VISTA, CA 92083
Effective as of 01-JUL-23

EMERGENCY MEDICINE

ZIMMERMAN, DAVID, MD

Provider ID: N/A

145 THUNDER DR

VISTA, CA 92083
Effective as of 01-MAY-24

FAMILY PRACTICE

MARTINEZ, LESLY, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*
Effective as of 01-JUL-24

MARTINEZ, LESLY, MD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083*
Effective as of 01-JUL-24

PUDOL, CHRISTOPHER, DO

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Teleservice

Effective as of 01-MAR-24

ROJAS, STEVEN, MD

Provider ID: N/A

1840 WEST DR
VISTA, CA 92083
Effective as of 01-SEP-24

SNYDER, OLE, MD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083*
Effective as of 01-JUN-24

SNYDER, OLE, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*
Effective as of 01-JUN-24

TRAN, DAO, DO

Provider ID: N/A

1000 VALE TERRACE DR

VISTA, CA 92084*
Effective as of 01-MAY-23

TRAN, DAO, DO

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-MAY-23

VIDAL, MONICA, DO[†]

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083*
Effective as of 01-JUL-24

VIDAL, MONICA, DO[†]

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*
Effective as of 01-JUL-24

GENERAL PRACTICE

TANUS, DEBORAH, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-NOV-23

GYNECOLOGIC

ONCOLOGY

ESKANDER, RAMEZ, MD[†]

Provider ID: N/A

910 SYCAMORE AVE STE
102
VISTA, CA 92081
Effective as of 01-JUL-21

HEMATOLOGY /

ONCOLOGY

ANDREY, JEFFREY, MD[†]

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-SEP-22

ANDREY, JEFFREY, MD†
Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083*
Effective as of 01-APR-23

BASERI, BABAK, MD†
Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-JUL-22

BASERI, BABAK, MD
Provider ID: N/A

1250 SUNSET DR STE 101
VISTA, CA 92081
Effective as of 01-APR-24

BASERI, BABAK, MD†
Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083*
Effective as of 01-APR-23

MARJON, PHILIP, MD†
Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083*
Effective as of 01-APR-23

PARSI, HOOMAN, MD
Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-JUL-23

SARWARI, NAWID, MD
Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-JUL-23

SAUNDERS, PHILLIP, DO†
Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-NOV-22

SAUNDERS, PHILLIP, DO†
Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083*
Effective as of 01-APR-23

SCHWERKOSKE, JOHN, MD†
Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-JUL-23

SCHWERKOSKE, JOHN, MD†
Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-SEP-22

SUBRAMANIAN, RUPA, MD†
Provider ID: N/A

910 SYCAMORE AVE STE
102
VISTA, CA 92081
Effective as of 01-AUG-20

HOSPICE AND PALLIATIVE MEDICINE

RUBENSIK, TAMARA, MD†
Provider ID: N/A

910 SYCAMORE AVE STE
102
VISTA, CA 92081
Effective as of 01-JUL-21

HOSPITALIST MD/DO

LOPEZ, SANDRA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

INTERNAL MEDICINE

BAUTISTA, JENNIFER, MD
Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-FEB-23

PARIKH, MILIND, DO†
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

SHABANIAN, LEILA, MD
Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083*
Effective as of 01-MAY-24

SHABANIAN, LEILA, MD
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAY-24

INTERVENTIONAL CARDIOLOGY

BUI, HANH, MD
Provider ID: N/A

906 SYCAMORE AVE STE
104
VISTA, CA 92081
Teleservice
Effective as of 01-JAN-24

DO, HULBERT, MD†
Provider ID: N/A

C1. 网络提供者名单 专科护理医生

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

KABRA, ASHISH, MD

Provider ID: N/A

906 SYCAMORE AVE STE
104
VISTA, CA 92081
Effective as of 01-JAN-24

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

PARKS, MONICA, MD

Provider ID: N/A

906 SYCAMORE AVE STE
104
VISTA, CA 92081

Teleservice

Effective as of 01-OCT-23

LICENSED CLINICAL SOCIAL WORKER

ACOSTA, AZUCENA, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

ACOSTA, AZUCENA, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

CRUZ, VANESSA, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-21

CRUZ, VANESSA, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUN-23

CRUZ, VANESSA, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-21

DOUGHERTY, CHRISTINE, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-FEB-24

DOUGHERTY, CHRISTINE, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

DOUGHERTY, CHRISTINE, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

GODINEZ, BRENDA, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

GODINEZ, BRENDA, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

MEJIA, SHAYNE, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-AUG-24

MENDEZ, ADRIANA, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

MENDEZ, ADRIANA, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Teleservice
Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Teleservice
Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Teleservice
Effective as of 01-JUN-23

C1. 网络提供者名单 专科护理医生

SANCHEZ, ADRIANA, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

SANCHEZ, ADRIANA, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

SMITH, SONYA, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

SMITH, SONYA, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

WILSON, CARLENE, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

WILSON, CARLENE, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUN-23

ZAPPONE, ALIDA, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Teleservice

Effective as of 01-JAN-24

ZAPPONE, ALIDA, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Teleservice

Effective as of 01-JAN-24

MARRIAGE FAMILY THERAPIST

GROVE, VICKI, MFT

Provider ID: N/A

2385 S MELROSE DR
VISTA, CA 92081

Effective as of 01-JAN-24

MEYERHOF, GRETA, MFT†

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

MEYERHOF, GRETA, MFT†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

SLOAN, CRISTINA, MFT

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-MAY-24

NEPHROLOGY

KAYAL, ANAS, MD

Provider ID: N/A

2095 W VISTA WAY STE 216
VISTA, CA 92083

Effective as of 01-MAY-24

KAYAL, ANAS, MD

Provider ID: N/A

2095 W VISTA WAY STE 216

VISTA, CA 92083

Effective as of 01-JUN-24

OBSTETRICS / GYNECOLOGY

ARRIETA, IRIS, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

ARRIETA, IRIS, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

ARRIETA, IRIS, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-OCT-21

BINDER, PRATIBHA, MD†

Provider ID: N/A

910 SYCAMORE AVE STE
102

VISTA, CA 92081

Effective as of 01-JUL-21

DIETERICH, FREDERICK, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

FRANCIS, LARRY, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

FRANCIS, LARRY, MD†

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

FRANCIS, LARRY, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-DEC-22

FRANCIS, LARRY, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-DEC-22

HAWKINS, MELISSA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

HAWKINS, MELISSA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

HAWKINS, MELISSA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-SEP-14

KARANIKKIS, CHRISTOS, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

KARANIKKIS, CHRISTOS, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAR-18

KARANIKKIS, CHRISTOS, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

KARANIKKIS, CHRISTOS, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

LEON, JOSUE, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

LEON, JOSUE, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUN-21

LEONARD, LISA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

LEONARD, LISA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

LEONARD, LISA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

LOPEZ, SANDRA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*
Effective as of 01-APR-12

MAZAREI, RAHELE, DO

Provider ID: N/A

2067 W VISTA WAY STE 200
VISTA, CA 92083
Effective as of 01-JUN-23

QUAN, MARIA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

QUAN, MARIA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

QUAN, MARIA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAR-23

SUNTAY, BERK, MD

Provider ID: N/A

2067 W VISTA WAY STE 200
VISTA, CA 92083
Effective as of 01-JUN-23

OCCUPATIONAL THERAPIST

CHAVEZ-SERRANO, VIOLETA, OT

Provider ID: N/A

1840 WEST DR
VISTA, CA 92083
Effective as of 01-FEB-24

OPHTHALMOLOGY

C1. 网络提供者名单 专科护理医生

AMINLARI, ARDALAN, MD

Provider ID: N/A

1930 VIA CENTRE DR
VISTA, CA 92081

Effective as of 01-SEP-21

CHEN, HEATHER, MD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Effective as of 01-SEP-21

CHEN, HEATHER, MD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Effective as of 01-NOV-21

JOHNSTON, ERIC, MD

Provider ID: N/A

1930 VIA CTR
VISTA, CA 92081

Effective as of 01-SEP-21

STEPHENS, BENJAMIN, MD

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Effective as of 01-JUL-23

STEPHENS, BENJAMIN, MD

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Effective as of 01-JUN-23

ZAVERI, MAULIK, MD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Effective as of 01-MAR-14

ZAVERI, MAULIK, MD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Effective as of 01-SEP-21

OPTOMETRIST

GEE, JENNIFER, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JUL-22

GEE, JENNIFER, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-SEP-22

GEE, JENNIFER, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-SEP-22

GEE, JENNIFER, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-OCT-21

GEE, JENNIFER, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

KIM, MICHAEL, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

KIM, MICHAEL, OD

Provider ID: N/A

1000 VALE TERRACE DR

VISTA, CA 92084
Effective as of 01-JUL-22

KIM, MICHAEL, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Teleservice

Effective as of 01-JUL-22

KIM, MICHAEL, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Teleservice

Effective as of 01-JAN-21

KOUCHAK, YASMIN, OD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Teleservice

Effective as of 01-JUL-23

MORA, WENDY, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JUL-22

MORA, WENDY, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

MORA, WENDY, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Teleservice

Effective as of 01-JUL-22

MORA, WENDY, OD

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Teleservice

Effective as of 01-AUG-24

MORA, WENDY, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Teleservice

Effective as of 01-JAN-21

RICH, RYAN, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-21

RICH, RYAN, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

RICH, RYAN, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

RICH, RYAN, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JUL-22

TAM, EMILY, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JUL-22

TAM, EMILY, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

TAM, EMILY, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-SEP-22

TAM, EMILY, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-MAY-24

TAM, EMILY, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

TANG, ASHLEY, OD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Teleservice

Effective as of 01-NOV-21

TRAN, JESSICA, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-DEC-23

OTOLARYNGOLOGY

BERRY, JULIE, MD†

Provider ID: N/A

2023 W VISTA WAY STE J
VISTA, CA 92083

Effective as of 01-AUG-06

KUSHNARYOV, ANTON, MD†

Provider ID: N/A

2023 W VISTA WAY STE J
VISTA, CA 92083

Effective as of 01-OCT-17

PEDIATRICS

RONAN, KEVIN, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-24

RONAN, KEVIN, MD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083*

Effective as of 01-JUL-24

PHYSICIANS ASSISTANT

GILLAN, JAMES, PA

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-SEP-24

GILLAN, JAMES, PA

Provider ID: N/A

2023 W VISTA WAY STE B
VISTA, CA 92083

Effective as of 01-SEP-24

GLASSER, DANIEL, PA

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

GLASSER, DANIEL, PA

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

GONZALEZ, NICOLETTE, PA

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084

Teleservice

Effective as of 01-JUN-24

LEPARD, KRISTINA, PA

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084

Teleservice

Effective as of 01-MAR-23

WALLACE, STEPHANIE, PA

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-21

PODIATRIST

MILLER, JULIE, DPM

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-FEB-24

MILLER, JULIE, DPM

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-APR-24

MILLER, JULIE, DPM

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

MILLER, JULIE, DPM

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

PREVENTATIVE MEDICINE GENERAL

DEPORTO, TANYA, MD

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084

Teleservice

Effective as of 01-MAY-21

PSYCHIATRY

BELL, JENNIFER, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-FEB-24

BELL, JENNIFER, DO

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-FEB-24

BELL, JENNIFER, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-FEB-24

BELL, JENNIFER, DO

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-FEB-24

CHRISTIANSON, WARREN, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-AUG-24

CHRISTIANSON, WARREN, DO

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-AUG-24

PATEL, MITESH, MD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Teleservice

Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

C1. 网络提供者名单 专科护理医生

Teleservice

Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

📄 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

PUBLIC HEALTH

PREVENTATIVE MEDICINE

WALKER, BRADLEY, MD

Provider ID: N/A

📄 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-MAY-23

PULMONARY DISEASES

BAUTISTA, JENNIFER, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-MAY-24

BAUTISTA, JENNIFER, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-SEP-24

BAUTISTA, JENNIFER, MD†

Provider ID: N/A

📄 2023 W VISTA WAY STE B
VISTA, CA 92083

Effective as of 01-SEP-24

EISMAN, SCOTT, MD

Provider ID: N/A

📄 2023 W VISTA WAY STE B
VISTA, CA 92083

Effective as of 01-SEP-24

EISMAN, SCOTT, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-MAY-24

EISMAN, SCOTT, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-SEP-24

FUSSELL, KEVIN, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-SEP-24

FUSSELL, KEVIN, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-MAY-24

FUSSELL, KEVIN, MD

Provider ID: N/A

📄 2023 W VISTA WAY STE B
VISTA, CA 92083

Effective as of 01-SEP-24

GADRE, ABHISHEK, MD

Provider ID: N/A

📄 2023 W VISTA WAY STE B
VISTA, CA 92083

Effective as of 01-SEP-24

GADRE, ABHISHEK, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-MAY-24

GADRE, ABHISHEK, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-SEP-24

HOOPER, WILLIAM, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-SEP-24

HOOPER, WILLIAM, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-MAY-24

HOOPER, WILLIAM, MD

Provider ID: N/A

📄 2023 W VISTA WAY STE B
VISTA, CA 92083

Effective as of 01-SEP-24

HSING, ANDREW, MD

Provider ID: N/A

📄 2023 W VISTA WAY STE B
VISTA, CA 92083

Effective as of 01-SEP-24

HSING, ANDREW, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-MAY-24

HSING, ANDREW, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-JAN-24

HSING, ANDREW, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-FEB-23

HSING, ANDREW, MD

C1. 网络提供者名单

专科护理医生

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-SEP-24

KABADI, ALISHA, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-SEP-24

KABADI, ALISHA, MD

Provider ID: N/A

📄 2023 W VISTA WAY
VISTA, CA 92083
Effective as of 01-SEP-24

KABADI, ALISHA, MD

Provider ID: N/A

📄 2023 W VISTA WAY
VISTA, CA 92083
Effective as of 01-MAY-24

KABADI, ALISHA, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-SEP-24

LIANG, NI-CHENG, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-MAY-24

LIANG, NI-CHENG, MD

Provider ID: N/A

📄 2023 W VISTA WAY STE B
VISTA, CA 92083
Effective as of 01-SEP-24

LIANG, NI-CHENG, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-SEP-24

MAGANA, MARISA, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-FEB-24

MAKANI, SAMIR, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-SEP-24

MAKANI, SAMIR, MD

Provider ID: N/A

📄 2023 W VISTA WAY STE B
VISTA, CA 92083
Effective as of 01-SEP-24

PINO, ALEJANDRO, MD

Provider ID: N/A

📄 2023 W VISTA WAY STE B
VISTA, CA 92083
Effective as of 01-SEP-24

PINO, ALEJANDRO, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-MAY-24

PINO, ALEJANDRO, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-FEB-23

PINO, ALEJANDRO, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-SEP-24

SARNOFF, ROBERT, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-SEP-24

SARNOFF, ROBERT, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-MAY-24

SARNOFF, ROBERT, MD

Provider ID: N/A

📄 2023 W VISTA WAY STE B
VISTA, CA 92083
Effective as of 01-SEP-24

SHIN, STEPHANIE, MD

Provider ID: N/A

📄 2023 W VISTA WAY STE B
VISTA, CA 92083
Effective as of 01-SEP-24

SHIN, STEPHANIE, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-SEP-24

TRAN, SHERI, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-SEP-24

TRAN, SHERI, MD

Provider ID: N/A

📄 2023 W VISTA WAY STE B
VISTA, CA 92083
Effective as of 01-SEP-24

TRAN, SHERI, MD

Provider ID: N/A

📄 2067 W VISTA WAY STE 160
VISTA, CA 92083

C1. 网络提供者名单 专科护理医生

Effective as of 01-MAY-24

ZHANG, MICHELLE, MD

Provider ID: N/A

📍 2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-MAY-24

ZHANG, MICHELLE, MD

Provider ID: N/A

📍 2023 W VISTA WAY STE B
VISTA, CA 92083

Effective as of 01-SEP-24

ZHANG, MICHELLE, MD

Provider ID: N/A

📍 2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-SEP-24

ZHANG, MICHELLE, MD

Provider ID: N/A

📍 2067 W VISTA WAY STE D
VISTA, CA 92083

Effective as of 01-SEP-23

RADIOLOGY DIAGNOSTIC

PATEL, NIKHIL, MD

Provider ID: N/A

📍 906 SYCAMORE AVE STE
100
VISTA, CA 92081

Effective as of 01-JUN-24

PATEL, NIKHIL, MD

Provider ID: N/A

📍 906 SYCAMORE AVE STE
100
VISTA, CA 92081

Effective as of 01-DEC-23

STEINBERGER, AMANDA, DO

Provider ID: N/A

📍 906 SYCAMORE AVE STE

100

VISTA, CA 92081

Effective as of 01-JUL-24

REGISTERED DIETITIAN / NUTRITIONIST

CARLSON, STACY, RD

Provider ID: N/A

📍 910 SYCAMORE AVE STE
270
VISTA, CA 92081

Effective as of 01-AUG-24

RUBIO, GLORIA, RD

Provider ID: N/A

📍 910 SYCAMORE AVE STE
270
VISTA, CA 92081

Effective as of 01-AUG-24

REGISTERED PHYSICAL THERAPIST

AMBROSE, CHRISTOPHER, PT

Provider ID: N/A

📍 2067 W VISTA WAY STE 185
VISTA, CA 92083

Effective as of 01-JAN-21

BOUCHARD, REID, PT

Provider ID: N/A

📍 1958 VIA CENTRE DR
VISTA, CA 92081

Effective as of 01-OCT-21

BOUTELLE, DAVID, PT

Provider ID: N/A

📍 2067 W VISTA WAY STE 185
VISTA, CA 92083

Effective as of 01-FEB-24

DOULL, MATTHEW, PT

Provider ID: N/A

📍 1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-JUN-23

ESSER, STEPHANIE, PT

Provider ID: N/A

📍 1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-JUN-24

GARBER, MARC, PT

Provider ID: N/A

📍 1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-OCT-21

PENNINGTON, JENNIFER, PT

Provider ID: N/A

📍 1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-OCT-21

TAMAYO, SYDNIE, PT

Provider ID: N/A

📍 1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-OCT-23

WILSON, JENNIFER, PT

Provider ID: N/A

📍 1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-OCT-21

RHEUMATOLOGY

ALNAHLAWI, BASMA, MD

Provider ID: N/A

C1. 网络提供者名单 专科护理医生

2095 W VISTA WAY STE 216
VISTA, CA 92083
Effective as of 01-JUN-24

ANSARI, RASHAD, MD†
Provider ID: N/A

2023 W VISTA WAY STE J
VISTA, CA 92083
Effective as of 01-SEP-21

ANSARI, RASHAD, MD†
Provider ID: N/A

2023 W VISTA WAY STE J
VISTA, CA 92083
Effective as of 01-JUL-22

BRION, PAUL, MD†
Provider ID: N/A

2023 W VISTA WAY STE H
VISTA, CA 92083
Effective as of 01-SEP-21

BRION, PAUL, MD†
Provider ID: N/A

2023 W VISTA WAY STE H
VISTA, CA 92083
Effective as of 01-JUL-21

SURGERY GENERAL

ARMANI, AVA, MD†
Provider ID: N/A

910 SYCAMORE AVE STE
102
VISTA, CA 92081
Effective as of 01-JUL-21

GROVE, JAY, MD†
Provider ID: N/A

2385 S MELROSE DR
VISTA, CA 92081
Effective as of 01-SEP-21

GROVE, JAY, MD†
Provider ID: N/A

2385 S MELROSE DR
VISTA, CA 92081
Effective as of 01-JAN-21

GROVE, JAY, MD†
Provider ID: N/A

2385 S MELROSE DR
VISTA, CA 92081
Effective as of 01-DEC-14

HANNA, KAREN, MD†
Provider ID: N/A

2385 S MELROSE DR
VISTA, CA 92081
Teleservice
Effective as of 01-JAN-21

HANNA, KAREN, MD†
Provider ID: N/A

2385 S MELROSE DR
VISTA, CA 92081
Teleservice
Effective as of 01-DEC-14

SURGERY GENERAL VASCULAR

BUNKE, NISHA, MD
Provider ID: N/A

906 SYCAMORE AVE STE
100
VISTA, CA 92081
Teleservice
Effective as of 01-JUN-23

SURGERY NEUROLOGICAL

STERN, MARK, MD
Provider ID: N/A

326 S MELROSE DR STE
200
VISTA, CA 92081
Effective as of 01-SEP-23

SURGERY THORACIC

GREWAL, NAVROSE, MD†
Provider ID: N/A

161 THUNDER DR
VISTA, CA 92083
Effective as of 01-DEC-21

ANESTHESIOLOGY

KRAUSE, MARTIN, MD†
Provider ID: N/A

36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-FEB-22

ANESTHESIOLOGY

CRITICAL CARE MEDICINE

**RODRIGUEZ-MINETTE,
JESSICA, MD†**

Provider ID: N/A
36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-JAN-21

CERTIFIED NURSE PRACTITIONER

IHEMEDU, MAGNUS, NPF
Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-APR-23

IHEMEDU, MAGNUS, NPF
Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-APR-23

IHEMEDU, MAGNUS, NPF

C1. 网络提供者名单 专科护理医生

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-APR-23

IHEMEDU, AMARACHI, NPF

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-JAN-23

IHEMEDU, AMARACHI, NPF

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-JAN-23

ONUOHA, NOJA, NP[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595*
Effective as of 01-NOV-22

ONUOHA, NOJA, NP[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595*
Effective as of 01-NOV-22

THOMASII, STEPHEN, NPF[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAR-21

CHIROPRACTOR

ADAMS, CONRAD, LAC

Provider ID: N/A

32475 CLINTON KEITH RD
STE 108
WILDOMAR, CA 92595
Effective as of 01-MAR-23

GASTROENTEROLOGY

CHANGCHIEN, ERIC, MD[†]

Provider ID: N/A

36243 INLAND VALLEY DR
STE 280
WILDOMAR, CA 92595
Effective as of 01-MAR-19

INTERNAL MEDICINE

CHANG, DAVID, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAY-15

CHANG, DAVID, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAR-19

NANDI, SHANKHA, DO[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-JUN-15

NANDI, SHANKHA, DO[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-JUN-15

QUACH, DUC, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-SEP-24

QUACH, DUC, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-SEP-24

QUACH, DUC, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-SEP-24

QUACH, DUC, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-SEP-24

WANG, WENG-LIH, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-OCT-19

YU, JERRY, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAR-19

YU, JERRY, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

C1. 网络提供者名单 专科护理医生

WILDOMAR, CA 92595
Effective as of 01-MAR-21

YU, JERRY, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595
Effective as of 01-DEC-23

YU, JERRY, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595
Effective as of 01-DEC-23

YU, JERRY, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595
Effective as of 01-DEC-23

YU, JERRY, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595
Effective as of 01-DEC-23

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

JAFFE, GILAD, MD

Provider ID: N/A

 36485 INLAND VALLEY DR
WILDOMAR, CA 92595

Effective as of 01-SEP-23

PATEL, SAGAR, MD†

Provider ID: N/A

 36485 INLAND VALLEY DR
WILDOMAR, CA 92595

Effective as of 01-AUG-21

LICENSED CLINICAL SOCIAL WORKER

JONES, VALORIA, LCSW†

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595
Effective as of 01-JAN-23

JONES, VALORIA, LCSW†

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595
Effective as of 01-JUL-23

JONES, VALORIA, LCSW†

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595
Effective as of 01-JUL-23

JONES, VALORIA, LCSW†

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595
Effective as of 01-JUL-23

CHANG, DAVID, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595
Effective as of 01-DEC-23

CHANG, DAVID, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595
Effective as of 01-DEC-23

CHANG, DAVID, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595
Effective as of 01-DEC-23

CHANG, DAVID, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595
Effective as of 01-DEC-23

CHANG, DAVID, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595
Effective as of 01-DEC-23

CHANG, DAVID, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595
Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595
Effective as of 01-MAY-23

CHANG, DAVID, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595
Effective as of 01-MAY-09

C1. 网络提供者名单 专科护理医生

CHANG, DAVID, MD†

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAY-15

LAC, PETER, MD†

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-NOV-19

LAC, PETER, MD†

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-NOV-16

LAC, PETER, MD†

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAR-21

LAC, PETER, MD†

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-JUL-23

LAC, PETER, MD

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

LAC, PETER, MD

Provider ID: N/A

☐ 36320 INLAND VALLEY DR

STE 307

WILDOMAR, CA 92595

Effective as of 01-DEC-23

LAC, PETER, MD

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

LAC, PETER, MD

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

LAC, PETER, MD

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

LAC, PETER, MD

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

NANDI, SHANKHA, DO

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

NANDI, SHANKHA, DO

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

NANDI, SHANKHA, DO†

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-AUG-20

NANDI, SHANKHA, DO

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

NANDI, SHANKHA, DO

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

NANDI, SHANKHA, DO

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

NANDI, SHANKHA, DO

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

NANDI, SHANKHA, DO†

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-JUN-23

NANDI, SHANKHA, DO†

Provider ID: N/A

C1. 网络提供者名单
专科护理医生

36320 INLAND VALLEY DR
 STE 308
 WILDOMAR, CA 92595
 Effective as of 01-JUN-15

NANDI, SHANKHA, DO†
 Provider ID: N/A

36320 INLAND VALLEY DR
 STE 308
 WILDOMAR, CA 92595
 Effective as of 01-JUN-15

NANDI, SHANKHA, DO†
 Provider ID: N/A

36320 INLAND VALLEY DR
 STE 308
 WILDOMAR, CA 92595
 Effective as of 01-JUN-15

NANDI, SHANKHA, DO†
 Provider ID: N/A

36320 INLAND VALLEY DR
 STE 308
 WILDOMAR, CA 92595
 Effective as of 01-MAR-19

NANDI, SHANKHA, DO†
 Provider ID: N/A

36320 INLAND VALLEY DR
 STE 308
 WILDOMAR, CA 92595
 Effective as of 01-MAR-21

WANG, WENG-LIH, MD†
 Provider ID: N/A

36320 INLAND VALLEY DR
 STE 308
 WILDOMAR, CA 92595
 Effective as of 01-MAY-09

WANG, WENG-LIH, MD†
 Provider ID: N/A

36320 INLAND VALLEY DR
 STE 308
 WILDOMAR, CA 92595

Effective as of 01-MAY-15
WANG, WENG-LIH, MD†
 Provider ID: N/A

36320 INLAND VALLEY DR
 STE 308
 WILDOMAR, CA 92595

Effective as of 01-JAN-20
WANG, WENG-LIH, MD†
 Provider ID: N/A

36320 INLAND VALLEY DR
 STE 308
 WILDOMAR, CA 92595

Effective as of 01-MAY-15
WANG, WENG-LIH, MD†
 Provider ID: N/A

36320 INLAND VALLEY DR
 STE 308
 WILDOMAR, CA 92595

Effective as of 01-MAR-21
WANG, WENG-LIH, MD
 Provider ID: N/A

36320 INLAND VALLEY DR
 STE 307
 WILDOMAR, CA 92595

Effective as of 01-JUL-24
WANG, WENG-LIH, MD
 Provider ID: N/A

36320 INLAND VALLEY DR
 STE 307
 WILDOMAR, CA 92595

Effective as of 01-DEC-23
WANG, WENG-LIH, MD
 Provider ID: N/A

36320 INLAND VALLEY DR
 STE 307
 WILDOMAR, CA 92595

Effective as of 01-DEC-23
WANG, WENG-LIH, MD

Provider ID: N/A
 36320 INLAND VALLEY DR
 STE 307
 WILDOMAR, CA 92595

Effective as of 01-DEC-23
YU, JERRY, MD
 Provider ID: N/A

36320 INLAND VALLEY DR
 STE 307
 WILDOMAR, CA 92595

Effective as of 01-DEC-23
YU, JERRY, MD
 Provider ID: N/A

36320 INLAND VALLEY DR
 STE 307
 WILDOMAR, CA 92595

Effective as of 01-DEC-23
PSYCHIATRY

JAKKULA, JAGAN, MD†
 Provider ID: N/A

36320 INLAND VALLEY DR
 STE 303
 WILDOMAR, CA 92595

Effective as of 01-JUL-22
JAKKULA, JAGAN, MD†
 Provider ID: N/A

36320 INLAND VALLEY DR
 STE 303
 WILDOMAR, CA 92595

Effective as of 01-NOV-23
JAKKULA, JAGAN, MD†
 Provider ID: N/A

36320 INLAND VALLEY DR
 STE 303
 WILDOMAR, CA 92595

Effective as of 01-JUL-22
JAKKULA, JAGAN, MD†
 Provider ID: N/A

C1. 网络提供者名单
专科护理医生

<p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-NOV-23</p> <p>KANUKUNTLA, TULASI, MD† Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-OCT-23</p> <p>KANUKUNTLA, TULASI, MD† Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-JUL-22</p> <p>KANUKUNTLA, TULASI, MD† Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-OCT-23</p> <p>KANUKUNTLA, TULASI, MD† Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-JUL-22</p> <p>KUNAM, NEELIMA, MD Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-AUG-24</p> <p>KUNAM, NEELIMA, MD Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-AUG-24</p> <p>KUNAM, SYAM, MD Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-AUG-24</p> <p>KUNAM, SYAM, MD Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-JUN-23</p> <p>KUNAM, NEELIMA, MD Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-AUG-24</p>	<p>Effective as of 01-AUG-24</p> <p>KUNAM, SYAM, MD Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-JUN-23</p> <p>KUNAM, SYAM, MD Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-NOV-23</p> <p>KUNAM, NEELIMA, MD Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-AUG-24</p> <p>KUNAM, NEELIMA, MD Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-NOV-23</p> <p>KUNAM, SYAM, MD Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-NOV-23</p> <p>KUNAM, SYAM, MD Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-JUN-23</p> <p>PUCHAKAYALA, NANDITA, MD† Provider ID: N/A</p>	<p>MD† Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-SEP-23</p> <p>PUCHAKAYALA, NANDITA, MD† Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 300 WILDOMAR, CA 92595 Effective as of 01-AUG-22</p> <p>PUCHAKAYALA, NANDITA, MD† Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-AUG-22</p> <p>PUCHAKAYALA, NANDITA, MD† Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-AUG-22</p> <p>PUCHAKAYALA, NANDITA, MD† Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-SEP-23</p> <p>PUCHAKAYALA, NANDITA, MD† Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-AUG-22</p> <p>PUCHAKAYALA, NANDITA, MD† Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 300</p>
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C1. 网络提供者名单 专科护理医生

WILDOMAR, CA 92595
Effective as of 01-AUG-22

PULMONARY DISEASES


KUMAR, AVNEE, MD

Provider ID: N/A

 36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-JUL-23

SURI, RAJAT, MD†


Provider ID: N/A

 36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-AUG-21

RADIATION ONCOLOGY


CHUNG, ARTHUR, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-JUN-23


CHUNG, ARTHUR, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-JUN-23

CHUNG, ARTHUR, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-SEP-23

DAROUI, PARIMA, MD


Provider ID: N/A

 36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-JUN-24


DAROUI, PARIMA, MD

Provider ID: N/A

 36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-JUN-24


DAROUI, PARIMA, MD

Provider ID: N/A

 36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-JUN-24


DAROUI, PARIMA, MD

Provider ID: N/A

 36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-APR-24


DAROUI, PARIMA, MD

Provider ID: N/A

 36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-APR-24


KANG, JOSEPH, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-DEC-23


KANG, JOSEPH, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-JUN-23


KANG, JOSEPH, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-JUN-23


KANG, JOSEPH, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-JUL-23


LAWRENSON, LESLEY, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-NOV-23


MASON, JAMES, MD†

Provider ID: N/A

 36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-14


MASON, JAMES, MD†

Provider ID: N/A

 36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-14

MASON, JAMES, MD†

Provider ID: N/A

 36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-14

MASON, JAMES, MD†

Provider ID: N/A

 36450 INLAND VALLEY DR
STE 101

C1. 网络提供者名单 专科护理医生

WILDOMAR, CA 92595
Effective as of 01-MAR-10

MERLO, CLIFFORD, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 207

WILDOMAR, CA 92595
Effective as of 01-JUN-23

MERLO, CLIFFORD, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 207

WILDOMAR, CA 92595
Effective as of 01-JUN-23

RHA, JANICE, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 105

WILDOMAR, CA 92595
Effective as of 01-MAR-19

SUN, JASON, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 207

WILDOMAR, CA 92595
Effective as of 01-JUN-23

SUN, JASON, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 207

WILDOMAR, CA 92595
Effective as of 01-JUL-23

SUN, JASON, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 207

WILDOMAR, CA 92595
Effective as of 01-NOV-23

REGISTERED DIETITIAN / NUTRITIONIST

ATTOBRA, TATIANA, RD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 301

WILDOMAR, CA 92595
Effective as of 01-DEC-22

REGISTERED PHYSICAL THERAPIST

ALY, DILYANA, PT†

Provider ID: N/A

 36243 INLAND VALLEY DR
STE 110

WILDOMAR, CA 92595
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ALY, DILYANA, PT†

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 36243 INLAND VALLEY DR
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CASTELLON, SHAWN, PT

Provider ID: N/A

 32246 CLINTON KEITH RD
STE 103

WILDOMAR, CA 92595
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CASTELLON, SHAWN, PT

Provider ID: N/A

 32246 CLINTON KEITH RD
STE 103

WILDOMAR, CA 92595
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TSAI, CHIAHONG, PT

Provider ID: N/A

 32246 CLINTON KEITH RD

STE 103
WILDOMAR, CA 92595
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TSAI, CHIAHONG, PT

Provider ID: N/A

 32246 CLINTON KEITH RD
STE 103

WILDOMAR, CA 92595
Effective as of 01-NOV-23

VARGHESE, ROSHAN, PT

Provider ID: N/A

 32246 CLINTON KEITH RD
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WILDOMAR, CA 92595
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VARGHESE, ROSHAN, PT

Provider ID: N/A

 32246 CLINTON KEITH RD
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SPEECH PATHOLOGIST

WIRTH, LAURA, SP


Provider ID: N/A

 36330 HIDDEN SPRINGS
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WIRTH, LAURA, SP

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 36330 HIDDEN SPRINGS
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Effective as of 01-JUN-22

SURGERY COLON SURGERY

GORSKI, TITO, MD†

C1. 网络提供者名单

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Provider ID: N/A

36320 INLAND VALLEY DR
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GORSKI, TITO, MD†

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36320 INLAND VALLEY DR
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36320 INLAND VALLEY DR
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36320 INLAND VALLEY DR
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SURGERY GENERAL

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36320 INLAND VALLEY DR
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36243 INLAND VALLEY DR
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36320 INLAND VALLEY DR
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JOHNSEN, HEGE, MD†

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36320 INLAND VALLEY DR
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JOHNSEN, HEGE, MD†

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36320 INLAND VALLEY DR
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JOHNSEN, HEGE, MD†

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36320 INLAND VALLEY DR
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KARMUR, AMIT, DO†

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36320 INLAND VALLEY DR
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KARMUR, AMIT, DO†

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36320 INLAND VALLEY DR
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Effective as of 01-DEC-23

KARMUR, AMIT, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
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LEE, JENNY, MD†

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36320 INLAND VALLEY DR

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Effective as of 01-MAR-19

MAC, OLIVIA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
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WILDOMAR, CA 92595
Effective as of 01-MAR-23

MAC, OLIVIA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAR-23

MAC, OLIVIA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-DEC-22

MAC, OLIVIA, MD†

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36320 INLAND VALLEY DR
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WILDOMAR, CA 92595
Effective as of 01-APR-23

NAFIU, BOLAJI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-DEC-19

NAFIU, BOLAJI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-JAN-20

NAFIU, BOLAJI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
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WILDOMAR, CA 92595
Effective as of 01-APR-20

NAFIU, BOLAJI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
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WILDOMAR, CA 92595
Effective as of 01-SEP-22

NOURI, SARVENAZ, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
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WILDOMAR, CA 92595
Effective as of 01-JAN-23

NOURI, SARVENAZ, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
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WILDOMAR, CA 92595
Effective as of 01-JAN-23

NOURI, SARVENAZ, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
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WILDOMAR, CA 92595
Effective as of 01-NOV-22

NOURI, SARVENAZ, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
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Effective as of 01-NOV-22

NOURI, SARVENAZ, MD†

Provider ID: N/A

C1. 网络提供者名单
专科护理医生

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 STE 101A
 WILDOMAR, CA 92595
 Effective as of 01-FEB-23

TIU, BRIAN, MD[†]
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36320 INLAND VALLEY DR
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TIU, BRIAN, MD[†]
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36320 INLAND VALLEY DR
 STE 101
 WILDOMAR, CA 92595
 Effective as of 01-SEP-22

WANG, XIUJIE, MD[†]
 Provider ID: N/A

36320 INLAND VALLEY DR
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 Effective as of 01-DEC-21

WANG, XIUJIE, MD[†]
 Provider ID: N/A

36320 INLAND VALLEY DR
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 Effective as of 01-SEP-19

WANG, XIUJIE, MD[†]
 Provider ID: N/A

36320 INLAND VALLEY DR
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SURGERY GENERAL
VASCULAR

GORSKI, YARA, MD[†]
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36320 INLAND VALLEY DR
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GORSKI, YARA, MD[†]
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36320 INLAND VALLEY DR
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GORSKI, YARA, MD[†]
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36320 INLAND VALLEY DR
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 Effective as of 01-MAY-22

GORSKI, YARA, MD[†]
 Provider ID: N/A

36320 INLAND VALLEY DR
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 WILDOMAR, CA 92595
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GORSKI, YARA, MD[†]
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36320 INLAND VALLEY DR
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KARMUR, AMIT, DO[†]
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36320 INLAND VALLEY DR
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 Effective as of 01-MAY-22

KARMUR, AMIT, DO[†]
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36320 INLAND VALLEY DR
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KARMUR, AMIT, DO[†]
 Provider ID: N/A

36320 INLAND VALLEY DR
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36320 INLAND VALLEY DR
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31537 INLAND VALLEY DR,
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36320 INLAND VALLEY DR
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 36320 INLAND VALLEY DR Effective as of 01-OCT-20

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170 Town Center Pkwy
Santee, CA 92071

Garrett Pennell, OD

Provider ID: N/A
170 Town Center Pkwy
Santee, CA 92071

Jennifer N. Tam, OD

Provider ID: N/A
8701 Cuyamaca St
Santee, CA 92071

Mary L. Howard, OD

Provider ID: N/A
170 Town Center Pkwy
Santee, CA 92071

Irene J. Gendelman, OD

Provider ID: N/A
9349 Mission Gorge Rd Ste 114
Santee, CA 92071

Walmart Optical, NA

Provider ID: N/A
170 Town Center Pkwy
Santee, CA 92071

Craig C. Liu, OD

Provider ID: N/A
8701 Cuyamaca St
Santee, CA 92071

Costco Warehouse 0403, NA

Provider ID: N/A
101 Town Center Pkwy
Santee, CA 92071

Stephen Huang, OD

Provider ID: N/A
8701 Cuyamaca St
Santee, CA 92071

Kevin R. Solis, OD

Provider ID: N/A
687 Sweetwater Rd
Spring Valley, CA 91977

Kenny Hoang, OD

Provider ID: N/A
9628 Campo Rd Ste C
Spring Valley, CA 91977

John C. Fleming, OD

Provider ID: N/A
9628 Campo Rd Ste C
Spring Valley, CA 91977

Elias Toubia, OD

Provider ID: N/A
687 Sweetwater Rd
Spring Valley, CA 91977

Joan Keddington, OD

Provider ID: N/A
687 Sweetwater Rd
Spring Valley, CA 91977

Andrea NastasoIU, OD

Provider ID: N/A
687 Sweetwater Rd
Spring Valley, CA 91977

Smit A. Patel, OD

Provider ID: N/A
9349 Mission Gorge Rd Ste 114
Santee, CA 92071

Mario A. Arellano, OD

Provider ID: N/A
101 Town Center Pkwy
Santee, CA 92071

Robert L. Grazian, OD

Provider ID: N/A
9727 Mission Gorge Rd
Santee, CA 92071

Kristin M. Peterson, OD

Provider ID: N/A
977 Lomas Santa Fe Dr Ste B
Solana Beach, CA 92075

Laila Brown-aijala, OD

Provider ID: N/A
687 Sweetwater Rd
Spring Valley, CA 91977

Christopher Johnson, OD

Provider ID: N/A
9628 Campo Rd Ste C
Spring Valley, CA 91977

Theresa Nguyen, OD

Provider ID: N/A
687 Sweetwater Rd
Spring Valley, CA 91977

Mary M. King, OD

Provider ID: N/A
687 Sweetwater Rd
Spring Valley, CA 91977

Ankur Kalra, OD

Provider ID: N/A
687 Sweetwater Rd
Spring Valley, CA 91977

Robert J. Joyce, OD

Provider ID: N/A
29115 Valley Center Rd Ste E
Valley Center, CA 92082

Tam T. Le, OD

Provider ID: N/A
29115 Valley Center Rd Ste E
Valley Center, CA 92082

Eric Johnston, MD

Provider ID: N/A
1930 Via Ctr
Vista, CA 92081

Miriam Fuchs, OD

Provider ID: N/A
1800 University Dr
Vista, CA 92083

Costco Warehouse 0124, NA

Provider ID: N/A
1755 Hacienda Dr
Vista, CA 92081

Ryan N. Aboul-hosn, OD

Provider ID: N/A
1755 Hacienda Dr
Vista, CA 92081

Kimberly A. Michel, OD

Provider ID: N/A
1755 Hacienda Dr
Vista, CA 92081

Patricia Wai, OD

Provider ID: N/A
1755 Hacienda Dr
Vista, CA 92081

Kendall George, OD

Provider ID: N/A
931 Anza Ave Ste B
Vista, CA 92084

Ardalan E. Aminlari, MD

Provider ID: N/A
1930 Via Ctr
Vista, CA 92081

Brandyn Chen, OD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Vanessa S. Kashak, OD

Provider ID: N/A
1755 Hacienda Dr
Vista, CA 92081

Johnny Cao-nguyen, OD

Provider ID: N/A
1930 Via Ctr
Vista, CA 92081

Walmart Optical, NA

Provider ID: N/A
1800 University Dr
Vista, CA 92083

Glenn M. Demlinger, OD

Provider ID: N/A
741 Shadowridge Dr
Vista, CA 92083

Mona Moshtaghi, OD

Provider ID: N/A
1930 Via Ctr
Vista, CA 92081

Benjamin Stephens, MD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Bruce D. George, OD

Provider ID: N/A
931 Anza Ave Ste B
Vista, CA 92084

Sharon F. Leong, OD

Provider ID: N/A
1755 Hacienda Dr
Vista, CA 92081

Connie Tan, OD

Provider ID: N/A
1930 Via Ctr
Vista, CA 92081

Thao P. Tran, OD

Provider ID: N/A
110 Civic Center Dr Ste 204
Vista, CA 92084

Heather Chen, MD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Ashley Tang, OD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Maulik S. Zaveri, MD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Yasmin A. Kouchak, OD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

David I. Bloomberg, OD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Jeffrey B. Morris, MD

Provider ID: N/A
1930 Via Ctr
Vista, CA 92081

Steven Giang, OD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Krista Gardner, OD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Randy L. Stone, OD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Bradley W. Greider, MD



Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Sherri S. Azimi, OD



Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

C3. 专业护理机构 (SNF)



CAPISTRANO BEACH CARE CENTER

 35410 DEL REY
CAPISTRANO BEACH, CA
92624
 (949) 496-5786
Effective as of 01-AUG-14



CAPISTRANO BEACH EXTENDED CARE AND LIVING CTR

 35410 DEL REY
CAPISTRANO BEACH, CA
92624
 (949) 496-5786
Effective as of 01-JAN-12



BAYSHIRE CARLSBAD

 3140 EL CAMINO REAL
CARLSBAD, CA 92008
 (760) 720-9898
Effective as of 01-JUL-22



LAS VILLAS DE CARLSBAD OPERATIONS LLC

 1088 LAGUNA DR
CARLSBAD, CA 92008
 (760) 434-7116
Effective as of 01-FEB-13



SOUTH BAY POST ACUTE CARE

 553 F ST
CHULA VISTA, CA 91910
 (619) 426-8611
Effective as of 01-NOV-19



AVOCADO POST ACUTE

 510 E WASHINGTON AVE
EL CAJON, CA 92020
 (619) 440-1211
Effective as of 01-JAN-20



BRADLEY COURT SPECIAL CARE CENTER

 675 E BRADLEY AVE
EL CAJON, CA 92021
 (619) 448-6633
Effective as of 01-DEC-21



COTTONWOOD CANYON HEALTHCARE CENTER

 1391 E MADISON AVE
EL CAJON, CA 92021
 (619) 444-1107
Effective as of 01-OCT-11



COUNTRY HILLS POST ACUTE

 1580 BROADWAY
EL CAJON, CA 92021
 (619) 441-8745
Effective as of 15-NOV-20



MAGNOLIA POST ACUTE CARE

 635 S MAGNOLIA AVE
EL CAJON, CA 92020
 (616) 442-8826
Effective as of 01-NOV-19



MAGNOLIA SPECIAL CARE CENTER

 635 S MAGNOLIA AVE
EL CAJON, CA 92020
 (619) 442-8826
Effective as of 01-JAN-12

MAGNOLIA SPECIAL CARE CTR



 635 S MAGNOLIA AVE
EL CAJON, CA 92020
 (619) 442-8826
Effective as of 01-JAN-12

PARKSIDE HEALTH AND WELLNESS CENTER



 444 W LEXINGTON AVE
EL CAJON, CA 92020
 (619) 442-7744
Effective as of 01-NOV-19

PARKSIDE SPECIAL CARE



CENTER

 444 W LEXINGTON AVE
EL CAJON, CA 92020
 (619) 442-7744
Effective as of 01-JAN-12



SAN DIEGO POST ACUTE CENTER

 1201 S ORANGE AVE
EL CAJON, CA 92020
 (619) 441-1988
Effective as of 01-SEP-14



SOMERSET SUBACUTE AND CARE

 151 CLAYDELLE AVE
EL CAJON, CA 92020
 (619) 442-0245
Effective as of 01-NOV-19



VICTORIA POST ACUTE CARE

 654 S ANZA ST
EL CAJON, CA 92020
 (619) 440-5005
Effective as of 01-NOV-19



VICTORIA SPECIAL CARE CTR

 654 S ANZA ST
EL CAJON, CA 92020
 (619) 440-5005
Effective as of 01-JAN-12

VILLA LAS PALMAS HEALTHCARE CTR

 622 S ANZA ST
EL CAJON, CA 92020
 (619) 442-0544
Effective as of 01-OCT-11

AVIARA HEALTHCARE CENTER

 944 REGAL RD
ENCINITAS, CA 92024
 (760) 944-0331
Effective as of 01-OCT-11

ENCINITAS NURSING AND

C3. 专业护理机构 (SNF)

REHAB CTR

900 SANTA FE DR
ENCINITAS, CA 92024
(760) 753-6423
Effective as of 01-DEC-12

ESCONDIDO CARE CENTER

421 E MISSION AVE
ESCONDIDO, CA 92025
(760) 747-0430
Effective as of 01-MAY-13

LIFE CARE CENTER OF ESCONDIDO

1980 FELICITA RD
ESCONDIDO, CA 92025
(760) 741-6109
Effective as of 01-JAN-12

OCEAN VIEW POST ACUTE

1980 FELICITA RD
ESCONDIDO, CA 92025
(760) 741-6109
Effective as of 01-SEP-24

PALOMAR HEIGHTS CARE CTR

1260 E OHIO AVE
ESCONDIDO, CA 92027
(760) 746-1100
Effective as of 01-JAN-12

PALOMAR VISTA HEALTHCARE CTR

201 N FIG ST
ESCONDIDO, CA 92025
(760) 746-0303
Effective as of 01-NOV-11

REDWOOD TERRACE

710 W 13TH AVE
ESCONDIDO, CA 92025
(760) 291-2736
Effective as of 01-NOV-17

VALLE VISTA POST ACUTE

1025 W 2ND AVE

ESCONDIDO, CA 92025
(760) 745-1842
Effective as of 01-DEC-12

FALLBROOK SKILLED NURSING

325 POTTER ST
FALLBROOK, CA 92028
(760) 728-2330
Effective as of 01-FEB-20

DEVONSHIRE CARE CENTER

1350 E DEVONSHIRE AVE
HEMET, CA 92544
(951) 925-2571
Effective as of 01-JAN-12

HEMET GLOBAL MEDICAL CENTER

1117 E DEVONSHIRE AVE
HEMET, CA 92543
(951) 652-2811
Effective as of 01-JAN-20

MANORCARE HEALTH SERVICES HEMET

1717 W STETSON AVE
HEMET, CA 92545
(951) 925-9171
Effective as of 01-JAN-12

RAMONA REHAB AND POST ACUTE CTR

485 W JOHNSTON AVE
HEMET, CA 92543
(951) 652-0011
Effective as of 15-APR-19

SAN JACINTO HEALTHCARE

275 N SAN JACINTO ST
HEMET, CA 92543
(951) 658-9441
Effective as of 01-MAR-13

THE VILLAGE HEALTHCARE

CENTER

2400 W ACACIA AVE
HEMET, CA 92545
(951) 766-5116
Effective as of 01-JAN-12

LA JOLLA NURSING AND REHAB CTR

2552 TORREY PINES RD
LA JOLLA, CA 92037
(858) 453-5810
Effective as of 01-DEC-12

THE COVE AT LA JOLLA

7160 FAY AVE
LA JOLLA, CA 92037
(858) 459-4361
Effective as of 01-NOV-19

ARBOR HILLS NURSING CENTER

7800 PARKWAY DR
LA MESA, CA 91942
(619) 460-2330
Effective as of 01-DEC-20

COMMUNITY CARE CENTER

8665 LA MESA BLVD
LA MESA, CA 91942
(619) 465-0702
Effective as of 01-APR-16

COUNTRY MANOR LA MESA HEALTHCARE CENTER

5696 LAKE MURRAY BLVD
LA MESA, CA 91942
(619) 460-7871
Effective as of 01-AUG-14

GROSSMONT POST ACUTE CARE

8787 CENTER DR
LA MESA, CA 91942
(619) 460-4444
Effective as of 01-NOV-19

C3. 专业护理机构 (SNF)

LA MESA HEALTHCARE CTR

3780 MASSACHUSETTS AVE
LA MESA, CA 91941
(619) 465-1313
Effective as of 01-OCT-11

PARKWAY HILLS NURSING & REHAB

7760 PARKWAY DR
LA MESA, CA 91942
(619) 469-0124
Effective as of 01-APR-20

LAGUNA HILLS HEALTH AND REHAB CTR

24452 HEALTH CENTER DR
LAGUNA HILLS, CA 92653
(949) 837-8000
Effective as of 01-APR-18

PALM TERRACE HLTHCARE AND REHAB CTR

24962 CALLE ARAGON
LAGUNA WOODS, CA 92637
(949) 587-9000
Effective as of 01-NOV-11

FREEDOM VILLAGE HEALTHCARE CTR

23442 EL TORO RD
LAKE FOREST, CA 92630
(949) 472-8353
Effective as of 01-JAN-12

LAKE FOREST NURSING CENTER

25652 OLD TRABUCO RD
LAKE FOREST, CA 92630
(949) 380-9380
Effective as of 01-JAN-12

TRABUCO HILLS POST ACUTE

25652 OLD TRABUCO RD

LAKE FOREST, CA 92630
(949) 380-9380
Effective as of 01-SEP-24

BELLA VISTA HEALTH CENTER

7922 PALM ST
LEMON GROVE, CA 91945
(619) 644-1000
Effective as of 01-SEP-13

LEMON GROVE CARE AND REHAB CTR

8351 BROADWAY
LEMON GROVE, CA 91945
(619) 463-0294
Effective as of 01-NOV-11

MENIFEE LAKES POST ACUTE

27600 ENCANTO DR
MENIFEE, CA 92586
(951) 679-6858
Effective as of 01-SEP-24

MURRIETA HEALTH AND REHABILITATION CENTER

24100 MONROE AVE
MURRIETA, CA 92562
(951) 600-4640
Effective as of 01-JAN-12

CASTLE MANOR NURSING AND REHABILITATION CTR

541 S V AVE
NATIONAL CITY, CA 91950
(619) 791-7900
Effective as of 01-DEC-20

FRIENDSHIP MANOR NURSING AND REHABILITATION CTR

902 EUCLID AVE
NATIONAL CITY, CA 91950
(619) 791-7700
Effective as of 01-DEC-20

PARADISE VALLEY HEALTH

CARE CENTER

2575 E 8TH ST
NATIONAL CITY, CA 91950
(619) 470-6700
Effective as of 01-OCT-20

WINDSOR GARDENS CONV CTR OF SAN DIEGO

220 E 24TH ST
NATIONAL CITY, CA 91950
(619) 474-6741
Effective as of 01-JAN-12

LA PALOMA HEALTHCARE CTR

3232 THUNDER DR
OCEANSIDE, CA 92056
(760) 724-2193
Effective as of 01-OCT-11

BOULDER CREEK POST ACUTE

12696 MONTE VISTA RD
POWAY, CA 92064
(858) 487-6242
Effective as of 01-APR-20

POWAY HEALTHCARE CENTER

15632 POMERADO RD
POWAY, CA 92064
(858) 485-5153
Effective as of 01-OCT-11

THE VILLAS AT POWAY



15615 POMERADO RD
POWAY, CA 92064
(858) 613-4545
Effective as of 01-JAN-12



VILLA MONTE VISTA



12696 MONTE VISTA RD
POWAY, CA 92064
(858) 487-6242
Effective as of 01-JAN-12



ARROYO VISTA NURSING CTR

C3. 专业护理机构 (SNF)



 3022 45TH ST
SAN DIEGO, CA 92105
 (619) 283-5855
Effective as of 01-NOV-11



BRIGHTON PLACE SAN DIEGO
 1350 EUCLID AVE
SAN DIEGO, CA 92105
 (619) 263-2166
Effective as of 01-JAN-12

**CARMEL MOUNTAIN REHAB
AND HEALTHCARE CTR**
 11895 AVENUE OF
INDUSTRY
SAN DIEGO, CA 92128
 (858) 673-0101
Effective as of 01-NOV-11

**CLAIREMONT HEALTHCARE
AND WELLNESS CENTER LLC**
 8060 FROST ST
SAN DIEGO, CA 92123
 (858) 278-4750
Effective as of 01-NOV-17



GOLDEN HILL POST ACUTE
 1201 34TH ST
SAN DIEGO, CA 92102
 (619) 232-2946
Effective as of 01-MAY-23



**HILLCREST HEIGHTS
HEALTHCARE CENTER**
 4033 6TH AVE
SAN DIEGO, CA 92103
 (619) 297-4086
Effective as of 01-MAY-24



**JACOB HEALTH CARE CENTER
LLC**
 4075 54TH ST
SAN DIEGO, CA 92105
 (619) 582-5168
Effective as of 01-APR-16



**KEARNY MESA
CONVALESCENT AND
NURSING HOME**
 7675 FAMILY CIR
SAN DIEGO, CA 92111
 (858) 278-8121
Effective as of 01-DEC-20


**MISSION HILLS POST ACUTE
CARE**
 3680 REYNARD WAY
SAN DIEGO, CA 92103
 (619) 297-4484
Effective as of 01-NOV-19


**POINT LOMA CONVALESCENT
HSP**
 3232 DUKE ST
SAN DIEGO, CA 92110
 (619) 224-4141
Effective as of 01-JAN-12

REO VISTA HEALTHCARE CTR
 6061 BANBURY ST
SAN DIEGO, CA 92139
 (619) 475-2211
Effective as of 01-OCT-11



**ST PAULS HEALTH CARE
CENTER**
 235 NUTMEG ST
SAN DIEGO, CA 92103
 (619) 677-3895
Effective as of 01-JAN-18



THE SHORES POST ACUTE
 2828 MEADOW LARK DR
SAN DIEGO, CA 92123
 (858) 277-6460
Effective as of 01-OCT-13



**THE SPRINGS AT PACIFIC
REGENT**
 3884 NOBEL DR
SAN DIEGO, CA 92122



 (858) 625-8700
Effective as of 01-NOV-11



TORREY PINES SENIOR LIVING
 13101 HARTFIELD AVE
SAN DIEGO, CA 92130
 (858) 259-2222
Effective as of 01-JUN-16

UNIVERSITY CARE CENTER
 5602 UNIVERSITY AVE
SAN DIEGO, CA 92105
 (619) 583-1993
Effective as of 01-OCT-11

**VILLA RANCHO BERNARDO
CARE CENTER**
 15720 BERNARDO CENTER
DR
SAN DIEGO, CA 92127
 (858) 672-3900
Effective as of 01-JAN-12

**WINDSOR GARDENS CONV
AND REHAB OF GOLDEN HILL**
 1201 34TH ST
SAN DIEGO, CA 92102
 (619) 232-2946
Effective as of 01-JAN-12


**BROOKDALE SAN JUAN
CAPISTRANO**
 31741 RANCHO VIEJO RD
SAN JUAN CAPISTRANO,
CA 92675
 (949) 248-8855
Effective as of 01-JUN-16

**STANFORD COURT SKILLED
NURSING AND REHAB
CENTER**
 8778 CUYAMACA ST
SANTEE, CA 92071
 (619) 449-5555
Effective as of 01-DEC-20

C3. 专业护理机构 (SNF)

BRIGHTON PLACE EAST


 8625 LAMAR ST
SPRING VALLEY, CA 91977

 (619) 461-3222

Effective as of 01-JAN-12


BRIGHTON PLACE SPRING VALLEY


 9009 CAMPO RD
SPRING VALLEY, CA 91977

 (619) 460-2711

Effective as of 01-JAN-12

SUN CITY CONVALESCENT CENTER


 27600 ENCANTO DR
SUN CITY, CA 92586

 (951) 679-6858

Effective as of 01-JAN-12

TEMECULA HEALTHCARE CENTER


 44280 CAMPANULA WAY
TEMECULA, CA 92592

 (951) 466-0200

Effective as of 02-MAR-22

LA FUENTE POST ACUTE


 247 E BOBIER DR
VISTA, CA 92084

 (760) 945-3033

Effective as of 01-DEC-21


LIFE CARE CENTER OF VISTA


 304 N MELROSE DR
VISTA, CA 92083

 (760) 724-8222

Effective as of 01-JAN-12

RANCHO VISTA


 760 E BOBIER DR
VISTA, CA 92084

 (760) 941-1480

Effective as of 01-FEB-13

VISTA HEALTHCARE CENTER


 247 E BOBIER DR
VISTA, CA 92084

 (760) 945-3033

Effective as of 01-OCT-13

VISTA KNOLL SPECIALIZED CARE FACILITY


 2000 WESTWOOD RD
VISTA, CA 92083

 (760) 630-2273

Effective as of 01-NOV-11

VISTA VIEW POST ACUTE

 304 N MELROSE DR
VISTA, CA 92083

 (760) 724-8222

Effective as of 01-SEP-24


D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所


ALPINE

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103

 Phone: 619-445-6200

 After Hours Phone: 619-445-6200

License Number: 20A17296

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH ALPINE


FAMILY MEDICINE

 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH ALPINE


FAMILY MEDICINE

 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: 90000681

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH ALPINE


FAMILY MEDICINE

 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: A158569

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

YSIDRO HEALTH ALPINE


FAMILY MEDICINE

 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: NP95005999

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

YSIDRO HEALTH ALPINE


FAMILY MEDICINE

 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: A97270

NPI: 1598122871

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH ALPINE
FAMILY MEDICINE

Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

Phone: 619-662-4100
Fax: 619-205-6305

After Hours Phone:
619-662-4100

License Number: DC28335
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH ALPINE
FAMILY MEDICINE

Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110

ALPINE, CA 91901-1103

Phone: 619-662-4100
Fax: 619-205-6305

After Hours Phone:
619-662-4100

License Number: C172036
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH ALPINE
FAMILY MEDICINE

Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: PA52347
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH ALPINE
FAMILY MEDICINE

Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: NP95006360
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH ALPINE
FAMILY MEDICINE

Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: PA20490
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER







Medical Group/IPA: SAN

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所



YSIDRO HEALTH ALPINE
FAMILY MEDICINE
 Website: www.mtnhealth.org




SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802
 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
 Phone: (619) 662-4100
Fax: (619) 320-3347
 After Hours Phone: (619)
662-4100
License Number: 090000681
NPI: 1770124315
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
 Site Languages(s) Spoken:
Arabic, Norwegian, Spanish,
Swedish
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: www.mtnhealth.org






CARLSBAD

TRUECARE



Provider ID: 480120
 1295 CARLSBAD VILLAGE
DR, STE 100
CARLSBAD, CA 92008-1950
 Phone: 760-736-6767

Fax: 760-720-7204
 After Hours Phone:
760-736-6767
License Number: PA22667
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE






Provider ID: 480120
 1295 CARLSBAD VILLAGE
DR, STE 100
CARLSBAD, CA 92008-1950
 Phone: 760-736-6767
Fax: 760-720-7204
 After Hours Phone:
760-736-6767
License Number: 80000630
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE




Provider ID: 480120
 1295 CARLSBAD VILLAGE
DR, STE 100
CARLSBAD, CA 92008-1950
 Phone: 760-736-6767

Fax: 760-720-7204
 After Hours Phone:
760-736-6767
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE

Provider ID: 480120
 1295 CARLSBAD VILLAGE
DR, STE 100
CARLSBAD, CA 92008-1950
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: A93248
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE

Provider ID: 480120
 1295 CARLSBAD VILLAGE
DR, STE 100
CARLSBAD, CA 92008-1950
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

License Number: G74757

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: N/A

TRUECARE

Provider ID: 480120

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

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: PA53036

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: N/A

TRUECARE

Provider ID: 480120

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

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: A131678

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: N/A

TRUECARE

Provider ID: 480120

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

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: A49273

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: N/A

TRUECARE

Provider ID: 480120

1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

License Number: 080000630

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

Hours: M-F

8:00AM-5:00PM

SA 8:00AM-2:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

Website: N/A

CHULA VISTA

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE
CHULA VISTA, CA
91910-2628

Phone: 619-515-2500

After Hours Phone:
619-515-2500

License Number: PT37189

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

Website: www.fhcsd.org


CHULA VISTA FAMILY HLTH CTR


D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Provider ID: 206355

 252 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org


CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

Fax: 619-397-1161

 After Hours Phone:
619-515-2500

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: PT294245

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: PT293536

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:

Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: PT295173

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355



 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500






 After Hours Phone:

D. Blue Shield Promise Medi-Cal 网络提供者名单






D1. 联邦认证合格的健康诊所

619-515-2500
License Number: PA21591
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org





CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone: 619-515-2500
License Number: PT292823
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR






Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone: 619-515-2500
License Number: PT291706
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR




Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone: 619-515-2500
License Number: NP95013978
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone: 619-515-2500
License Number: NP95001705
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone: 619-515-2500
License Number: NP95001964
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Spanish
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 *Website: www.fhcsd.org*

SAN YSIDRO HEALTH CHULA VISTA





Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: A138534
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: A159831




NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA






Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: A127706
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA


Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 *Phone: 619-662-4100*
 *After Hours Phone:*

619-662-4100
License Number: A134303
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: A138474
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA







Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所






 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A123492
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A123604
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA







Provider ID: 427322
 678 3RD AVE

CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A123263
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org







SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A120584
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A121861
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A120672
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: 20A12555

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: 20A11087

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: 20A19485

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: 20A14025

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: 20A13225

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A114600

NPI: 1598122871

Accepting New Patients: Yes



Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*


License Number: 20A9060

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: A106103

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: A115598

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: A114893

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: A115699

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA


 *Website: www.ihpsocal.org*

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone:
619-515-2500*

License Number: A154298

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500

License Number: A153344

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org


CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE

CHULA VISTA, CA

91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500

License Number: A119689

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish


Cultural Competency: No

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

American Sign Language (ASL): NPI: 1134155377

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 *Website: www.fhcsd.org*

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 *Phone: 619-515-2500*


 *After Hours Phone: 619-515-2500*

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes


 *Site English Spoken: Yes*

 *Site Languages(s) Spoken: Spanish*

Cultural Competency: No

American Sign Language (ASL): NPI: 1134155377

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 *Website: www.fhcsd.org*

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355


 251 LANDIS AVE
CHULA VISTA, CA
91910-2628


 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

License Number: A177698

Accepting New Patients: Yes

 *Site English Spoken: Yes*

 *Site Languages(s) Spoken: Spanish*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 *Website: www.fhcsd.org*

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 *Phone: 619-515-2500*


 *After Hours Phone: 619-515-2500*

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

 *Site Languages(s) Spoken: Spanish*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 *Website: www.fhcsd.org*


CHULA VISTA FAMILY HLTH CTR


Provider ID: 206355

 251 LANDIS AVE

CHULA VISTA, CA

91910-2628

 *Phone: 619-515-2500*


 *After Hours Phone: 619-515-2500*

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes


 *Site English Spoken: Yes*

 *Site Languages(s) Spoken: Spanish*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 *Website: www.fhcsd.org*

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 *Phone: 619-515-2500*


 *After Hours Phone: 619-515-2500*

License Number: A73172

NPI: 1134155377

Accepting New Patients: Yes


 *Site English Spoken: Yes*

 *Site Languages(s) Spoken: Spanish*

Cultural Competency: No

American Sign Language (ASL):


N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: A78355

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: DC26269

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish


Cultural Competency: No

American Sign Language (ASL): NPI: 1134155377

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: DPM4819

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: NP23687

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org




CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355





 251 LANDIS AVE

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所



CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: NP95001492
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR




Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: NP10943
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org




CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: G78814
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N



CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: NM792
NPI: 1134155377




CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: NM792
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No




American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: 20A14919
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: 20A11535

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: 20A11535

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org


CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE

CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

 1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823

 Phone: 619-205-1376

 After Hours Phone: 619-205-1376

License Number: A179598

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):

N


 Accessibility: CONTACT

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

PROVIDER
Medical Group/IPA: OTAY
FAMILY HEALTH CLINIC
 Website: www.ihpsocal.org

OTAY FAMILY HEALTH CLINIC

Provider ID: 314546
 1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823
 Phone: 619-662-4100
Fax: 619-336-2323
 After Hours Phone:
619-662-4100
NPI: 1598122871

Accepting New Patients: Yes




 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: OTAY
FAMILY HEALTH CLINIC
 Website: www.ihpsocal.org

OTAY FAMILY HEALTH CLINIC


Provider ID: 314546
 1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A123170
NPI: 1598122871

Accepting New Patients: Yes




 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER
Medical Group/IPA: OTAY
FAMILY HEALTH CLINIC
 Website: www.ihpsocal.org

OTAY FAMILY HEALTH CLINIC

Provider ID: 314546
 1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823
 Phone: 619-205-1360
 After Hours Phone:
619-205-1360
License Number: A95959
NPI: 1598122871

Accepting New Patients: Yes




 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: OTAY
FAMILY HEALTH CLINIC
 Website: www.ihpsocal.org

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641
 352 L ST
CHULA VISTA, CA
91911-1208
 Phone: 619-515-2325
Fax: 619-420-0660
 After Hours Phone:
619-515-2325
NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-RICE
FAM HC
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641
 352 L ST
CHULA VISTA, CA
91911-1208
 Phone: 619-515-2325
Fax: 619-420-0660
 After Hours Phone:
619-515-2325
License Number: 550002305
NPI: 1134155377




Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-RICE
FAM HC
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641
 352 L ST
CHULA VISTA, CA
91911-1208
 Phone: 619-515-2325
 After Hours Phone:
619-515-2325
License Number: PA19306
NPI: 1134155377

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-RICE
FAM HC

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641

352 L ST
CHULA VISTA, CA
91911-1208

Phone: 619-515-2325

After Hours Phone:
619-515-2325

License Number: A144995

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-RICE
FAM HC

Website: www.fhcsd.org

CHULA VISTA PEDIATRICS

Provider ID: 482034

855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353

Phone: 619-662-4100

Fax: 619-662-4196

After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CHULA
VISTA PEDIATRICS

Website: www.ihpsocal.org

CHULA VISTA PEDIATRICS

Provider ID: 482034

855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A82912

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CHULA
VISTA PEDIATRICS

Website: www.ihpsocal.org

CHULA VISTA PEDIATRICS

Provider ID: 482034

855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353

Phone: 619-662-4100

After Hours Phone:

619-662-4100

License Number: C51110

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CHULA
VISTA PEDIATRICS

Website: www.ihpsocal.org

CHULA VISTA PEDIATRICS

Provider ID: 482034

855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A49591

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CHULA
VISTA PEDIATRICS

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA





Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736


Phone: 619-662-4100

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所






 After Hours Phone:
619-662-4100
License Number: A41486
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA







Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A47906
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA







91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A50477
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA



Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A69264
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A56153
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A66903
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org


SAN YSIDRO HEALTH CHULA


D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A40473

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A40061

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A177922

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A162816

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A163183

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A164392

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):

N




 Accessibility: CONTACT

D. Blue Shield Promise Medi-Cal 网络提供者名单



D1. 联邦认证合格的健康诊所

PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org



SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: DDS102880
NPI: 1598122871



Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org




SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: DC33295
NPI: 1598122871



Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: DPM2930
NPI: 1598122871



Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org



SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: DC31963
NPI: 1598122871



Accepting New Patients: Yes
 Site English Spoken: Yes

Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org



SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: DC20760
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A77936
NPI: 1598122871

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A80185


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: C55563

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A87650

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A93785


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: G72486

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org




SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322





 678 3RD AVE
CHULA VISTA, CA

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所






91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: G57243
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA






Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: G59670
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322






 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: G80234
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA


Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: NP12112
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA

VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: G74728
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
Fax: 619-425-1184
 After Hours Phone:
619-662-4100
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: SP18192

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: NP95015413

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN

YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: PA54404

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-6941

After Hours Phone: (619)
662-4100

NPI: 1326486861

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: N

Hours: M-F

8:00AM-5:00PM

SA 8:00AM-4:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

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

SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS

Provider ID: 664445

280 E ST
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 426-2170

After Hours Phone: (619)
662-4100

License Number: 550002394

NPI: 1184135873

Accepting New Patients: Yes

Min/Max Age: 0\21

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: N

Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: www.syhealth.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355


D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
Fax: (619) 397-1161
 After Hours Phone: (619)
515-2500
NPI: 1346480837
Accepting New Patients: Yes
Min/Max Age: 0\150

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

Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: Family
Health Centers of San Diego

 Website: www.fhcsd.org
Email:
MARTHAO@FHCS.D.ORG

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641

 352 L ST
CHULA VISTA, CA 91911


 Phone: (619) 515-2325
Fax: (619) 420-0660

 After Hours Phone: (619)
515-2325

License Number: 550002305
NPI: 1083959464

Accepting New Patients: Yes
Min/Max Age: 0\150


Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL): NPI: 1609849074
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Family
Health Centers of San Diego



 Website: www.fhcsd.org
Email: chantalt@fhcsd.org

EL CAJON

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

 165 S 1ST ST
EL CAJON, CA 92019-4795

 Phone: 619-312-0347
 After Hours Phone:
619-312-0347

License Number: A68184
NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.or
g

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

 165 S 1ST ST
EL CAJON, CA 92019-4795


 Phone: 619-312-0348
 After Hours Phone:
619-312-0348

License Number: G45632

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA



MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.or
g

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

 165 S 1ST ST
EL CAJON, CA 92019-4795

 Phone: 619-312-0347
 After Hours Phone:
619-312-0347


License Number: PA58466

NPI: 1609849074

Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA



MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.or
g

LA MAESTRA FAMILY CLINIC INC


Provider ID: 185267

 165 S 1ST ST
EL CAJON, CA 92019-4795






 Phone: 619-269-1262
 After Hours Phone:

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所





619-269-1262
License Number: C55979
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC






Provider ID: 185267
 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: 619-312-0347
 After Hours Phone:
619-312-0347
License Number: 20A14222
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

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






 Phone: 619-312-0347
 After Hours Phone:
619-312-0347
License Number: A123929
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC






Provider ID: 185267
 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: 619-312-0347
 After Hours Phone:
619-312-0347
License Number: 20A6433
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498
License Number: A118095
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498
License Number: A127798
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN


D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所

DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A138815

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL


CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A134303

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A144974

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A146838

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A147976

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498


License Number: A83390

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: DC33150

NPI: 1134155377

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: DC33869

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: A175325

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

Website: www.fhcsd.org


FAMILY HLTH CTR SAN DIEGO-EL CAJON


D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A164859


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A152462


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A107093


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: 20A7241


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所


HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 Phone: 619-401-0404

 After Hours Phone:
619-401-0404


License Number: NP95001710

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CENTRO
MEDICO EL CAJON

 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 Phone: 619-873-8940

 After Hours Phone:
619-873-8940


License Number: 20A11733

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CENTRO
MEDICO EL CAJON

 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 Phone: 619-873-8940

 After Hours Phone:
619-873-8940

License Number: A113241

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CENTRO
MEDICO EL CAJON


 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 Phone: 619-401-0404

 After Hours Phone:
619-401-0404

License Number: G52812

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CENTRO
MEDICO EL CAJON


 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 Phone: 619-401-0404

 After Hours Phone:
619-401-0404

License Number: A98486

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CENTRO
MEDICO EL CAJON

 Website: N/A


CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 Phone: 619-873-8940

Fax: 619-401-0522

 After Hours Phone:
619-873-8940

License Number: 550000430

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: Yes

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CENTRO
MEDICO EL CAJON

 Website: N/A

CENTRO MEDICO EL CAJON

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Provider ID: 478971

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

Phone: 619-873-8940

Fax: 619-401-0522

After Hours Phone:
619-873-8940

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CENTRO
MEDICO EL CAJON

Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

Phone: 619-873-8940

After Hours Phone:
619-873-8940

License Number: DPM1536

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CENTRO
MEDICO EL CAJON

Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

133 W MAIN ST STE 100

EL CAJON, CA 92020-3325

Phone: 619-873-8940

After Hours Phone:
619-873-8940

License Number: A114674

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CENTRO
MEDICO EL CAJON

Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

Phone: 619-873-8940

After Hours Phone:
619-873-8940

License Number: PA16673

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CENTRO
MEDICO EL CAJON

Website: N/A

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: NP95021154

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL

CAJON

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: NP95009292

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL

CAJON

Website: www.fhcsd.org


FAMILY HLTH CTR SAN DIEGO-EL CAJON


D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: NP95013978


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: NP95007000

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: NP95009180

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: DPM5661


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: NM1721


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340


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

License Number: NP95000205
NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

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

License Number: NP15444
NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

CENTRO MEDICO EL CAJON

Provider ID: 478971

 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
 Phone: 619-401-0404
 After Hours Phone:
619-401-0404

License Number: A158569
NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CENTRO
MEDICO EL CAJON

 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
 Phone: 619-401-0404
 After Hours Phone:
619-401-0404


License Number: A151547
NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER
Medical Group/IPA: CENTRO
MEDICO EL CAJON
 Website: N/A

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2499
 After Hours Phone:
619-515-2499

License Number: RN428876
NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
Fax: 619-269-0191
 After Hours Phone:
619-515-2498

License Number: 550003553
NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *Website: www.fhcsd.org*


FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: 619-515-2498*

Fax: 619-269-0191

 *After Hours Phone:
619-515-2498*

License Number: 20A19473

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: 619-515-2498*

 *After Hours Phone:
619-515-2498*

License Number: PT295173

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: 619-515-2498*

 *After Hours Phone:
619-515-2498*

License Number: RN810863

NPI: 1134155377


Accepting New Patients: Yes

 *Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *Website: www.fhcsd.org*


FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: 619-515-2498*

Fax: 619-269-0191

 *After Hours Phone:
619-515-2498*

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes
Cultural Competency: No*

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: 619-515-2498*

 *After Hours Phone:
619-515-2498*

License Number: PA23258

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes
Cultural Competency: No*

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON





Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007







 *Phone: 619-515-2498*

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所



 After Hours Phone:
619-515-2498
License Number: PA20396
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON







Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498
License Number: PT292482
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON







Provider ID: 418340

 526 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498
License Number: A163464
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org






LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501
 1032 BROADWAY
EL CAJON, CA 92021-7416
 Phone: 619-795-5991
Fax: 619-795-5992
 After Hours Phone:
619-795-5991
License Number: 550003567
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA
MAESTRA CHC EL CAJON
BROADWAY
 Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501
 1032 BROADWAY
EL CAJON, CA 92021-7416
 Phone: 619-795-5991
 After Hours Phone:
619-795-5991
License Number: A160760
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA
MAESTRA CHC EL CAJON
BROADWAY
 Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501
 1032 BROADWAY
EL CAJON, CA 92021-7416
 Phone: 619-795-5991
 After Hours Phone:
619-795-5991
License Number: G50634
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所

MAESTRA CHC EL CAJON
BROADWAY
 Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021-7416

 Phone: 619-795-5991

 After Hours Phone:
619-795-5991

License Number: PA21625

NPI: 1609849074

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA


MAESTRA CHC EL CAJON


BROADWAY

 Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021-7416

 Phone: 619-795-5991

Fax: 619-795-5992

 After Hours Phone:
619-795-5991

NPI: 1609849074

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA CHC EL CAJON

BROADWAY

 Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021-7416

 Phone: 619-795-5991

 After Hours Phone:
619-795-5991

License Number: PA58466

NPI: 1609849074

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA CHC EL CAJON


BROADWAY

 Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021-7416

 Phone: 619-795-5991

 After Hours Phone:
619-795-5991

License Number: 20A6433

NPI: 1609849074

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA CHC EL CAJON


BROADWAY

 Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021-7416

 Phone: 619-795-5991

 After Hours Phone:
619-795-5991

License Number: A123929

NPI: 1609849074

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA CHC EL CAJON


BROADWAY

 Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY


Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021-7416







 Phone: 619-795-5991

D. Blue Shield Promise Medi-Cal 网络提供者名单







D1. 联邦认证合格的健康诊所

 After Hours Phone:
619-795-5991
License Number: 20A14222
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA
MAESTRA CHC EL CAJON
BROADWAY
 Website: www.lamaestra.org







FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498
License Number: 20A14919
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org







FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498
License Number: 20A13745
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org







FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498
License Number: 20A13060
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON


Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498
License Number: 20A11535
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC






Provider ID: 206354
 1111 W CHASE AVE
EL CAJON, CA 92020-5710
 Phone: 619-515-2499
Fax: 619-593-7164
 After Hours Phone:
619-515-2499
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHASE

D. Blue Shield Promise Medi-Cal 网络提供者名单




D1. 联邦认证合格的健康诊所

AVENUE FAMILY HEALTH
CTRS INC
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON




Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: PT293536
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org


CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354
 1111 W CHASE AVE
EL CAJON, CA 92020-5710
 Phone: 619-515-2499
 After Hours Phone:
619-515-2499
License Number: A110192
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHASE
AVENUE FAMILY HEALTH
CTRS INC
 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC




Provider ID: 206354
 1111 W CHASE AVE
EL CAJON, CA 92020-5710
 Phone: 619-515-2499
 After Hours Phone:
619-515-2499
License Number: A138887
NPI: 1134155377



Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CHASE
AVENUE FAMILY HEALTH
CTRS INC




 Website: www.fhcsd.org



CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354
 1111 W CHASE AVE
EL CAJON, CA 92020-5710
 Phone: 619-515-2499
 After Hours Phone:
619-515-2499
License Number: 20A13700
NPI: 1134155377


Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHASE
AVENUE FAMILY HEALTH
CTRS INC
 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354
 1111 W CHASE AVE
EL CAJON, CA 92020-5710
 Phone: 619-515-2499
 After Hours Phone:
619-515-2499
License Number: DC33150
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHASE
AVENUE FAMILY HEALTH
CTRS INC
 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354
 1111 W CHASE AVE

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

EL CAJON, CA 92020-5710
 Phone: 619-515-2499
 After Hours Phone:
619-515-2499
License Number: NP95007253
NPI: 1134155377

Accepting New Patients: Yes

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

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHASE
AVENUE FAMILY HEALTH
CTRS INC


 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE
EL CAJON, CA 92020-5710

 Phone: 619-515-2499

 After Hours Phone:
619-515-2499

License Number: A170055

NPI: 1134155377

Accepting New Patients: Yes


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

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHASE
AVENUE FAMILY HEALTH
CTRS INC

 Website: www.fhcsd.org

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: PT42665

NPI: 1598122871

Accepting New Patients: Yes

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

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: PT40025

NPI: 1598122871

Accepting New Patients: Yes

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

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NP95012943

NPI: 1598122871

Accepting New Patients: Yes

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

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A96002

NPI: 1598122871

Accepting New Patients: Yes

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

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所

Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON
 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A87650

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A79338

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON


 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NP95009329

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: G43179

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: C144411

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL


D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A101773

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A101888

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 20A10964

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 550002514

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A127706

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所


Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON
 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A120584

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A131365

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON


 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A47906

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON


 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A40473

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A134995

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

CAJON

Provider ID: 569910

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

Fax: (619) 785-3356

After Hours Phone: (619)
662-4100

License Number: 550002514

NPI: 1568845741

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Arabic, Farsi,
Russian, Latin

Cultural Competency: N

Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: www.syhealth.org

LA MAESTRA CHC-REA AVE

Provider ID: 664824

181 REA AVE
EL CAJON, CA 92020

Phone: (619) 312-0347

Fax: (619) 510-4649

After Hours Phone: (619)
312-0347

License Number: 090000378

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\999

Site English Spoken: Y

Cultural Competency: N

Hours: M-F

8:30AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: La

Maestra Family Clinic

Website: www.lamaestra.or
g

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

1032 BROADWAY
EL CAJON, CA 92021

Phone: (619) 795-5991

Fax: (619) 795-5992

After Hours Phone: (619)
795-5991

License Number: 550003567

NPI: 1134590086

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

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

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: La

Maestra Family Clinic

Website: www.lamaestra.or
g

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

1111 W CHASE AVE
EL CAJON, CA 92020

Phone: (619) 515-2499

Fax: (619) 593-7164

After Hours Phone: (619)
515-2499

NPI: 1104861681

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Family
Health Centers of San Diego

Website: www.fhcsd.org

Email: jaquelinca@fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

Fax: (619) 269-0191

After Hours Phone: (619)
515-2498

License Number: 550003553

NPI: 1932561198

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

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

SA 8:30AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Family

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所


Health Centers of San Diego

 Website: www.fhcsd.org


 Email: janellek@fhcsd.org


LA MAESTRA FAMILY CLINIC INC


Provider ID: 185267

 165 S 1ST ST

EL CAJON, CA 92019

 Phone: (619) 312-0347

 Fax: (619) 749-5480


 After Hours Phone: (619) 312-0347

NPI: 1336353721


Accepting New Patients: Yes

Min/Max Age: 0\150


 Site English Spoken: Y
Cultural Competency: N

 Hours: M-TU
8:00AM-5:00PM
TH-F 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: La
Maestra Family Clinic

 Website: www.lamaestra.org


 Email:


aschmaltz@lamaestra.org


ENCINITAS

TRUECARE

Provider ID: 480243

 1130 2ND ST
ENCINITAS, CA
92024-5008

 Phone: 760-753-7842

 Fax: 760-736-8740

 After Hours Phone:

760-753-7842

License Number: 80000638

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE


 Website: N/A

TRUECARE

Provider ID: 480243

 1130 2ND ST
ENCINITAS, CA
92024-5008

 Phone: 760-753-7842

 After Hours Phone:
760-753-7842

License Number: C54157

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: N/A


TRUECARE

Provider ID: 480243

 1130 2ND ST
ENCINITAS, CA
92024-5008

 Phone: 760-753-7842

 Fax: 760-736-8740

 After Hours Phone:
760-753-7842

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE


 Website: N/A

TRUECARE

Provider ID: 480243

 1130 2ND ST
ENCINITAS, CA
92024-5008

 Phone: 760-753-7842

 After Hours Phone:
760-753-7842

License Number: A103940

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: N/A

TRUECARE

Provider ID: 480243

 1130 2ND ST
ENCINITAS, CA
92024-5008

 Phone: 760-753-7842

 After Hours Phone:
760-753-7842

License Number: A116562

NPI: 1598122871

Accepting New Patients: Yes



D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所




Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE Website: N/A	American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE Website: N/A	Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE Website: N/A
TRUECARE Provider ID: 480243 1130 2ND ST ENCINITAS, CA 92024-5008 Phone: 760-736-6767 After Hours Phone: 760-736-6767 License Number: DC29074 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE Website: N/A	TRUECARE Provider ID: 480243 1130 2ND ST ENCINITAS, CA 92024-5008 Phone: 760-736-6767 After Hours Phone: 760-736-6767 License Number: PA19437 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE Website: N/A	TRUECARE Provider ID: 480243 1130 2ND ST ENCINITAS, CA 92024-5008 Phone: 760-736-6767 After Hours Phone: 760-736-6767 License Number: 20A17306 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE Website: N/A
TRUECARE Provider ID: 480243 1130 2ND ST ENCINITAS, CA 92024-5008 Phone: 760-736-6767 After Hours Phone: 760-736-6767 License Number: NP21368 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No	TRUECARE Provider ID: 480243 1130 2ND ST ENCINITAS, CA 92024-5008 Phone: 760-736-6767 After Hours Phone: 760-736-6767 License Number: PA22667 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N	ESCONDIDO
		SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE Provider ID: 588941 704 E GRAND AVE ESCONDIDO, CA 92025-4405 Phone: 619-662-4100 After Hours Phone: 619-662-4100 License Number: C171064 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No

D. Blue Shield Promise Medi-Cal 网络提供者名单



D1. 联邦认证合格的健康诊所

American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE
 *Website: N/A*


SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE



Provider ID: 588941
 704 E GRAND AVE
ESCONDIDO, CA
92025-4405
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: G58033
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE
 *Website: N/A*

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE



Provider ID: 588941
 704 E GRAND AVE
ESCONDIDO, CA
92025-4405
 *Phone: 619-662-4100*
 *After Hours Phone:*

619-662-4100
License Number: NP95006360
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE
 *Website: N/A*

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE




Provider ID: 588941
 704 E GRAND AVE
ESCONDIDO, CA
92025-4405
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: NP95005999
NPI: 1598122871



Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE
 *Website: N/A*





SAN YSIDRO HEALTH ESCONDIDO FAMILY

MEDICINE

Provider ID: 588941
 704 E GRAND AVE
ESCONDIDO, CA
92025-4405
 *Phone: 619-662-4100*
Fax: 619-662-7952
 *After Hours Phone: 619-662-4100*
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE
 *Website: N/A*

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775
 426 N DATE ST
ESCONDIDO, CA
92025-3409
 *Phone: 760-690-5900*
 *After Hours Phone: 760-690-5900*
License Number: A56054
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA:

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所


NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL

 Website: N/A

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941

 704 E GRAND AVE
ESCONDIDO, CA
92025-4405

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: PA52347

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH ESCONDIDO
FAMILY MEDICINE

 Website: N/A

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941

 704 E GRAND AVE
ESCONDIDO, CA
92025-4405

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: PA20490

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH ESCONDIDO
FAMILY MEDICINE


 Website: N/A

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

 After Hours Phone:
760-520-8100

License Number: A61751

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

 After Hours Phone:

760-520-8100


License Number: A45413

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:
NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

 After Hours Phone:
760-520-8100

License Number: A139490

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:
NEIGHBORHOOD

HEALTHCARE ESCONDIDO







 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO







Provider ID: 206270

D. Blue Shield Promise Medi-Cal 网络提供者名单







D1. 联邦认证合格的健康诊所

 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: A152372
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org






NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: A159727
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO







Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: DC12036
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO





Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: DC28605
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: A94128
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: A78116
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

American Sign Language (ASL): License Number: 80000397
N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 *Website: www.ihpsocal.org*


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 *Phone: 760-520-8100*

 *After Hours Phone:
760-520-8100*

License Number: A82173


NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): License Number: G61829

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 *Website: www.ihpsocal.org*

NEIGHBORHOOD


HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 *Phone: 760-520-8100*

Fax: 360-466-2745

 *After Hours Phone:
760-520-8100*

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 *Website: www.ihpsocal.org*


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 *Phone: 760-520-8100*

 *After Hours Phone:
760-520-8100*

License Number: G61829

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 *Website: www.ihpsocal.org*

NEIGHBORHOOD


HEALTHCARE ESCONDIDO

Provider ID: 206270


 460 N ELM ST

ESCONDIDO, CA

92025-3002

 *Phone: 760-520-8100*

Fax: 360-466-2745

 *After Hours Phone:
760-520-8100*

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE ESCONDIDO


 *Website: www.ihpsocal.org*


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002


 *Phone: 760-520-8100*

 *After Hours Phone:
760-520-8100*

License Number: A109655

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 *Website: www.ihpsocal.org*


D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

 After Hours Phone:
760-520-8100

License Number: A119661

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

 After Hours Phone:
760-520-8100

License Number: A120771

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

 After Hours Phone:
760-520-8100

License Number: A107557

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

 After Hours Phone:
760-520-8100

License Number: 20A14292

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA
92025-3409

 Phone: 760-690-5900

 After Hours Phone:
760-690-5900

License Number: G83438

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE PEDIATRICS


AND PRENATAL


 Website: N/A

NEIGHBORHOOD

HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775



 426 N DATE ST
ESCONDIDO, CA
92025-3409




 Phone: 760-690-5900



 After Hours Phone:

D. Blue Shield Promise Medi-Cal 网络提供者名单




D1. 联邦认证合格的健康诊所

760-690-5900
License Number: NP4799
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL
 Website: N/A


**NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL**
Provider ID: 424775
 426 N DATE ST
ESCONDIDO, CA
92025-3409
 Phone: 760-690-5900
 After Hours Phone:
760-690-5900

License Number: A67626
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL
 Website: N/A




**NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL**

Provider ID: 424775
 426 N DATE ST
ESCONDIDO, CA
92025-3409
 Phone: 760-690-5900
 After Hours Phone:
760-690-5900



License Number: A62467
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL
 Website: N/A




**NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL**

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

License Number: 550000511
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL
 Website: N/A


**NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL**

Provider ID: 424775
 426 N DATE ST
ESCONDIDO, CA
92025-3409
 Phone: 760-690-5900
Fax: 360-462-2747
 After Hours Phone:
760-690-5900
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL
 Website: N/A


**NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL**

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

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所


 Phone: 760-520-8340

 After Hours Phone:
760-520-8340

License Number: A56054

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE PEDS AND


PRENATAL

 Website: www.ihpsocal.org


NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL

Provider ID: 206266

 425 N DATE ST
ESCONDIDO, CA
92025-3413

 Phone: 760-520-8340

Fax: 360-462-2752


 After Hours Phone:
760-520-8340

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE PEDS AND


PRENATAL


 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL

Provider ID: 206266

 425 N DATE ST
ESCONDIDO, CA
92025-3413

 Phone: 760-520-8340

 After Hours Phone:
760-520-8340

License Number: A67626

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE PEDS AND


PRENATAL

 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

 After Hours Phone:
760-737-6900

License Number: A120348

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE VALLEY


PARKWAY


 Website: N/A

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

 After Hours Phone:
760-737-6900

License Number: A139490

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE VALLEY

PARKWAY

 Website: N/A






NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271






 728 E VALLEY PKWY
ESCONDIDO, CA

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所







92025-3052
 Phone: 760-737-6900
 After Hours Phone:
760-737-6900
License Number: A140398
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY
 Website: N/A

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY





Provider ID: 206271
 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052
 Phone: 760-737-6900
 After Hours Phone:
760-737-6900
License Number: A145349
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 Website: N/A

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271
 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052
 Phone: 760-737-6900
 After Hours Phone:
760-737-6900
License Number: A161074
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY
 Website: N/A





NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271
 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052
 Phone: 760-737-6900
 After Hours Phone:
760-737-6900
License Number: A94128
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY
 Website: N/A

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271
 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052
 Phone: 760-737-6900
 After Hours Phone:
760-737-6900
License Number: NP8169
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N






 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY
 Website: N/A

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY






Provider ID: 206271
 728 E VALLEY PKWY
ESCONDIDO, CA

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所







92025-3052
 Phone: 760-737-6900
 After Hours Phone:
760-737-6900
License Number: G61829
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY
 Website: N/A

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY




Provider ID: 206271
 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052
 Phone: 760-737-6900
 After Hours Phone:
760-737-6900
License Number: DPM5260
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 Website: N/A

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY







Provider ID: 206271
 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052
 Phone: 760-737-6900
Fax: 360-462-2748
 After Hours Phone:
760-737-6900
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY
 Website: N/A

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY




Provider ID: 206271
 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052
 Phone: 760-737-6900
Fax: 360-462-2748
 After Hours Phone:
760-737-6900
License Number: 80000158
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes

Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY
 Website: N/A

NEIGHBORHOOD HEALTHCARE GRAND AVE

Provider ID: 206269
 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604
 Phone: 760-520-8200
 After Hours Phone:
760-520-8200
License Number: A94128
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE GRAND AVE
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE GRAND AVE






Provider ID: 206269
 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604
 Phone: 760-520-8200
 After Hours Phone:

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所






760-520-8200
License Number: A161074
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE GRAND AVE
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE GRAND AVE





Provider ID: 206269
 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604
 Phone: 760-520-8200
 After Hours Phone:
760-520-8200
License Number: A101773
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE GRAND AVE
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE GRAND AVE

Provider ID: 206269






 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604
 Phone: 760-520-8200
Fax: 360-462-2749
 After Hours Phone:
760-520-8200
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE GRAND AVE
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE GRAND AVE




Provider ID: 206269
 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604
 Phone: 760-520-8200
Fax: 360-462-2749
 After Hours Phone:
760-520-8200
License Number: 550000697
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE GRAND AVE

 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE GRAND AVE

Provider ID: 206269
 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604
 Phone: 760-520-8200
 After Hours Phone:
760-520-8200
License Number: PA51508
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE GRAND AVE
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE GRAND AVE





Provider ID: 206269
 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604
 Phone: 760-520-8200
Fax: 360-462-2749
 After Hours Phone:
760-520-8200
License Number: 80000397
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N



D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所




 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NEIGHBORHOOD HEALTHCARE GRAND AVE
 *Website: www.ihpsocal.org*

NEIGHBORHOOD HEALTHCARE GRAND AVE

Provider ID: 206269
 1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
 *Phone: 760-520-8200*
Fax: 360-462-2749
 *After Hours Phone: 760-520-8200*
License Number: 80000483
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NEIGHBORHOOD HEALTHCARE GRAND AVE
 *Website: www.ihpsocal.org*

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 206266
 425 N DATE ST
ESCONDIDO, CA 92025
 *Phone: (760) 520-8340*
Fax: (360) 462-2752
 *After Hours Phone: (760) 520-8340*
NPI: 1265618185

Accepting New Patients: Yes
Min/Max Age: 0\21

 *Site English Spoken: Y*
Cultural Competency: N

 *Hours: M-F 8:00AM-5:00PM*



American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: IHP of Southern Cal-PHP

 *Website: www.ihpsocal.org*

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY


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

 *After Hours Phone: (760) 737-6900*

License Number: 080000158
NPI: 1720264641

Accepting New Patients: Yes
Min/Max Age: 0\150

 *Site English Spoken: Y*
Cultural Competency: N

 *Hours: M-TU 8:00AM-5:00PM*
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP of Southern Cal-PHP

 *Website: N/A*

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA 92025


 *Phone: (760) 690-5900*
Fax: (360) 462-2747

 *After Hours Phone: (760) 690-5900*

License Number: 550000511
NPI: 1437335353

Accepting New Patients: Yes
Min/Max Age: 0\21

 *Site English Spoken: Y*
Cultural Competency: N

 *Hours: M-F 8:00AM-5:00PM*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP of Southern Cal-PHP

 *Website: N/A*

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270


 460 N ELM ST
ESCONDIDO, CA 92025

 *Phone: (760) 520-8100*
Fax: (360) 466-2745

 *After Hours Phone: (760) 520-8100*

License Number: 080000397
NPI: 1598703647

Accepting New Patients: Yes
Min/Max Age: 0\150

 *Site English Spoken: Y*
Cultural Competency: N

 *Hours: M-F*

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

8:00AM-5:00PM
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.ihpsocal.org

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
Fax: (760) 745-7847
After Hours Phone: (619) 662-4100
NPI: 1801438239
Accepting New Patients: Yes
Min/Max Age: 0\120
Site English Spoken: Y
Site Languages(s) Spoken: Arabic, Farsi, Spanish, Tagalog

Cultural Competency: N
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: N/A

ESCONDIDO FAMILY HEALTH CENTER

Provider ID: 652372
128 N BROADWAY
ESCONDIDO, CA 92025
Phone: (619) 515-2474
After Hours Phone: (619)

515-2474
License Number: 550002865
NPI: 1417640491
Accepting New Patients: Yes
Min/Max Age: 0\999
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: Family Health Centers of San Diego
Website: N/A

FALLBROOK

VISTA COMMUNITY CLINIC

Provider ID: 624122
321 E ALVARADO ST
FALLBROOK, CA 92028-2912
Phone: 760-723-6200
After Hours Phone: 760-723-6200
License Number: NP95003447
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

FALLBROOK FAMILY HLTH CTR

Provider ID: 183910

1328 S MISSION RD
FALLBROOK, CA 92028-4006
Phone: 760-451-4770
After Hours Phone: 760-451-4770
License Number: A169529
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FALLBROOK FAMILY HLTH CTR
Website: N/A

FALLBROOK FAMILY HLTH CTR

Provider ID: 183910
1328 S MISSION RD
FALLBROOK, CA 92028-4006
Phone: 760-451-4720
Fax: 760-451-4700
After Hours Phone: 760-451-4720
License Number: 80000150
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL):
N
Accessibility: CONTACT

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

PROVIDER
Medical Group/IPA:
FALLBROOK FAMILY HLTH
CTR
Website: N/A

FALLBROOK FAMILY HLTH CTR

Provider ID: 183910
1328 S MISSION RD
FALLBROOK, CA
92028-4006
Phone: 760-451-4720
Fax: 760-451-4700
After Hours Phone:
760-451-4720
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken:
Spanish

Cultural Competency: No
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

Medical Group/IPA:
FALLBROOK FAMILY HLTH
CTR
Website: N/A

VISTA COMMUNITY CLINIC

Provider ID: 624122
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760)
723-6200
License Number: 080000002
NPI: 1649662719
Accepting New Patients: No
Min/Max Age: 0\999

Site English Spoken: Y
Cultural Competency: N
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760)
723-6200
License Number: 550004110
NPI: 1316501562
Accepting New Patients: No
Min/Max Age: 0\999

Site English Spoken: Y
Cultural Competency: N
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122
321 E ALVARADO ST

FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760)
723-6200
License Number: 550003781
NPI: 1316501562
Accepting New Patients: No
Min/Max Age: 0\999

Site English Spoken: Y
Cultural Competency: N
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760)
723-6200
License Number: 080000002
NPI: 1316501562
Accepting New Patients: No
Min/Max Age: 0\999

Site English Spoken: Y
Cultural Competency: N
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所


Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200


License Number: 080000002

NPI: 1851300123

Accepting New Patients: No


Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: N

 Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

License Number: 550004110


NPI: 1649662719

Accepting New Patients: No

Min/Max Age: 0\999

 Site English Spoken: Y

Cultural Competency: N

 Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200


 After Hours Phone: (760)
723-6200


License Number: 550003781

NPI: 1649662719

Accepting New Patients: No

Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: N

 Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200


License Number: 550003781

NPI: 1851300123

Accepting New Patients: No

Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: N

 Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200


License Number: 550004110

NPI: 1851300123

Accepting New Patients: No


Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: N

 Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所


Southern Cal-PHP


 Website: www.vistacommu-nityclinic.org


IMPERIAL BEACH

IMPERIAL BEACH HEALTH CENTER

Provider ID: 179678

 949 PALM AVE
IMPERIAL BEACH, CA
91932-1503

 Phone: 619-429-3733

 After Hours Phone:
619-429-3733

License Number: A51447

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IMPERIAL
BEACH HEALTH CENTER


 Website: www.ihpsocal.org

IMPERIAL BEACH HEALTH CENTER

Provider ID: 179678

 949 PALM AVE
IMPERIAL BEACH, CA
91932-1503

 Phone: 619-429-3733

 After Hours Phone:
619-429-3733

License Number: A66830

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IMPERIAL
BEACH HEALTH CENTER

 Website: www.ihpsocal.org

IMPERIAL BEACH HEALTH CENTER

Provider ID: 179678

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

License Number: 090000119

NPI: 1790718351


Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP


 Website: www.ihpsocal.org

LA MESA


LA MESA PEDIATRICS

Provider ID: 480827

 8881 FLETCHER PKWY STE
200
LA MESA, CA 91942-3135

 Phone: 619-464-6434

Fax: 619-464-5109

 After Hours Phone:
619-464-6434

License Number: A89865

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LA MESA
PEDIATRICS

 Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827

 8881 FLETCHER PKWY STE
200
LA MESA, CA 91942-3135

 Phone: 619-464-6434

Fax: 619-464-5109

 After Hours Phone:
619-464-6434

License Number: 550000430

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: Yes

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA MESA
PEDIATRICS

 Website: N/A

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

LA MESA PEDIATRICS

Provider ID: 480827

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942-3135

Phone: 619-464-6434

Fax: 619-464-5109

After Hours Phone:
619-464-6434

License Number: 20A11733

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA MESA
PEDIATRICS

Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942-3135

Phone: 619-464-6434

Fax: 619-464-5109

After Hours Phone:
619-464-6434

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA MESA
PEDIATRICS

Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942-3135

Phone: 619-464-6434

After Hours Phone:
619-464-6434

License Number: NP95017921

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA MESA
PEDIATRICS

Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942-3135

Phone: 619-464-6434

Fax: 619-464-5109

After Hours Phone:
619-464-6434

License Number: A113241

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA MESA

PEDIATRICS

Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942-3135

Phone: 619-464-6434

Fax: 619-464-5109

After Hours Phone:
619-464-6434

License Number: C133872

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA MESA
PEDIATRICS

Website: N/A

LAKESIDE

NEIGHBORHOOD

HEALTHCARE LAKESIDE

Provider ID: 353843

10039 VINE ST
LAKESIDE, CA 92040-3120

Phone: 858-218-3000

Fax: 360-462-2744

After Hours Phone:
858-218-3000

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes



Cultural Competency: No

American Sign Language (ASL):

N

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA:
NEIGHBORHOOD HEALTHCARE LAKESIDE
 *Website: www.ihpsocal.org*

NEIGHBORHOOD HEALTHCARE LAKESIDE

Provider ID: 353843

 10039 VINE ST
LAKESIDE, CA 92040-3120
 *Phone: 858-218-3000*
 *After Hours Phone:*
858-218-3000


License Number: A75411

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*



Medical Group/IPA:


NEIGHBORHOOD HEALTHCARE LAKESIDE

 *Website: www.ihpsocal.org*

NEIGHBORHOOD HEALTHCARE LAKESIDE

Provider ID: 353843

 10039 VINE ST
LAKESIDE, CA 92040-3120
 *Phone: 858-218-3000*
Fax: 360-462-2744

 *After Hours Phone:*
858-218-3000

License Number: 80000483

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA:

NEIGHBORHOOD HEALTHCARE LAKESIDE

 *Website: www.ihpsocal.org*

NEIGHBORHOOD HEALTHCARE LAKESIDE

Provider ID: 353843

 10039 VINE ST
LAKESIDE, CA 92040-3120
 *Phone: 858-218-3000*
 *After Hours Phone:*
858-218-3000


License Number: A152372

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*



Medical Group/IPA:

NEIGHBORHOOD HEALTHCARE LAKESIDE

 *Website: www.ihpsocal.org*

NEIGHBORHOOD HEALTHCARE LAKESIDE

Provider ID: 353843

 10039 VINE ST
LAKESIDE, CA 92040-3120
 *Phone: 858-218-3000*
 *After Hours Phone:*
858-218-3000

License Number: A43914

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA:

NEIGHBORHOOD HEALTHCARE LAKESIDE

 *Website: www.ihpsocal.org*

NEIGHBORHOOD HEALTHCARE LAKESIDE

Provider ID: 353843

 10039 VINE ST
LAKESIDE, CA 92040-3120
 *Phone: 858-218-3000*
 *After Hours Phone:*
858-218-3000


License Number: DC33688

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*



Medical Group/IPA:

NEIGHBORHOOD HEALTHCARE LAKESIDE

 *Website: www.ihpsocal.org*


NEIGHBORHOOD HEALTHCARE LAKESIDE

Provider ID: 353843

 10039 VINE ST
LAKESIDE, CA 92040
 *Phone: (858) 218-3000*
Fax: (360) 462-2744

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

 After Hours Phone: (858)
218-3000

License Number: 080000483


NPI: 1932384120

Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y

Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP


 Website: www.ihpsocal.org


LEMON GROVE

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: A107323

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

American Sign Language (ASL): NPI: 1134155377

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


 *Website: N/A*

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 *Phone: 619-515-2550*

 *After Hours Phone:
619-515-2550*

License Number: A102060

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

 *Website: N/A*

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 *Phone: 619-515-2550*

 *After Hours Phone:
619-515-2550*

License Number: A148014

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


 *Website: N/A*

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 *Phone: 619-515-2550*

 *After Hours Phone:
619-515-2550*

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


 *Website: N/A*


LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA

91945-1604

 *Phone: 619-515-2550*

 *After Hours Phone:
619-515-2550*

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

 *Website: N/A*

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 *Phone: 619-515-2550*

 *After Hours Phone:
619-515-2550*

License Number: A114181


NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

 *Website: N/A*

LEMON GROVE FAMILY

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): NPI: 1134155377

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): NPI: 1134155377

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH

CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A165925

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A154838

NPI: 1134155377

Accepting New Patients: Yes

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): NPI: 1134155377

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: A163464


NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): NPI: 1134155377

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:

619-515-2550

License Number: NP15444

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: C174771

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


 Website: N/A


D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: C172318

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

 Website: N/A


LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

Fax: 619-825-9577

 After Hours Phone:
619-515-2550

License Number: 550001268

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT


PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

Fax: 619-825-9577

 After Hours Phone:
619-515-2550

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: PA56072

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: RN428876

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

License Number: NP95013978

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: PA12416

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


 Website: N/A


LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY

LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: NP95009933

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: NP95008782

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: NP95001050

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

Fax: (619) 825-9577

 After Hours Phone: (619)
515-2550

License Number: 550001268


NPI: 1427282466

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N



 Hours: M-F
9:00AM-5:00PM

American Sign Language (ASL):

N







D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所




 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: Family Health Centers of San Diego
 *Website: N/A*
Email: valeriade@fhcsd.org


NATIONAL CITY



LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270
 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
 *Phone: 619-280-4213*
 *After Hours Phone: 619-280-4213*
License Number: A167184
NPI: 1609849074
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
 *Website: www.lamaestra.org*





FAMILY HEALTH CTR SD NATIONAL CITY



Provider ID: 418930
 1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856
 *Phone: 619-515-2399*
Fax: 619-269-0053
 *After Hours Phone: 619-515-2399*

License Number: 550000465
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY
 *Website: www.fhcsd.org*






FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930
 1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856
 *Phone: 619-515-2399*
Fax: 619-269-0053
 *After Hours Phone: 619-515-2399*
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N







 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY
 *Website: www.fhcsd.org*

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930
 1000 EUCLID AVE

NATIONAL CITY, CA
91950-3856
 *Phone: 619-515-2399*
 *After Hours Phone: 619-515-2399*
License Number: NP95010663
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY
 *Website: www.fhcsd.org*

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930
 1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856
 *Phone: 619-515-2399*
 *After Hours Phone: 619-515-2399*
License Number: PA55660
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY
 *Website: www.fhcsd.org*

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

Phone: 619-515-2399

After Hours Phone:
619-515-2399

License Number: A163862

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CTR SD NATIONAL
CITY

Website: www.fhcsd.org

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

Phone: 619-515-2399

After Hours Phone:
619-515-2399

License Number: A176878

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

HEALTH CTR SD NATIONAL CITY

Website: www.fhcsd.org

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

Phone: 619-515-2399

After Hours Phone:
619-515-2399

License Number: 20A18460

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CTR SD NATIONAL
CITY

Website: www.fhcsd.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

Phone: 619-798-3977

After Hours Phone:
619-798-3977

License Number: A41375

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC INC

Website: www.lamaestra.or
g

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

Phone: 619-564-8765

After Hours Phone:
619-564-8765

License Number: NP95009891

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC INC

Website: www.lamaestra.or
g

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

Phone: 619-434-7308

After Hours Phone:
619-434-7308

License Number: G45632

NPI: 1609849074

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Accepting New Patients: Yes


 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

 Phone: 619-434-7308

 After Hours Phone:
619-434-7308


License Number: C55979

NPI: 1609849074

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org


LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

 Phone: 619-434-7308

Fax: 619-434-7310

 After Hours Phone:
619-434-7308

License Number: NP95013257

NPI: 1609849074

Accepting New Patients: Yes


 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

 Phone: 619-434-7308

 After Hours Phone:
619-434-7308

License Number: 20A6433

NPI: 1609849074

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

 Phone: 619-434-7308

 After Hours Phone:
619-434-7308

License Number: A123929

NPI: 1609849074

Accepting New Patients: Yes


 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

 1136 D AVE
NATIONAL CITY, CA
91950-3412

 Phone: 619-428-4463

 After Hours Phone:
619-428-4463

License Number: G71855

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN

YSIDRO HEALTH NATIONAL
CITY


D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

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

 Phone: 619-662-4100

Fax: 619-259-2807


 After Hours Phone:
619-662-4100

License Number: A71304

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

 1136 D AVE
NATIONAL CITY, CA
91950-3412

 Phone: 619-336-2300

 After Hours Phone:
619-336-2300

License Number: A78373

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): NPI: 1598122871

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

 1136 D AVE
NATIONAL CITY, CA
91950-3412

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A103218

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

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


 Phone: 619-662-4100

Fax: 619-259-2807

 After Hours Phone:
619-662-4100

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

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

 Phone: 619-662-4100

Fax: 619-259-2807


 After Hours Phone:
619-662-4100

License Number: A113624

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH


D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

PARADISE HILLS

Provider ID: 227418

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

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A146819

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH

PARADISE HILLS

Provider ID: 227418

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

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A118227

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH

PARADISE HILLS

Provider ID: 227418

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

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A138534

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS


 Website: www.ihpsocal.org


SAN YSIDRO HEALTH

PARADISE HILLS

Provider ID: 227418

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

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A157488

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH

PARADISE HILLS

Provider ID: 227418

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

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A167529

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH

PARADISE HILLS

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Provider ID: 227418

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

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: G88347

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

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

Phone: 619-662-4100

Fax: 619-259-2806

After Hours Phone:
619-662-4100

License Number: 20A11518

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

Website: www.ihpsocal.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410

Phone: 844-200-2426

Fax: 619-474-3919

After Hours Phone:
844-200-2426

License Number: 90000183

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:
OPERATION SAMAHAN -
NATIONAL C

Website: www.operationsa
mahan.org

OPERATION SAMAHAN GRANGER SCHOOL BASED

Provider ID: 418302

2101 GRANGER AVE
NATIONAL CITY, CA
91950-6208

Phone: 844-200-2426

Fax: 619-434-8999

After Hours Phone:
844-200-2426

License Number: 550002622

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:
OPERATION SAMAHAN
GRANGER SCHOOL BASED

Website: www.operationsa
mahan.org

OPERATION SAMAHAN GRANGER SCHOOL BASED

Provider ID: 418302

2101 GRANGER AVE
NATIONAL CITY, CA
91950-6208

Phone: 844-200-2426

Fax: 619-434-8999

After Hours Phone:
844-200-2426

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:
OPERATION SAMAHAN
GRANGER SCHOOL BASED

Website: www.operationsa
mahan.org

OPERATION SAMAHAN -

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

NATIONAL C

Provider ID: 417102

2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410

Phone: 844-200-2426

Fax: 619-474-3919

After Hours Phone:
844-200-2426

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN -
NATIONAL C

Website: www.operationsamahan.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410

Phone: 844-200-2426

After Hours Phone:
844-200-2426

License Number: NP95000203

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN -
NATIONAL C

Website: www.operationsamahan.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410

Phone: 844-200-2426

After Hours Phone:
844-200-2426

License Number: A74777

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN -
NATIONAL C

Website: www.operationsamahan.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410

Phone: 844-200-2426

After Hours Phone:
844-200-2426

License Number: NP22974

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN -
NATIONAL C

Website: www.operationsamahan.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

1136 D AVE
NATIONAL CITY, CA
91950-3412

Phone: 619-662-4100

Fax: 619-474-3722

After Hours Phone:
619-662-4100

License Number: A55469

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY

Website: www.ihpsocal.org

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

1136 D AVE
NATIONAL CITY, CA
91950-3412

Phone: 619-662-4100

Fax: 619-336-2323

After Hours Phone:
619-662-4100

License Number: A112571

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY

Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

1136 D AVE
NATIONAL CITY, CA
91950-3412

Phone: 619-662-4100

Fax: 619-336-2323

After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY

Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

1136 D AVE
NATIONAL CITY, CA
91950-3412

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A165184

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY

Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

1136 D AVE
NATIONAL CITY, CA
91950-3412

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: C55180

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY

Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

1136 D AVE
NATIONAL CITY, CA
91950-3412

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A138919

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

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

Phone: 619-662-4100

After Hours Phone:
619-662-4100

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

License Number: 20A12653

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH SOUTH BAY

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

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

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A133539

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH SOUTH BAY

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

 1136 D AVE
NATIONAL CITY, CA
91950-3412

 Phone: 619-662-4100

Fax: 619-474-3722

 After Hours Phone:
619-662-4100

License Number: G46444

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH NATIONAL CITY

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

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

 Phone: 619-662-4100

Fax: 619-259-2807

 After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH SOUTH BAY


 Website: www.ihpsocal.org

OPERATION SAMAHAN GRANGER SCHOOL BASED

Provider ID: 418302

 2101 GRANGER AVE
NATIONAL CITY, CA
91950-6208

 Phone: 844-200-2426

 After Hours Phone:
844-200-2426

License Number: NP95000203

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA:


OPERATION SAMAHAN
GRANGER SCHOOL BASED

 Website: www.operationsamahan.org

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

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

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: G71855

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

YSIDRO HEALTH SOUTH BAY

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

 330 E 8TH ST
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 434-3514


 After Hours Phone: (619)
662-4100

NPI: 1851757215


Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.syhealth.org


Email:

dinah.pierce@syhealth.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

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

 Phone: (619) 662-4100

Fax: (619) 259-2807


 After Hours Phone: (619)
662-4100

NPI: 1598907487


Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y

 Site Languages(s) Spoken:
Tagalog, Spanish


Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: syhealth.org/clinics/paradise-hills-family-clinic

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308


Fax: (619) 434-7310


 After Hours Phone: (619)
434-7308

NPI: 1336353721

Accepting New Patients: Yes

Min/Max Age: 0\150


 Site English Spoken: Y
Cultural Competency: N

 Hours: TH 8:00AM-2:00PM
American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: La
Maestra Family Clinic

 Website: www.lamaestra.org


Email:

aschmaltz@lamaestra.org

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

Fax: (619) 269-0053

 After Hours Phone: (619)
515-2399


License Number: 550000465

NPI: 1417409228

Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y
Cultural Competency: N

 Hours: M 8:30AM-3:30PM
TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Family
Health Centers of San Diego


 Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

OPERATION SAMAHAN GRANGER SCHOOL BASED

Provider ID: 418302

 2101 GRANGER AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

Fax: (619) 434-8999

 After Hours Phone: (844)
200-2426

License Number: 550002622

NPI: 1205134517

Accepting New Patients: Yes

Min/Max Age: 0\150

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Site English Spoken: Y
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: Operation
Samahan
 Website: www.operationsamahan.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102
 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
Fax: (619) 474-3919
 After Hours Phone: (844)
200-2426
License Number: 090000183
NPI: 1801907449
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
 Site Languages(s) Spoken:
Tagalog, Lao, Spanish
Cultural Competency: N
 Hours: M-TH
8:00AM-6:00PM
F 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: Operation
Samahan
 Website: www.operationsamahan.org

**SAN YSIDRO HEALTH
NATIONAL CITY**
Provider ID: 227412
 1136 D AVE
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
Fax: (619) 474-3722
 After Hours Phone: (619)
662-4100
NPI: 1003869363
Accepting New Patients: Yes
Min/Max Age: 0\150

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: syhealth.org/clinics/national-city-family-clinic-1

OCEANSIDE

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436
 517 N HORNE ST
OCEANSIDE, CA
92054-2518
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000
License Number: 20A17371
NPI: 1598122871
Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC HORNE
STREET
 Website: N/A

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436
 517 N HORNE ST
OCEANSIDE, CA
92054-2518
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000
License Number: NP95007885
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC HORNE
STREET

Website: N/A

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436
 517 N HORNE ST
OCEANSIDE, CA
92054-2518
 Phone: 760-631-5000
 After Hours Phone:

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

760-631-5000
License Number: NP95006826
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC HORNE STREET
 Website: N/A

VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 2057-6043
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
License Number: A149340
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 2057-6043
 Phone: 760-631-5000
 After Hours Phone:

760-631-5000
License Number: NP95003571
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 2057-6043
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
License Number: NP95009284
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 92057-6043
 Phone: 760-631-5000

After Hours Phone: 760-631-5000
License Number: NP95016368
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC






Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 2057-6043
 Phone: 760-631-5000
Fax: 760-414-3731
 After Hours Phone: 760-631-5000
License Number: A130883
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC







Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 2057-6043

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所





 Phone: 760-631-5000
 After Hours Phone:
760-631-5000
License Number: 20A8949
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 2057-6043
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000
License Number: 20A18374
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org






VISTA COMMUNITY CLINIC PIER VIEW WAY

Provider ID: 402434
 818 PIER VIEW WAY

OCEANSIDE, CA
92054-2803
 Phone: 760-631-5000
Fax: 760-414-3892
 After Hours Phone:
760-631-5000
License Number: 80000510
NPI: 1598122871
Accepting New Patients: No
 Site English Spoken: Yes
Cultural Competency: Yes
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC PIER
VIEW WAY







 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC HORNE STREET





Provider ID: 402436
 517 N HORNE ST
OCEANSIDE, CA
92054-2518
 Phone: 760-631-5000
Fax: 760-414-3892
 After Hours Phone:
760-631-5000
License Number: 80000745
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: Yes
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC HORNE

STREET
 Website: N/A

VISTA COMMUNITY CLINIC PIER VIEW WAY

Provider ID: 402434
 818 PIER VIEW WAY
OCEANSIDE, CA
92054-2803
 Phone: 760-631-5000
Fax: 760-414-3892
 After Hours Phone:
760-631-5000
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC PIER
VIEW WAY
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC HORNE STREET





Provider ID: 402436
 517 N HORNE ST
OCEANSIDE, CA
92054-2518
 Phone: 760-631-5000
Fax: 760-414-3892
 After Hours Phone:
760-631-5000
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):



D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所





N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: VISTA COMMUNITY CLINIC HORNE STREET
 *Website: N/A*



TRUECARE

Provider ID: 480315
 3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354
 *Phone: 760-891-4667*
 *After Hours Phone: 760-891-4667*
License Number: A131678
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N





 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: TRUECARE
 *Website: N/A*



TRUECARE

Provider ID: 480315
 3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354
 *Phone: 760-433-3155*
Fax: 760-736-8740
 *After Hours Phone: 760-433-3155*
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: TRUECARE
 *Website: N/A*



TRUECARE

Provider ID: 480315
 3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354
 *Phone: 760-433-3155*
 *After Hours Phone: 760-433-3155*
License Number: PA53036
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N




 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: TRUECARE
 *Website: N/A*



TRUECARE

Provider ID: 480315
 3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354
 *Phone: 760-433-3155*
Fax: 760-736-8740
 *After Hours Phone: 760-433-3155*
License Number: 80000240
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N






 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: TRUECARE
 *Website: N/A*

TRUECARE

Provider ID: 480315
 3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354
 *Phone: 760-736-6767*
 *After Hours Phone: 760-736-6767*
License Number: NP21368
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: TRUECARE
 *Website: N/A*

TRUECARE

Provider ID: 480315
 3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354
 *Phone: 760-433-3155*
 *After Hours Phone: 760-433-3155*
License Number: PA19825
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*


D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所


Medical Group/IPA: TRUECARE  Accessibility: CONTACT
 Website: N/A

TRUECARE

Provider ID: 296478

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-757-4566

 After Hours Phone:
760-757-4566

License Number: NP21368

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish


Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE N

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296479

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-757-4566

 After Hours Phone:
760-757-4566

License Number: A64435

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N


Medical Group/IPA: TRUECARE  Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE 

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296477

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-757-4566

Fax: 760-757-3004

 After Hours Phone:
760-757-4566

License Number: A116562

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


Site Languages(s) Spoken:
Spanish


Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE 

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-757-4566

Fax: 760-736-8740

 After Hours Phone:
760-757-4566

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE 

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-757-4566

Fax: 760-736-8740

 After Hours Phone:
760-757-4566

License Number: 80000240

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


Site Languages(s) Spoken:
Spanish


Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE 

 Website: www.ihpsocal.org


TRUECARE

Provider ID: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-757-4566

Fax: 760-757-3004

 After Hours Phone:
760-757-4566

License Number: A66289

NPI: 1598122871

Accepting New Patients: Yes

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

<input type="checkbox"/> Site English Spoken: Yes	Accepting New Patients: Yes	NPI: 1598122871
<input type="checkbox"/> Site Languages(s) Spoken: Spanish	<input type="checkbox"/> Site English Spoken: Yes	Accepting New Patients: Yes
Cultural Competency: No	<input type="checkbox"/> Site Languages(s) Spoken: Spanish	<input type="checkbox"/> Site English Spoken: Yes
American Sign Language (ASL): N	Cultural Competency: No	<input type="checkbox"/> Site Languages(s) Spoken: Spanish
<input type="checkbox"/> Accessibility: CONTACT PROVIDER	American Sign Language (ASL): N	Cultural Competency: No
Medical Group/IPA: TRUECARE	<input type="checkbox"/> Accessibility: CONTACT PROVIDER	American Sign Language (ASL): N
<input type="checkbox"/> Website: www.ihpsocal.org	Medical Group/IPA: TRUECARE	<input type="checkbox"/> Accessibility: CONTACT PROVIDER
	<input type="checkbox"/> Website: www.ihpsocal.org	Medical Group/IPA: TRUECARE
		<input type="checkbox"/> Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

Phone: 760-757-4566

After Hours Phone:
760-757-4566

License Number: 20A15689

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

Phone: 760-757-4566

After Hours Phone:
760-757-4566

License Number: PA22667

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: A131678

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

Phone: 760-757-4566

After Hours Phone:
760-757-4566

License Number: PA53036

NPI: 1598122871

TRUECARE

Provider ID: 296476

605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

Phone: 760-757-4566

After Hours Phone:
760-757-4566

License Number: C152937

TRUECARE

Provider ID: 296476

605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

Phone: 760-736-6767

After Hours Phone:

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

760-736-6767
License Number: NP95013879
NPI: 1598122871

Accepting New Patients: Yes

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

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NP95012681


NPI: 1598122871

Accepting New Patients: Yes


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

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: 20A7241

NPI: 1598122871

Accepting New Patients: Yes

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

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


License Number: 550004110

NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0\999

- Site English Spoken: Y
- Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


License Number: 080000002

NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0\999

- Site English Spoken: Y
- Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

License Number: 550003781

NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0\999

- Site English Spoken: Y
- Cultural Competency: N




 Hours: M-F

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所


8:00AM-5:00PM
SA 9:00AM-4:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)

VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
License Number: 550004110
NPI: 1649662719

Accepting New Patients: Yes
Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM



American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

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

VISTA COMMUNITY CLINIC


Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000

Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000

License Number: 550003781
NPI: 1649662719

Accepting New Patients: Yes
Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

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

VISTA COMMUNITY CLINIC


Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


License Number: 550004110
NPI: 1316501562

Accepting New Patients: Yes
Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

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

VISTA COMMUNITY CLINIC


Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

License Number: 080000002
NPI: 1649662719

Accepting New Patients: Yes
Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

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

VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

License Number: 550003781
NPI: 1316501562


Accepting New Patients: Yes

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所


Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP of Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000


License Number: 080000002

NPI: 1316501562

Accepting New Patients: Yes

Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP of Southern Cal-PHP

 Website: www.vistacommunityclinic.org

TRUECARE

Provider ID: 480247

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760) 736-6767


License Number: 080000531

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP of Southern Cal-PHP

 Website: N/A

TRUECARE

Provider ID: 480247

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-6744


 After Hours Phone: (760) 736-6767


License Number: 080000637

NPI: 1245246917

Accepting New Patients: Yes


Min/Max Age: 0\150

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP of Southern Cal-PHP

 Website: N/A

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000


License Number: 080000745

NPI: 1609094036

Accepting New Patients: Yes

Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP of Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

631-5000
License Number: 080000745
NPI: 1609094036
Accepting New Patients: Yes
Min/Max Age: 0\999
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC PIER VIEW WAY

Provider ID: 402434
 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
License Number: 080000510
NPI: 1629357355
Accepting New Patients: Yes
Min/Max Age: 0\999
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-TU
8:00AM-5:00PM
W 8:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC PIER VIEW WAY

Provider ID: 402434
 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
License Number: 080000510
NPI: 1629357355
Accepting New Patients: Yes
Min/Max Age: 0\999

Site English Spoken: Y
Cultural Competency: N
 Hours: M-TU
8:00AM-5:00PM
W 8:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: www.vistacommunityclinic.org

PAUMA VALLEY

NEIGHBORHOOD HEALTHCARE PAUMA VALLEY

Provider ID: 206267
 16650 HIGHWAY 76
PAUMA VALLEY, CA

92061-9524
 Phone: 760-742-9919
 After Hours Phone:
760-742-9919
License Number: G61829
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE PAUMA VALLEY
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE PAUMA VALLEY

Provider ID: 206267
 16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524
 Phone: 760-742-9919
Fax: 858-633-4696
 After Hours Phone:
760-742-9919
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE PAUMA VALLEY
 Website: www.ihpsocal.org

NEIGHBORHOOD

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

HEALTHCARE PAUMA VALLEY

Provider ID: 206267

16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524

Phone: 760-742-9919

Fax: 858-633-4696

After Hours Phone:
760-742-9919

License Number: 80000611

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Provider ID: 206267

16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524

Phone: 760-742-9919

After Hours Phone:
760-742-9919

License Number: A114419

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Website: www.ihpsocal.org

POWAY

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY

HEALTH CENTER

Provider ID: 481187

13010 POWAY RD
POWAY, CA 92064-4520

Phone: 858-218-3000

Fax: 360-462-2742

After Hours Phone:
858-218-3000

License Number: 550004321

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY

HEALTH CENTER

Website: N/A

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY

HEALTH CENTER

Provider ID: 481187

13010 POWAY RD
POWAY, CA 92064-4520

Phone: 858-218-3000

Fax: 360-462-2742

After Hours Phone:
858-218-3000

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY

HEALTH CENTER

Website: N/A

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY

HEALTH CENTER

Provider ID: 481187

13010 POWAY RD
POWAY, CA 92064-4520

Phone: 858-218-3000

After Hours Phone:
858-218-3000

License Number: A120771

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY

HEALTH CENTER

Website: N/A

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY


HEALTH CENTER


D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Provider ID: 481187

 13010 POWAY RD
POWAY, CA 92064-4520

 Phone: 858-218-3000

 After Hours Phone:
858-218-3000

License Number: A119661


NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY

HEALTH CENTER

 Website: N/A


NEIGHBORHOOD


HEALTHCARE GOLD FAMILY

HEALTH CENTER

Provider ID: 481187

 13010 POWAY RD
POWAY, CA 92064-4520

 Phone: 858-218-3000

 After Hours Phone:
858-218-3000

License Number: PA23310


NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY

HEALTH CENTER


 Website: N/A


NEIGHBORHOOD

HEALTHCARE GOLD FAMILY

HEALTH CENTER

Provider ID: 481187

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000

Fax: (360) 462-2742

 After Hours Phone: (858)
218-3000

License Number: 550004321


NPI: 1023518768

Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y

Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of


Southern Cal-PHP


 Website: N/A

RAMONA

TRUECARE

Provider ID: 449438

 220 ROTANZI ST
RAMONA, CA 92065

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767


License Number: 080000149

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

SA 8:00AM-0:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP


 Website: www.ihpsocal.org


SAN DIEGO

LOGAN HEIGHTS FAMILY

HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA16245


NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN

HEIGHTS FAMILY HEALTH

CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY

HEALTH CENTER


Provider ID: 206360


 1809 NATIONAL AVE

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA15227

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA13752

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95022452

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95011313

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95015780

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA53788

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA23258

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: PA61677

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN


HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: PA54661

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA20396

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA17864

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA21591

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No


D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

American Sign Language (ASL): Accepting New Patients: Yes
N

 *Accessibility:* CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 *Website:* www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone:* 619-515-2300

 *After Hours Phone:*
619-515-2300

License Number: SP27677

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken:* Yes
Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes
N

 *Accessibility:* CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 *Website:* www.fhcsd.org


LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113


 *Phone:* 619-515-2300

Fax: 619-515-2510

 *After Hours Phone:*
619-515-2300

License Number: A178494


NPI: 1134155377

 *Site English Spoken:* Yes
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility:* CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 *Website:* www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone:* 619-515-2300

 *After Hours Phone:*
619-515-2300

License Number: RN810863

NPI: 1134155377


Accepting New Patients: Yes

 *Site English Spoken:* Yes
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility:* CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 *Website:* www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone:* 619-515-2300

 *After Hours Phone:*
619-515-2300

License Number: RN486421
NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken:* Yes
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility:* CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 *Website:* www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone:* 619-515-2300

 *After Hours Phone:*
619-515-2300

License Number: PT30272

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken:* Yes
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility:* CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 *Website:* www.fhcsd.org






LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360







 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

D. Blue Shield Promise Medi-Cal 网络提供者名单







D1. 联邦认证合格的健康诊所

 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: PT295463
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org







LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: PT33914
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org







LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A77126
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org






LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A80504
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER


Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A76785
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A68463
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A71671

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A72005

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN


HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A68124

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A61687

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A181809

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: A46161
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: NP95000205
NPI: 1134155377
Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: NP95000602
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: NP17852

NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: NP2286
NPI: 1134155377


Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

 After Hours Phone:
619-515-2300

License Number: NP95011254

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95007253

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95001705

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95003689

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org


LOGAN HEIGHTS FAMILY

HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NM792

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP10906

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org


D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP11778

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: G81658

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH


CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: DPM5661

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: DPM4819

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p><i>Provider ID: 206360</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> <i>Phone: 619-515-2300</i></p> <p> <i>After Hours Phone: 619-515-2300</i></p> <p><i>License Number: A93385</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p><i>Provider ID: 206360</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> <i>Phone: 619-515-2300</i></p> <p> <i>After Hours Phone: 619-515-2300</i></p> <p><i>License Number: A97036</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p>	<p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p><i>Provider ID: 206360</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> <i>Phone: 619-515-2300</i></p> <p> <i>After Hours Phone: 619-515-2300</i></p> <p><i>License Number: A95577</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC</p> <p><i>Provider ID: 206363</i></p> <p> 4725 MARKET ST SAN DIEGO, CA 92102-4715</p> <p> <i>Phone: 619-263-2499</i></p> <p> <i>After Hours Phone: 619-263-2499</i></p> <p><i>License Number: 20A7241</i></p> <p><i>NPI: 1134155377</i></p>	<p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC</p> <p><i>Provider ID: 206363</i></p> <p> 4725 MARKET ST SAN DIEGO, CA 92102-4715</p> <p> <i>Phone: 619-515-2420</i></p> <p> <i>After Hours Phone: 619-515-2420</i></p> <p><i>License Number: 20A11535</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC</p> <p><i>Provider ID: 206363</i></p> <p> 4725 MARKET ST SAN DIEGO, CA 92102-4715</p> <p> <i>Phone: 619-515-2560</i></p> <p> <i>After Hours Phone: 619-515-2560</i></p>
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D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

License Number: A119689

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND

NEIGHBORHOODS FAMILY


HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND

NEIGHBORHOODS FAMILY

HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715



Phone: 619-515-2560



After Hours Phone:
619-515-2560

License Number: A126187

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND


NEIGHBORHOODS FAMILY


HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A137260

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND

NEIGHBORHOODS FAMILY


HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A140912

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND

NEIGHBORHOODS FAMILY


HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A161373

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND

NEIGHBORHOODS FAMILY

HLTH CTRS INC

 Website: www.fhcsd.org

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: A142743

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: A141057

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND

NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: 20A14772

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: 20A13745

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 *4725 MARKET ST
SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2420*
 *After Hours Phone:
619-515-2420*
License Number: A68463
NPI: 1134155377

Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 *4725 MARKET ST
SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2420*
 *After Hours Phone:
619-515-2420*
License Number: A154298
NPI: 1134155377

Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No


American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 *4725 MARKET ST
SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2420*
 *After Hours Phone:
619-515-2420*

License Number: A113001
NPI: 1134155377
Accepting New Patients: Yes


 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 *4725 MARKET ST
SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2560*
 *After Hours Phone:
619-515-2560*

License Number: A108228
NPI: 1134155377
Accepting New Patients: Yes


 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 *4725 MARKET ST
SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2560*
 *After Hours Phone:
619-515-2560*

License Number: A113448
NPI: 1134155377

Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 *4725 MARKET ST
SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2560*
 *After Hours Phone:
619-515-2560*

License Number: 20A14919

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND

NEIGHBORHOODS FAMILY


HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: 20A15471

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND

NEIGHBORHOODS FAMILY


HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND

NEIGHBORHOODS FAMILY


HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A115598

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND

NEIGHBORHOODS FAMILY


HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A114181

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND


NEIGHBORHOODS FAMILY


HLTH CTRS INC

 Website: www.fhcsd.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A125329

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: KING

CHAVEZ HEALTH CENTER

 Website: www.ihpsocal.org


KING CHAVEZ HEALTH CENTER

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A101017

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: KING
CHAVEZ HEALTH CENTER

 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 20A7435

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: KING
CHAVEZ HEALTH CENTER


 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 20A8204

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: KING
CHAVEZ HEALTH CENTER

 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A153223

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: KING
CHAVEZ HEALTH CENTER


 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A165432

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: KING
CHAVEZ HEALTH CENTER

 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A134995

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: KING
CHAVEZ HEALTH CENTER

 Website: www.ihpsocal.org


KING CHAVEZ HEALTH CENTER


D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-428-4463

 After Hours Phone:
619-428-4463

License Number: G71855


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: KING
CHAVEZ HEALTH CENTER

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

Fax: 619-858-1003

 After Hours Phone:
619-662-4100

License Number: A88893

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: C54198

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: C55180

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

Fax: 619-595-0258

 After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: DC33300


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

YSIDRO HEALTH CHC - OCEAN VIEW

 Website: www.ihpsocal.org

Medical Group/IPA: KING CHAVEZ HEALTH CENTER


 Website: www.ihpsocal.org


Medical Group/IPA: KING CHAVEZ HEALTH CENTER


 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A45942

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: KING CHAVEZ HEALTH CENTER


 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: DC27523

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: KING CHAVEZ HEALTH CENTER


 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A96919

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: KING CHAVEZ HEALTH CENTER

 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A79383

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NPI5657

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER


KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

Fax: 619-662-4158

 After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: NP8563


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: KING
CHAVEZ HEALTH CENTER

 Website: www.ihpsocal.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
Fax: 619-263-2499

 After Hours Phone:
619-515-2560


NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone:
619-515-2560

License Number: PA60864

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone:
619-515-2560

License Number: RN810863


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
Fax: 619-263-2499

 After Hours Phone:
619-515-2560

License Number: A100391

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429
 Phone: 619-515-2454
 After Hours Phone:
619-515-2454


License Number: 20A12796


NPI: 1134155377

Accepting New Patients: Yes

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK


 Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429


 Phone: 619-515-2454


 After Hours Phone:
619-515-2454

License Number: C174538

NPI: 1134155377

Accepting New Patients: Yes


 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK


 Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

 After Hours Phone:
619-515-2454

License Number: 20A14772

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK

 Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429


 Phone: 619-515-2454


 After Hours Phone:
619-515-2454


License Number: PA58505

NPI: 1134155377

Accepting New Patients: Yes


 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK

 Website: www.fhcsd.org


FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429


 Phone: 619-515-2454


Fax: 619-794-2696

 After Hours Phone:
619-515-2454

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK

 Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454


Fax: 619-794-2696


 After Hours Phone:
619-515-2454

License Number: 550003556

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK

 Website: www.fhcsd.org


SAN YSIDRO HEALTH CHC - OCEAN VIEW

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A120447


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A112379


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A120576

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A153414

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A162332


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A78373


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所


YSIDRO HEALTH CHC - OCEAN VIEW

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A157505

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH CHC - OCEAN VIEW


 Website: www.ihpsocal.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: NP95001492

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: NP19911

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: NP95000205

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: NP95007000

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560


License Number: NP95009292


NPI: 1134155377

Accepting New Patients: Yes

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715


 Phone: 619-515-2560


 After Hours Phone:
619-515-2560

License Number: NP95005321

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363


 4725 MARKET ST
SAN DIEGO, CA 92102-4715


 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: PA58081

NPI: 1134155377
Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715


 Phone: 619-515-2560


 After Hours Phone:
619-515-2560


License Number: NP95021154

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org


DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560
License Number: PA20378
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715


 Phone: 619-515-2560


 After Hours Phone:
619-515-2560

License Number: PA58505

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone:
619-515-2560

License Number: NP10146

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone:
619-515-2560

License Number: MT2061555

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone:
619-515-2560

License Number: NP17362

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone:
619-515-2560

License Number: G61394

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone:
619-515-2560

License Number: DC33150

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone:
619-515-2560

License Number: G78814

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所


HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: C174771

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: C174538

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND N


NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A164879

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 *Website: www.fhcsd.org*

NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492

 1016 OUTER RD
SAN DIEGO, CA 92154-1351

 *Phone: 619-429-3733*

 *After Hours Phone: 619-429-3733*

License Number: A112781

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER


 *Website: www.ibclinic.org*

NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492

 1016 OUTER RD
SAN DIEGO, CA 92154-1351

 *Phone: 619-429-3733*

 *After Hours Phone: 619-429-3733*

License Number: A165398

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken: Spanish


Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER

 *Website: www.ibclinic.org*


NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492

 1016 OUTER RD
SAN DIEGO, CA 92154-1351

 *Phone: 619-429-3733*

Fax: 619-628-5550

 *After Hours Phone: 619-429-3733*

License Number: 550001474

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER


 *Website: www.ibclinic.org*

NESTOR COMMUNITY HEALTH CENTER


Provider ID: 214492

 1016 OUTER RD

SAN DIEGO, CA 92154-1351

 *Phone: 619-429-3733*

Fax: 619-628-5550

 *After Hours Phone: 619-429-3733*

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER


 *Website: www.ibclinic.org*

NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492

 1016 OUTER RD
SAN DIEGO, CA 92154-1351

 *Phone: 619-429-3733*

 *After Hours Phone: 619-429-3733*

License Number: NP22031

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER

 *Website: www.ibclinic.org*

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308

9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007

Phone: 844-200-2426

Fax: 858-536-8034

After Hours Phone:
844-200-2426

License Number: 80000146

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN - MIRA MESA

Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308

9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007

Phone: 844-200-2426

Fax: 858-536-8034

After Hours Phone:
844-200-2426

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN - MIRA MESA

Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308

9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007

Phone: 844-200-2426

After Hours Phone:
844-200-2426

License Number: NP95010585

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN - MIRA MESA

Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308

9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007

Phone: 844-200-2426

After Hours Phone:
844-200-2426

License Number: NP22974

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN - MIRA MESA

Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

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

Phone: 844-200-2426

Fax: 858-578-4417

After Hours Phone:
844-200-2426

License Number: 80000146

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN - MIRA MESA

Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308

9855 ERMA RD STE 105

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

SAN DIEGO, CA 92131-1007
Phone: 844-200-2426
After Hours Phone:
844-200-2426
License Number: A71544
NPI: 1801907449
Accepting New Patients: Yes
Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN - MIRA
MESA
Website: www.operationsa
mahan.org

**OPERATION SAMAHAN - MIRA
MESA**
Provider ID: 417101
10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126-2375
Phone: 844-200-2426
After Hours Phone:
844-200-2426
License Number: C54941
NPI: 1801907449
Accepting New Patients: Yes
Site English Spoken: yes
Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN - MIRA
MESA

Website: www.operationsa
mahan.org

**OPERATION SAMAHAN - MIRA
MESA**
Provider ID: 417101
10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126-2375
Phone: 844-200-2426
After Hours Phone:
844-200-2426
License Number: NP95003211
NPI: 1801907449

Accepting New Patients: Yes
Site English Spoken: yes
Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN - MIRA
MESA
Website: www.operationsa
mahan.org

**OPERATION SAMAHAN - MIRA
MESA**
Provider ID: 417101
10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126-2375
Phone: 844-200-2426
After Hours Phone:
844-200-2426
License Number: DC15775
NPI: 1801907449

Accepting New Patients: Yes
Site English Spoken: yes

Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN - MIRA
MESA
Website: www.operationsa
mahan.org






















**OPERATION SAMAHAN - MIRA
MESA**
Provider ID: 417101
10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126-2375
Phone: 844-200-2426
Fax: 858-578-4417
After Hours Phone:
844-200-2426
NPI: 1801907449

Accepting New Patients: Yes
Site English Spoken: yes
Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN - MIRA
MESA
Website: www.operationsa
mahan.org

**OPERATION SAMAHAN
RANCHO PENASQUITOS**
Provider ID: 418535

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889  Phone: 844-200-2426  After Hours Phone: 844-200-2426 License Number: NP95003211 NPI: 1801907449 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN RANCHO PENASQUITOS  Website: www.operationsa mahan.org	<i>PROVIDER</i> Medical Group/IPA: OPERATION SAMAHAN RANCHO PENASQUITOS  Website: www.operationsa mahan.org	844-200-2426 License Number: 550003857 NPI: 1801907449 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN RANCHO PENASQUITOS  Website: www.operationsa mahan.org
OPERATION SAMAHAN RANCHO PENASQUITOS Provider ID: 418535  9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889  Phone: 844-200-2426  After Hours Phone: 844-200-2426 License Number: PA19664 NPI: 1801907449 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT	 10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375  Phone: 844-200-2426  After Hours Phone: 844-200-2426 License Number: A161105 NPI: 1801907449 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA  Website: www.operationsa mahan.org	OPERATION SAMAHAN RANCHO PENASQUITOS Provider ID: 418535  9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889  Phone: 844-200-2426 Fax: 858-695-9074  After Hours Phone: 844-200-2426 NPI: 1801907449 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN RANCHO PENASQUITOS  Website: www.operationsa
OPERATION SAMAHAN RANCHO PENASQUITOS Provider ID: 418535  9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889  Phone: 844-200-2426 Fax: 858-695-9074  After Hours Phone:	OPERATION SAMAHAN RANCHO PENASQUITOS Provider ID: 418535  9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889  Phone: 844-200-2426 Fax: 858-695-9074  After Hours Phone:	

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

<p><i>mahan.org</i></p> <p>OPERATION SAMAHAN RANCHO PENASQUITOS</p> <p>Provider ID: 418535</p> <p>9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889</p> <p>Phone: 844-200-2426</p> <p>Fax: 858-695-9074</p> <p>After Hours Phone: 844-200-2426</p> <p>License Number: 550002478</p> <p>NPI: 1801907449</p> <p>Accepting New Patients: Yes</p> <p>Site English Spoken: yes</p> <p>Site Languages(s) Spoken: Spanish</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: OPERATION SAMAHAN RANCHO PENASQUITOS</p> <p>Website: www.operationsamahan.org</p> <p>FAMILY HLTH CTR SAN DIEGO-BEACH AREA</p> <p>Provider ID: 402851</p> <p>3705 MISSION BLVD SAN DIEGO, CA 92109-7104</p> <p>Phone: 619-515-2444</p> <p>After Hours Phone: 619-515-2444</p> <p>License Number: 20A11535</p> <p>NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p>Site English Spoken: Yes</p> <p>Cultural Competency: No</p>	<p>American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA</p> <p>Website: www.fhcsd.org</p> <p>FAMILY HLTH CTR SAN DIEGO-BEACH AREA</p> <p>Provider ID: 402851</p> <p>3705 MISSION BLVD SAN DIEGO, CA 92109-7104</p> <p>Phone: 619-515-2300</p> <p>After Hours Phone: 619-515-2300</p> <p>License Number: A162946</p> <p>NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p>Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA</p> <p>Website: www.fhcsd.org</p> <p>FAMILY HLTH CTR SAN DIEGO-BEACH AREA</p> <p>Provider ID: 402851</p> <p>3705 MISSION BLVD SAN DIEGO, CA 92109-7104</p> <p>Phone: 619-515-2444</p> <p>After Hours Phone: 619-515-2444</p> <p>License Number: 20A14919</p> <p>NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p>Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA</p> <p>Website: www.fhcsd.org</p> <p>FAMILY HLTH CTR SAN DIEGO-BEACH AREA</p> <p>Provider ID: 402851</p> <p>3705 MISSION BLVD SAN DIEGO, CA 92109-7104</p> <p>Phone: 619-515-2444</p> <p>After Hours Phone: 619-515-2444</p> <p>License Number: A113001</p> <p>Accepting New Patients: Yes</p>	<p>Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA</p> <p>Website: www.fhcsd.org</p> <p>Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA</p> <p>Website: www.fhcsd.org</p> <p>Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA</p> <p>Website: www.fhcsd.org</p> <p>Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA</p> <p>Website: www.fhcsd.org</p>
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D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-BEACH AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-BEACH AREA

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-BEACH AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-BEACH AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-BEACH AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-BEACH AREA

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN


D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所

DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH


AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A163464

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A154399

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA

 Website: www.fhcsd.org

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

 Website: www.fhcsd.org


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: 20A11612

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: 20A14794

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: 20A15459

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: 20A12504

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: 20A15413

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: 20A17657

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851


 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104


 *Phone: 619-515-2444*
Fax: 858-488-1394

 *After Hours Phone: 619-515-2444*

License Number: 80000115
NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 *Phone: 619-515-2444*
Fax: 858-488-1394

 *After Hours Phone: 619-515-2444*

NPI: 1134155377


Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*



Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST


Provider ID: 417937



 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2400*
 *After Hours Phone: 619-515-2400*

License Number: 20A17836
NPI: 1134155377

Accepting New Patients: Yes



 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 *Phone: 619-515-2444*
 *After Hours Phone: 619-515-2444*

License Number: NM1662
NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*



Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA


Provider ID: 402851


 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 *Phone: 619-515-2444*
 *After Hours Phone: 619-515-2444*

License Number: NP95013978
NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 *Phone: 619-515-2444*
 *After Hours Phone: 619-515-2444*

License Number: G78814
NPI: 1134155377

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: 619-515-2444

After Hours Phone:
619-515-2444

License Number: DC20729

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: 619-515-2444

After Hours Phone:
619-515-2444

License Number: DPM4819

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: 619-515-2444

After Hours Phone:
619-515-2444

License Number: C53623

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: 619-515-2444

After Hours Phone:
619-515-2444

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: 619-515-2444

After Hours Phone:
619-515-2444

License Number: A76785

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA

Website: www.fhcsd.org


FAMILY HLTH CTR SAN DIEGO-BEACH AREA


D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-BEACH
AREA


 Website: www.fhcsd.org

HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: A80461

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: DC31024

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: A80153

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SD HILLCREST

 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: C52451

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SD HILLCREST

 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: DC33688

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SD HILLCREST

 Website: www.fhcsd.org

FAMILY HLTH CTR SD

FAMILY HLTH CTR SD

FAMILY HLTH CTR SD


D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所

HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545


License Number: DC33150

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: A177462

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: A171135

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545


License Number: A180044

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: A70175

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: 20A19399

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

 Website: www.fhcsd.org

FAMILY HLTH CTR SD

FAMILY HLTH CTR SD

FAMILY HLTH CTR SD


D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所

HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: A109633

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: 20A17702

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: A140324

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545


License Number: A100333

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: 20A17926

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545


License Number: A154708

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

 Website: www.fhcsd.org

FAMILY HLTH CTR SD

FAMILY HLTH CTR SD

FAMILY HLTH CTR SD


D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所

HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: A169207

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: A136616

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org


FAMILY HLTH CTR SD

HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: A119631

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: 20A20252

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: 20A15413

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424


License Number: 20A14794

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424


License Number: 20A15068

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH


PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A113001


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所




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

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362
 3544 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone: 619-515-2424
License Number: A148014
NPI: 1134155377




Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362
 3544 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone: 619-515-2424
License Number: A147758
NPI: 1134155377
Accepting New Patients: Yes



Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 Website: www.fhcsd.org



NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362
 3544 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone: 619-515-2424
License Number: A140646
NPI: 1134155377




Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831
 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone: 619-515-2424
License Number: A68463

NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831
 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone: 619-515-2424
License Number: A51318
NPI: 1134155377





Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS







Provider ID: 416831
 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所







 After Hours Phone:
619-515-2424
License Number: C174771
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS
 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS







Provider ID: 416831
 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424
License Number: A95577
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS
 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS







Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424
License Number: A72005
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS
 Website: www.fhcsd.org






NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831
 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
Fax: 619-683-7586
 After Hours Phone:
619-515-2424
License Number: 90000469
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS
 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS


Provider ID: 416831
 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
Fax: 619-683-7586
 After Hours Phone:
619-515-2424
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS
 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362
 3544 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424
License Number: 20A11535
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: PA21042

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424


License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH


PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A180044

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A173486

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424


License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424


License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: NP95002226

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: PA17220

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS





Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120







 Phone: 619-515-2424

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所







 After Hours Phone:
619-515-2424
License Number: NP95006792
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS
 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS








Provider ID: 206362
 3544 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424
License Number: PA18746
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS
 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
Fax: 619-501-0627
 After Hours Phone:
619-515-2424
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS
 Website: www.fhcsd.org

LINDA VISTA HEALTH CARE CTR






Provider ID: 206046
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
 After Hours Phone:
858-279-0925
License Number: G41532
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR
 Website: www.sdfamilycare

.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
 After Hours Phone:
858-279-0925
License Number: DPM4434
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR
 Website: www.sdfamilycare
.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
 After Hours Phone:
858-279-0925
License Number: C174985
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian


D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LINDA VISTA HEALTH CARE CTR


 *Website: www.sdfamilycare.org*

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

 *Phone: 858-279-0925*

 *After Hours Phone: 858-279-0925*

License Number: A119010

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LINDA VISTA HEALTH CARE CTR

 *Website: www.sdfamilycare.org*

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

 *Phone: 858-279-0925*

 *After Hours Phone:*

858-279-0925

License Number: A144372

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LINDA VISTA HEALTH CARE CTR


 *Website: www.sdfamilycare.org*

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

 *Phone: 858-810-8700*

 *After Hours Phone: 858-810-8700*

License Number: 20A12402

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LINDA VISTA HEALTH CARE CTR

 *Website: www.sdfamilycare.org*


LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

 *Phone: 858-279-0925*

Fax: 858-633-4680

 *After Hours Phone: 858-279-0925*

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LINDA VISTA HEALTH CARE CTR


 *Website: www.sdfamilycare.org*

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 *Phone: 858-810-8700*

 *After Hours Phone: 858-810-8700*

License Number: 20A12402

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes





























Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese

Cultural Competency: No

American Sign Language (ASL):

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: SAN DIEGO FAMILY CARE</i></p> <p> <i>Website: www.sdfamilycare.org</i></p>	<p><i>858-279-0925</i></p> <p><i>License Number: A93812</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><input type="checkbox"/> <i>Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p>	<p>NORTH PARK FAMILY HEALTH CENTERS</p> <p><i>Provider ID: 416831</i></p> <p> 3514 30TH ST SAN DIEGO, CA 92104-4120</p> <p> <i>Phone: 619-515-2424</i></p> <p> <i>After Hours Phone: 619-515-2424</i></p>
<p>LINDA VISTA HEALTH CARE CTR</p> <p><i>Provider ID: 206046</i></p> <p> 6973 LINDA VISTA RD SAN DIEGO, CA 92111-6342</p> <p> <i>Phone: 858-279-0925</i></p> <p><i>Fax: 858-279-0377</i></p> <p> <i>After Hours Phone: 858-279-0925</i></p> <p><i>License Number: G70886</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><input type="checkbox"/> <i>Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p>	<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LINDA VISTA HEALTH CARE CTR</i></p> <p> <i>Website: www.sdfamilycare.org</i></p>	<p><i>License Number: A178499</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p>
<p>LINDA VISTA HEALTH CARE CTR</p> <p><i>Provider ID: 206046</i></p> <p> 6973 LINDA VISTA RD SAN DIEGO, CA 92111-6342</p> <p> <i>Phone: 858-279-0925</i></p> <p> <i>After Hours Phone: 858-279-0925</i></p> <p><i>License Number: G44807</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><input type="checkbox"/> <i>Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p>	<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LINDA VISTA HEALTH CARE CTR</i></p> <p> <i>Website: www.sdfamilycare.org</i></p>	<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS</i></p> <p> <i>Website: www.fhcsd.org</i></p>
<p>LINDA VISTA HEALTH CARE CTR</p> <p><i>Provider ID: 206046</i></p> <p> 6973 LINDA VISTA RD SAN DIEGO, CA 92111-6342</p> <p> <i>Phone: 858-279-0925</i></p> <p><i>Fax: 858-279-0377</i></p> <p> <i>After Hours Phone:</i></p>	<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LINDA VISTA HEALTH CARE CTR</i></p> <p> <i>Website: www.sdfamilycare.org</i></p>	<p>NORTH PARK FAMILY HEALTH CENTERS</p> <p><i>Provider ID: 416831</i></p> <p> 3514 30TH ST SAN DIEGO, CA 92104-4120</p> <p> <i>Phone: 619-515-2424</i></p> <p> <i>After Hours Phone: 619-515-2424</i></p> <p><i>License Number: A164859</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p>
<p>LINDA VISTA HEALTH CARE CTR</p> <p><i>Provider ID: 206046</i></p> <p> 6973 LINDA VISTA RD SAN DIEGO, CA 92111-6342</p> <p> <i>Phone: 858-279-0925</i></p> <p><i>Fax: 858-279-0377</i></p> <p> <i>After Hours Phone:</i></p>	<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LINDA VISTA HEALTH CARE CTR</i></p> <p> <i>Website: www.sdfamilycare.org</i></p>	<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: NORTH PARK FAMILY HEALTH</i></p>

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所


CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A163464

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: NORTH


PARK FAMILY HEALTH CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A132576

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: NORTH PARK FAMILY HEALTH


CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: NORTH PARK FAMILY HEALTH


CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A126181

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: 619-515-2424*

 *After Hours Phone: 619-515-2424*

License Number: A116680


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: 619-515-2424*

 *After Hours Phone: 619-515-2424*

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: 619-515-2424*

 *After Hours Phone: 619-515-2424*

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: 619-515-2424*

 *After Hours Phone: 619-515-2424*

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS

 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: 619-515-2424*

 *After Hours Phone: 619-515-2424*

License Number: A103099


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS

 *Website: www.fhcsd.org*






NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831







 3514 30TH ST
SAN DIEGO, CA 92104-4120

D. Blue Shield Promise Medi-Cal 网络提供者名单







D1. 联邦认证合格的健康诊所

 Phone: 619-515-2424
 After Hours Phone:
619-515-2424
License Number: 20A11535
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS
 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831
 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424
License Number: 20A14919
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS
 Website: www.fhcsd.org






SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY

MED
Provider ID: 517998
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: NP95005999
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH COMMUNITY
HEIGHTS FAMILY MED
 Website: N/A






FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
Fax: 619-501-9645
 After Hours Phone:
619-515-2545
License Number: 550003099
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED


Provider ID: 517998
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH COMMUNITY
HEIGHTS FAMILY MED
 Website: N/A

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
Fax: 619-501-9645
 After Hours Phone:
619-515-2545
License Number: A95356
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY


D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所

HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 20A7502

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH COMMUNITY
HEIGHTS FAMILY MED

 Website: N/A

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 550003882

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH COMMUNITY
HEIGHTS FAMILY MED


 Website: N/A

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: NP95005293

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: NP95005103

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: NP95001899

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: PA23231

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No




D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 *Phone: 619-515-2545*
 *After Hours Phone: 619-515-2545*
License Number: PA21385
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*



FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 *Phone: 619-515-2545*
 *After Hours Phone: 619-515-2545*
License Number: G80316
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No



N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 *Phone: 619-515-2545*
 *After Hours Phone: 619-515-2545*
License Number: G16236
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*



FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 *Phone: 619-515-2545*
 *After Hours Phone: 619-515-2545*
License Number: NP7374
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 *Phone: 619-515-2545*
 *After Hours Phone: 619-515-2545*
License Number: NP18098
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 *Phone: 619-515-2545*
 *After Hours Phone: 619-515-2545*
License Number: PT12930
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No




D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST



Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: PT25155
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: PT28061
NPI: 1134155377



Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

FAMILY HLTH CTR SD HILLCREST


Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: PT292351
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: PT292613
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

FAMILY HLTH CTR SD HILLCREST




Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: PT293536
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 *4094 4TH AVE
SAN DIEGO, CA 92103-2143*
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: PT295173
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No


D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

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

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: PT296559


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST

 *Website: www.fhcsd.org*


FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

Fax: 619-501-9645

 *After Hours Phone: 619-515-2545*


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: PT40975

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST

 *Website: www.fhcsd.org*

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 *Phone: 619-798-3947*

 *After Hours Phone: 619-798-3947*

License Number: DC32800

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC


Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC

 *Website: www.lamaestra.org*

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 *Phone: 619-564-8765*

 *After Hours Phone: 619-564-8765*

License Number: NP95009891

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC

 *Website: www.lamaestra.org*


LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 *Phone: 619-255-9155*

Fax: 619-284-4731

 *After Hours Phone: 619-255-9155*

License Number: 20A6433

NPI: 1609849074

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Accepting New Patients: Yes

☐ Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC INC

🌐 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

☎ Phone: 619-255-9155

Fax: 619-749-5480

🕒 After Hours Phone:
619-255-9155

License Number: A81682

NPI: 1609849074

Accepting New Patients: Yes

☐ Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC INC

🌐 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

☎ Phone: 619-280-7072

🕒 After Hours Phone:

619-280-7072

License Number: 20A14222

NPI: 1609849074

Accepting New Patients: Yes

☐ Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC INC

🌐 Website: www.lamaestra.org

SAN DIEGO AMERICAN INDIAN HEALTH CENTER

Provider ID: 207382

📍 2630 1ST AVE
SAN DIEGO, CA 92103-6599

☎ Phone: 619-234-2158

Fax: 619-234-0206

🕒 After Hours Phone:
619-234-2158

NPI: 1598122871

Accepting New Patients: Yes

☐ Site English Spoken: yes

☐ Site Languages(s) Spoken:

Korean, Spanish, Hindi

Cultural Competency: No

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

DIEGO AMERICAN INDIAN

HEALTH CENTER

🌐 Website: www.sdaihc.org

SAN DIEGO AMERICAN INDIAN HEALTH CENTER

Provider ID: 207382

📍 2630 1ST AVE
SAN DIEGO, CA 92103-6599

☎ Phone: 619-234-2158

Fax: 619-234-0206

🕒 After Hours Phone:
619-234-2158

License Number: 90000168

NPI: 1598122871

Accepting New Patients: Yes

☐ Site English Spoken: yes

☐ Site Languages(s) Spoken:

Korean, Spanish, Hindi

Cultural Competency: No

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

DIEGO AMERICAN INDIAN

HEALTH CENTER

🌐 Website: www.sdaihc.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

☎ Phone: 619-255-9155

🕒 After Hours Phone:
619-255-9155

License Number: C55979

NPI: 1609849074

Accepting New Patients: Yes

☐ Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC INC

🌐 Website: www.lamaestra.org

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

<p><i>g</i></p> <p>LA MAESTRA FAMILY CLINIC INC</p> <p>Provider ID: 185268</p> <p> 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608</p> <p> Phone: 619-255-9155</p> <p> After Hours Phone: 619-255-9155</p> <p>License Number: G87837</p> <p>NPI: 1609849074</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC</p> <p> Website: www.lamaestra.org</p>	<p><i>g</i></p> <p>LA MAESTRA FAMILY CLINIC INC</p> <p>Provider ID: 185268</p> <p> 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608</p> <p> Phone: 619-255-9155</p> <p> After Hours Phone: 619-255-9155</p> <p>License Number: PA13694</p> <p>NPI: 1609849074</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC</p> <p> Website: www.lamaestra.org</p>	<p><i>g</i></p> <p>LA MAESTRA FAMILY CLINIC INC</p> <p>Provider ID: 185268</p> <p> 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608</p> <p> Phone: 619-255-9155</p> <p> After Hours Phone: 619-255-9155</p> <p>License Number: NP95013257</p> <p>NPI: 1609849074</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC</p> <p> Website: www.lamaestra.org</p>
<p><i>g</i></p> <p>LA MAESTRA FAMILY CLINIC INC</p> <p>Provider ID: 185268</p> <p> 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608</p> <p> Phone: 619-255-9155</p> <p> After Hours Phone: 619-255-9155</p> <p>License Number: G45632</p> <p>NPI: 1609849074</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: LA</p>	<p><i>g</i></p> <p>LA MAESTRA FAMILY CLINIC INC</p> <p>Provider ID: 185268</p> <p> 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608</p> <p> Phone: 619-255-9155</p> <p> After Hours Phone: 619-255-9155</p> <p>License Number: PA21625</p> <p>NPI: 1609849074</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT</p>	<p><i>g</i></p> <p>LA MAESTRA FAMILY CLINIC INC</p> <p>Provider ID: 185268</p> <p> 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608</p> <p> Phone: 619-255-9155</p> <p> After Hours Phone: 619-255-9155</p> <p>License Number: A82639</p> <p>NPI: 1609849074</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL):</p>

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

<p>N  Accessibility: CONTACT PROVIDER Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC  Website: www.lamaestra.org</p>	<p>Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC  Website: www.lamaestra.org</p>	<p>Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC  Website: www.lamaestra.org</p>
<p>LA MAESTRA FAMILY CLINIC INC Provider ID: 185268  4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608  Phone: 619-255-9155  After Hours Phone: 619-255-9155 License Number: DC28966 NPI: 1609849074 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC  Website: www.lamaestra.org</p>	<p>LA MAESTRA FAMILY CLINIC INC Provider ID: 185268  4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608  Phone: 619-255-9154  After Hours Phone: 619-255-9154 License Number: A163693 NPI: 1609849074 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC  Website: www.lamaestra.org</p>	<p>LA MAESTRA FAMILY CLINIC INC Provider ID: 185268  4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608  Phone: 619-255-9155  After Hours Phone: 619-255-9155 License Number: A111170 NPI: 1609849074 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC  Website: www.lamaestra.org</p>
<p>LA MAESTRA FAMILY CLINIC INC Provider ID: 185268  4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608  Phone: 619-255-9154  After Hours Phone: 619-255-9154 License Number: A123929 NPI: 1609849074 Accepting New Patients: Yes  Site English Spoken: Yes</p>	<p>LA MAESTRA FAMILY CLINIC INC Provider ID: 185268  4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608  Phone: 619-255-9155  After Hours Phone: 619-255-9155 License Number: A75533 NPI: 1609849074</p>	<p>SAN DIEGO FAMILY CARE Provider ID: 482070  7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307  Phone: 858-810-8700  After Hours Phone: 858-810-8700 License Number: A92173</p>

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
DIEGO FAMILY CARE


 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700

License Number: A94449

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
DIEGO FAMILY CARE


 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700

License Number: A72833

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
DIEGO FAMILY CARE


 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700

License Number: A119010

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
DIEGO FAMILY CARE


 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700

License Number: A137415

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
DIEGO FAMILY CARE


 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700

License Number: A61238

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes





















Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

American Sign Language (ASL):

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所


<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN DIEGO FAMILY CARE</p> <p> Website: www.sdfamilycare.org</p>	<p> Site English Spoken: yes</p> <p> Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN DIEGO FAMILY CARE</p> <p> Website: www.sdfamilycare.org</p>	<p> Phone: 858-810-8700</p> <p> After Hours Phone: 858-810-8700</p> <p>License Number: G41532</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: yes</p> <p> Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN DIEGO FAMILY CARE</p> <p> Website: www.sdfamilycare.org</p>
<p>SAN DIEGO FAMILY CARE</p> <p>Provider ID: 482070</p> <p> 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307</p> <p> Phone: 858-810-8700</p> <p> After Hours Phone: 858-810-8700</p> <p>License Number: NP16433</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: yes</p> <p> Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN DIEGO FAMILY CARE</p> <p> Website: www.sdfamilycare.org</p>	<p>SAN DIEGO FAMILY CARE</p> <p>Provider ID: 482070</p> <p> 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307</p> <p> Phone: 858-810-8700</p> <p> After Hours Phone: 858-810-8700</p> <p>License Number: C174985</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: yes</p> <p> Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN DIEGO FAMILY CARE</p> <p> Website: www.sdfamilycare.org</p>	<p>SAN DIEGO FAMILY CARE</p> <p>Provider ID: 482070</p> <p> 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307</p> <p> Phone: 858-810-8700</p> <p> After Hours Phone: 858-810-8700</p> <p>License Number: NP23847</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: yes</p> <p> Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN DIEGO FAMILY CARE</p> <p> Website: www.sdfamilycare.org</p>
<p>SAN DIEGO FAMILY CARE</p> <p>Provider ID: 482070</p> <p> 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307</p> <p> Phone: 858-810-8700</p> <p> After Hours Phone: 858-810-8700</p> <p>License Number: G70886</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p>	<p>SAN DIEGO FAMILY CARE</p> <p>Provider ID: 482070</p> <p> 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307</p>	


D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所

.org

MID-CITY COMMUNITY CLINIC
Provider ID: 233597

 4290 POLK AVE
SAN DIEGO, CA 92105-1524


 Phone: 619-563-0250

 After Hours Phone:
619-563-0250


License Number: A112176
NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: MID-CITY
COMMUNITY CLINIC

 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC
Provider ID: 233597

 4290 POLK AVE
SAN DIEGO, CA 92105-1524

 Phone: 619-563-0250

 After Hours Phone:
619-563-0250

License Number: 20A7662
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: MID-CITY
COMMUNITY CLINIC


 Website: www.sdfamilycare.org

.org

MID-CITY COMMUNITY CLINIC
Provider ID: 233532

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690


 Phone: 619-280-2058

 After Hours Phone:
619-280-2058


License Number: A72833
NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: MID-CITY
COMMUNITY CLINIC

 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC
Provider ID: 233532

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690


 Phone: 619-280-2058

 After Hours Phone:
619-280-2058


License Number: A163512
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: MID-CITY

COMMUNITY CLINIC
 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC
Provider ID: 233532

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690

 Phone: 619-280-2058

 After Hours Phone:
619-280-2058


License Number: A61238
NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: MID-CITY
COMMUNITY CLINIC

 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC
Provider ID: 233532

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690


 Phone: 619-280-2058

 After Hours Phone:
619-280-2058

License Number: A94449
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

PROVIDER
Medical Group/IPA: MID-CITY
COMMUNITY CLINIC
 Website: www.sdfamilycare.org



 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: MID-CITY
COMMUNITY CLINIC
 Website: www.sdfamilycare.org

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: MID-CITY
COMMUNITY CLINIC
 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690
 Phone: 619-280-2058
 After Hours Phone:
619-280-2058
License Number: NP95019446
NPI: 1598122871



Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: MID-CITY
COMMUNITY CLINIC
 Website: www.sdfamilycare.org




MID-CITY COMMUNITY CLINIC

Provider ID: 233597
 4290 POLK AVE
SAN DIEGO, CA 92105-1524
 Phone: 619-563-0250
 After Hours Phone:
619-563-0250
License Number: DPM4434
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: MID-CITY
COMMUNITY CLINIC
 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690
 Phone: 619-280-2058
 After Hours Phone:
619-280-2058
License Number: A152267
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: MID-CITY
COMMUNITY CLINIC
 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233597
 4290 POLK AVE
SAN DIEGO, CA 92105-1524
 Phone: 619-563-0250
 After Hours Phone:
619-563-0250
License Number: A175116
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

MID-CITY COMMUNITY CLINIC

Provider ID: 233597
 4290 POLK AVE
SAN DIEGO, CA 92105-1524
 Phone: 619-563-0250
 After Hours Phone:
619-563-0250
License Number: A163512
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

MID-CITY COMMUNITY CLINIC

Provider ID: 233597
 4290 POLK AVE
SAN DIEGO, CA 92105-1524
 Phone: 619-563-0250
 After Hours Phone:
619-563-0250
License Number: G60630
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

<p>N  Accessibility: CONTACT PROVIDER Medical Group/IPA: MID-CITY COMMUNITY CLINIC  Website: www.sdfamilycare.org</p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CTR IBARRA  Website: www.fhcsd.org</p>	<p> Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CTR IBARRA  Website: www.fhcsd.org</p>
<p>MID-CITY COMMUNITY CLINIC Provider ID: 233532  4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105-1690  Phone: 619-280-2058  After Hours Phone: 619-280-2058 License Number: A112176 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: MID-CITY COMMUNITY CLINIC  Website: www.sdfamilycare.org</p>	<p>FAMILY HEALTH CTR IBARRA Provider ID: 417987  4874 POLK AVE SAN DIEGO, CA 92105-2026  Phone: 619-515-2426  After Hours Phone: 619-515-2426 License Number: PA58905 NPI: 1134155377 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CTR IBARRA  Website: www.fhcsd.org</p>	<p>FAMILY HEALTH CTR IBARRA Provider ID: 417987  4874 POLK AVE SAN DIEGO, CA 92105-2026  Phone: 619-515-2426  After Hours Phone: 619-515-2426 License Number: PA58098 NPI: 1134155377 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CTR IBARRA  Website: www.fhcsd.org</p>
<p>FAMILY HEALTH CTR IBARRA Provider ID: 417987  4874 POLK AVE SAN DIEGO, CA 92105-2026  Phone: 619-515-2426  After Hours Phone: 619-515-2426 License Number: PA59481 NPI: 1134155377 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No</p>	<p>FAMILY HEALTH CTR IBARRA Provider ID: 417987  4874 POLK AVE SAN DIEGO, CA 92105-2026  Phone: 619-515-2426  After Hours Phone: 619-515-2426 License Number: PA21385 NPI: 1134155377 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p>	<p>FAMILY HEALTH CTR IBARRA Provider ID: 417987  4874 POLK AVE SAN DIEGO, CA 92105-2026  Phone: 619-515-2426  After Hours Phone: 619-515-2426 License Number: NP17838 NPI: 1134155377 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p>

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所


Medical Group/IPA: FAMILY HEALTH CTR IBARRA


 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: 619-515-2426

 After Hours Phone:
619-515-2426

License Number: NP95004443

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CTR IBARRA


 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: 619-515-2426

 After Hours Phone:
619-515-2426

License Number: G149974

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CTR IBARRA


 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: 619-515-2426

 After Hours Phone:
619-515-2426

License Number: A145023

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CTR IBARRA


 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: 619-515-2426

 After Hours Phone:
619-515-2426

License Number: A173486

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CTR IBARRA

 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: 619-515-2426

 After Hours Phone:
619-515-2426

License Number: 20A19345

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CTR IBARRA

 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: 619-515-2426

 After Hours Phone:
619-515-2426

License Number: 20A17577

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CTR IBARRA


 Website: www.fhcsd.org


ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER


D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:
619-233-8500

License Number: A115598


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER


 Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:
619-233-8500

License Number: A109828

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER


 Website: N/A


ST VINCENT DE PAUL VILLAGE  Website: N/A

FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:
619-233-8500

License Number: A104052

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER


 Website: N/A

ST VINCENT DE PAUL VILLAGE  Website: N/A

FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:
619-233-8500

License Number: A136275

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:
619-233-8500

License Number: A54702

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:
619-233-8500

License Number: A42127

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: ST

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所


VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER


 Website: N/A

**ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER**

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:
619-233-8500


License Number: A82123

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: ST


VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 Website: N/A

**ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER**

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:
619-233-8500

License Number: A67762

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: ST


VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 Website: N/A

**ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER**

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:
619-233-8500

License Number: A60801

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: ST


VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 Website: N/A

**ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER**

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:
619-233-8500

License Number: G71080

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: ST


VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER


 Website: N/A

**ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER**

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:
619-233-8500

License Number: C53121

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: ST


VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 Website: N/A

**ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER**

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:
619-233-8500


License Number: G29879


NPI: 1598122871

Accepting New Patients: Yes

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638


 Phone: 619-233-8500



 After Hours Phone:
619-233-8500

License Number: G72486

NPI: 1598122871


Accepting New Patients: Yes


 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER
 Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583


 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638


 Phone: 619-233-8500

 After Hours Phone:
619-233-8500

License Number: NP10769

NPI: 1598122871
Accepting New Patients: Yes


 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638


 Phone: 619-233-8500



 After Hours Phone:
619-233-8500

License Number: PA54617

NPI: 1598122871

Accepting New Patients: Yes


 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER
 Website: N/A

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113


 Phone: 619-515-2300


 After Hours Phone:
619-515-2300

License Number: 20A17072

NPI: 1134155377

Accepting New Patients: Yes


 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113


 Phone: 619-515-2300


 After Hours Phone:
619-515-2300

License Number: 20A15743

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER




 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300

License Number: A103099

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300

License Number: 20A17478

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER



Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

FAMILY HEALTH CTR OF

SDELM ST

Provider ID: 419167

 140 ELM ST
SAN DIEGO, CA 92101-2602
 Phone: 619-515-2520
Fax: 619-231-0431

 After Hours Phone:
619-515-2520

License Number: 550002061

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CTR OF SDELM ST

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300

License Number: A108228

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

FAMILY HEALTH CTR OF SDELM ST

Provider ID: 419167

 140 ELM ST
SAN DIEGO, CA 92101-2602
 Phone: 619-515-2520
Fax: 619-231-0431

 After Hours Phone:
619-515-2520

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CTR OF SDELM ST

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 Phone: 619-515-2525

 After Hours Phone:
619-515-2525

License Number: A128091

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGOCITY
COLLEGE


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 Phone: 619-515-2525

 After Hours Phone:
619-515-2525

License Number: A163977

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGOCITY
COLLEGE


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 Phone: 619-515-2525

 After Hours Phone:
619-515-2525

License Number: A76785

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGOCITY
COLLEGE

 Website: www.fhcsd.org


FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 Phone: 619-515-2525

Fax: 619-501-5814

 After Hours Phone:
619-515-2525

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGOCITY
COLLEGE

 Website: www.fhcsd.org


FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 Phone: 619-515-2525

Fax: 619-501-5814

 After Hours Phone:
619-515-2525

License Number: 550002865

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 *Phone: 619-515-2525*

 *After Hours Phone: 619-515-2525*

License Number: PA22762

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*

License Number: 20A12732


NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 *Phone: 619-515-2525*

 *After Hours Phone: 619-515-2525*

License Number: NP95010814

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 *Phone: 619-515-2525*

 *After Hours Phone: 619-515-2525*

License Number: DPM4819

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

 *Website: www.fhcsd.org*






LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360







 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

D. Blue Shield Promise Medi-Cal 网络提供者名单







D1. 联邦认证合格的健康诊所

 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: 20A12653
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org







DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782
 1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
 Phone: 619-515-2430
 After Hours Phone:
619-515-2430
License Number: 20A7147
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
DOWNTOWN FAMILY CTR AT
CONNECTIONS
 Website: www.fhcsd.org







DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782
 1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
 Phone: 619-515-2430
 After Hours Phone:
619-515-2430
License Number: PA58826
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
DOWNTOWN FAMILY CTR AT
CONNECTIONS
 Website: www.fhcsd.org

DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782
 1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
 Phone: 619-515-2430
Fax: 619-578-2410
 After Hours Phone:
619-515-2430
License Number: 550002251
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
DOWNTOWN FAMILY CTR AT
CONNECTIONS
 Website: www.fhcsd.org

DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782
 1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
 Phone: 619-515-2430
Fax: 619-578-2410
 After Hours Phone:
619-515-2430
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
DOWNTOWN FAMILY CTR AT
CONNECTIONS
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A118095
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所


CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A116680


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A120043

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A121451

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE
1400
SAN DIEGO, CA 92113-1195

 Phone: 619-515-2422

 After Hours Phone:
619-515-2422

License Number: A121451


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO
COMMERCIAL


 Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE
1400
SAN DIEGO, CA 92113-1195

 Phone: 619-515-2422

 After Hours Phone:
619-515-2422

License Number: A122238

NPI: 1134155377

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO
COMMERCIAL

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A122238

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A146111

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

Website: www.fhcsd.org

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

2391 ISLAND AVE
SAN DIEGO, CA 92102-2941

Phone: 619-515-2435

After Hours Phone:
619-515-2435

License Number: A80504

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SHERMAN
HEIGHTS FAMILY HLTH CTRS
INC

Website: N/A

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A142703

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113-1195

Phone: 619-515-2422

Fax: 619-269-0053

After Hours Phone:
619-515-2422

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO
COMMERCIAL

Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所


Provider ID: 419529

 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113-1195

 Phone: 619-515-2422

Fax: 619-269-0053

 After Hours Phone:
619-515-2422

License Number: 550003113

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


 Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113-1195

 Phone: 619-515-2422

 After Hours Phone:
619-515-2422

License Number: PA53788

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR OF SD SAN DIEGO

COMMERCIAL


 Website: www.fhcsd.org


FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113-1195

 Phone: 619-515-2422

 After Hours Phone:
619-515-2422

License Number: NP95011254

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


 Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113-1195

 Phone: 619-515-2422

 After Hours Phone:
619-515-2422

License Number: PA20888

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A136616

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A146838

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145
 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
 Phone: 619-515-2435
 After Hours Phone: 619-515-2435
License Number: NP95011254
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SHERMAN HEIGHTS FAMILY HLTH CTRS INC
 Website: N/A

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145
 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
 Phone: 619-515-2435
 After Hours Phone: 619-515-2435
License Number: A97036
NPI: 1134155377
Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SHERMAN HEIGHTS FAMILY HLTH CTRS INC
 Website: N/A

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: A147939
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145
 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
 Phone: 619-515-2435
 After Hours Phone: 619-515-2435
License Number: PA16245

NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SHERMAN HEIGHTS FAMILY HLTH CTRS INC
 Website: N/A

LOGAN HEIGHTS FAMILY HEALTH CENTER





Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: A148014
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

SHERMAN HEIGHTS FAMILY HLTH CTRS INC







Provider ID: 356145
 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
 Phone: 619-515-2435

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

 *After Hours Phone:*
619-515-2435
License Number: PA53788
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken:* yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: SHERMAN
HEIGHTS FAMILY HLTH CTRS
INC
 *Website:* N/A

LOGAN HEIGHTS FAMILY HEALTH CENTER







Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 *Phone:* 619-515-2300
 *After Hours Phone:*
619-515-2300
License Number: A163978
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 *Website:* www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360







 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 *Phone:* 619-515-2300
 *After Hours Phone:*
619-515-2300
License Number: A163464
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 *Website:* www.fhcsd.org

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE







Provider ID: 517403
 316 25TH ST
SAN DIEGO, CA 92102-3016
 *Phone:* 619-662-4100
Fax: 619-238-3807
 *After Hours Phone:*
619-662-4100
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken:* yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH 25TH ST
FAMILY MEDICINE
 *Website:* N/A

LOGAN HEIGHTS FAMILY

HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 *Phone:* 619-515-2300
 *After Hours Phone:*
619-515-2300
License Number: A163183
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 *Website:* www.fhcsd.org

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145
 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
 *Phone:* 619-515-2435
Fax: 619-515-2435
 *After Hours Phone:*
619-515-2435
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken:* yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: SHERMAN
HEIGHTS FAMILY HLTH CTRS
INC
 *Website:* N/A

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

<p>SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE Provider ID: 517403 316 25TH ST SAN DIEGO, CA 92102-3016 Phone: 619-238-5551 After Hours Phone: 619-238-5551 License Number: A97270 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE Website: N/A</p>	<p><i>FAMILY MEDICINE</i> Website: N/A</p>	<p>LOGAN HEIGHTS FAMILY HEALTH CENTER Provider ID: 206360 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: 619-515-2300 After Hours Phone: 619-515-2300 License Number: A151631 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER Website: www.fhcsd.org</p>	<p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i> Website: www.fhcsd.org</p>
<p>SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE Provider ID: 517403 316 25TH ST SAN DIEGO, CA 92102-3016 Phone: 619-662-4100 After Hours Phone: 619-662-4100 License Number: A156607 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE</p>	<p><i>FAMILY MEDICINE</i> Website: www.fhcsd.org</p>	<p>LOGAN HEIGHTS FAMILY HEALTH CENTER Provider ID: 206360 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: 619-515-2300 After Hours Phone: 619-515-2300 License Number: A160489 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER</p>	<p>SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE Provider ID: 517403 316 25TH ST SAN DIEGO, CA 92102-3016 Phone: 619-662-4100 After Hours Phone: 619-662-4100 License Number: NP20849 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE Website: N/A</p>
<p>LOGAN HEIGHTS FAMILY HEALTH CENTER Provider ID: 206360 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: 619-515-2300 After Hours Phone: 619-515-2300 License Number: A154298 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):</p>	<p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p>		

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p><i>Provider ID: 206360</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> <i>Phone: 619-515-2300</i></p> <p> <i>After Hours Phone: 619-515-2300</i></p> <p><i>License Number: A164859</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p><i>Provider ID: 206360</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> <i>Phone: 619-515-2300</i></p> <p> <i>After Hours Phone: 619-515-2300</i></p> <p><i>License Number: A164889</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p>	<p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p><i>Provider ID: 206360</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> <i>Phone: 619-515-2300</i></p> <p> <i>After Hours Phone: 619-515-2300</i></p> <p><i>License Number: A177462</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p><i>Provider ID: 206360</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> <i>Phone: 619-515-2300</i></p> <p> <i>After Hours Phone: 619-515-2300</i></p> <p><i>License Number: A177373</i></p> <p><i>NPI: 1134155377</i></p>	<p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p><i>Provider ID: 206360</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> <i>Phone: 619-515-2300</i></p> <p> <i>After Hours Phone: 619-515-2300</i></p> <p><i>License Number: A169752</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>OPERATION SAMAHAN RANCHO PENASQUITOS</p> <p><i>Provider ID: 418535</i></p> <p> 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889</p> <p> <i>Phone: 844-200-2426</i></p> <p> <i>After Hours Phone:</i></p>
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D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

844-200-2426
License Number: DC29074
NPI: 1801907449
Accepting New Patients: Yes
 Site English Spoken: yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: OPERATION SAMAHAN RANCHO PENASQUITOS
 Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS
Provider ID: 418535
 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889
 Phone: 844-200-2426
 After Hours Phone: 844-200-2426

License Number: NP22974
NPI: 1801907449
Accepting New Patients: Yes
 Site English Spoken: yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: OPERATION SAMAHAN RANCHO PENASQUITOS
 Website: www.operationsamahan.org

mahan.org
OPERATION SAMAHAN RANCHO PENASQUITOS
Provider ID: 418535
 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889
 Phone: 844-200-2426
 After Hours Phone: 844-200-2426
License Number: DC15775
NPI: 1801907449
Accepting New Patients: Yes
 Site English Spoken: yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: OPERATION SAMAHAN RANCHO PENASQUITOS
 Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS
Provider ID: 418535
 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129
 Phone: (844) 200-2426
Fax: (858) 695-9074
 After Hours Phone: (844) 200-2426

License Number: 550003857
NPI: 1699216622
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
Cultural Competency: N
 Hours: M-TU 8:30AM-5:30PM W 10:00AM-7:00PM TH-F 8:30AM-5:30PM
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER


Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
Cultural Competency: N
 Hours: M-TU 8:30AM-5:30PM W 10:00AM-7:00PM TH-F 8:30AM-5:30PM
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: Operation Samahan
 Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS
Provider ID: 418535
 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129
 Phone: (844) 200-2426
Fax: (858) 695-9074
 After Hours Phone: (844) 200-2426
License Number: 550003857
NPI: 1699216622
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
Cultural Competency: N
 Hours: M-TU 8:30AM-5:30PM W 10:00AM-7:00PM TH-F 8:30AM-5:30PM
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所


Medical Group/IPA: Operation Samahan

 Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

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

 Phone: (844) 200-2426

Fax: (858) 695-9074

 After Hours Phone: (844) 200-2426

License Number: 550003857

NPI: 1699216622

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Cultural Competency: N

 Hours: M-TU


8:30AM-5:30PM

W 10:00AM-7:00PM


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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: Operation Samahan

 Website: www.operationsamahan.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858) 810-8700

NPI: 1457724858


Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese

Cultural Competency: N

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

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP of Southern Cal-PHP

 Website: www.sdfamilycare.org

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 662-4100

Fax: (619) 824-9076

 After Hours Phone: (619) 662-4100

License Number: 550003882

NPI: 1205477841


Accepting New Patients: Yes

Min/Max Age: 0\120


Site English Spoken: Y

Site Languages(s) Spoken: Chinese, Spanish, Tagalog, Vietnamese

Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP of Southern Cal-PHP

 Website: N/A

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858) 279-0925


NPI: 1780665877

Accepting New Patients: Yes
Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian

Cultural Competency: N

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

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

SAN DIEGO, CA 92111
☎ Phone: (858) 279-0925
Fax: (858) 633-4680
🕒 After Hours Phone: (858) 279-0925
NPI: 1609905215
Accepting New Patients: Yes
Min/Max Age: 0\150
📄 Site English Spoken: Y
📄 Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian
Cultural Competency: N
🕒 Hours: M-F
8:30AM-5:30PM
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
🌐 Website: www.sdfamilycare.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
📄 4094 4TH AVE
SAN DIEGO, CA 92103
☎ Phone: (619) 515-2545
Fax: (619) 501-9645
🕒 After Hours Phone: (619) 515-2545
License Number: 550003099
NPI: 1629456900
Accepting New Patients: Yes
Min/Max Age: 0\150
📄 Site English Spoken: Y
Cultural Competency: N
🕒 Hours: M-TH
8:00AM-9:00PM
F 8:00AM-5:00PM

American Sign Language (ASL): 515-2444
N
♿ Accessibility: CONTACT PROVIDER
Medical Group/IPA: Family Health Centers of San Diego
🌐 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583
📄 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
☎ Phone: (619) 233-8500
Fax: (619) 687-1067
🕒 After Hours Phone: (619) 233-8500
License Number: 090000297
NPI: 1659415131

Accepting New Patients: No
Min/Max Age: 0\999
📄 Site English Spoken: Y
Cultural Competency: N
🕒 Hours: M-F
8:00AM-5:30PM

American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
🌐 Website: N/A

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
📄 3705 MISSION BLVD
SAN DIEGO, CA 92109
☎ Phone: (619) 515-2444
Fax: (858) 488-1394
🕒 After Hours Phone: (619)


515-2444
License Number: 080000115
NPI: 1386689701
Accepting New Patients: Yes
Min/Max Age: 0\150
📄 Site English Spoken: Y
Cultural Competency: N
🕒 Hours: M-W
8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Medical Group/IPA: Family Health Centers of San Diego
🌐 Website: www.fhcsd.org
Email: sabay@fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987
📄 4874 POLK AVE
SAN DIEGO, CA 92105
☎ Phone: (619) 515-2426
Fax: (619) 255-8002
🕒 After Hours Phone: (619) 515-2426
License Number: 550003108
NPI: 1477953933
Accepting New Patients: Yes
Min/Max Age: 0\150
📄 Site English Spoken: Y
Cultural Competency: N
🕒 Hours: M-F
8:30AM-5:30PM
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Medical Group/IPA: Family Health Centers of San Diego

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所


 Website: www.fhcsd.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

 10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

Fax: (858) 578-4417

 After Hours Phone: (844) 200-2426


License Number: 080000146

NPI: 1871680397


Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y


 Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: N


 Hours: M-F
8:00AM-4:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: Operation Samahan

 Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308

 9855 ERMA RD STE 105
SAN DIEGO, CA 92131

 Phone: (844) 200-2426

Fax: (858) 536-8034

 After Hours Phone: (844) 200-2426

License Number: 080000146

NPI: 1861933897

Accepting New Patients: Yes


Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: Operation Samahan

 Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

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

 Phone: (844) 200-2426

Fax: (858) 695-9074

 After Hours Phone: (844) 200-2426


License Number: 550002478

NPI: 1699216622


Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

Cultural Competency: N

 Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: Operation Samahan


 Website: www.operationsamahan.org

mahan.org


NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

Fax: (619) 683-7586

 After Hours Phone: (619) 515-2424


License Number: 090000469

NPI: 1700821303

Accepting New Patients: Yes

Min/Max Age: 0\18


 Site English Spoken: Y
Cultural Competency: N

 Hours: M-TH
8:00AM-5:00PM

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: Family Health Centers of San Diego

 Website: www.fhcsd.org
Email: jenanm@fhcsd.org


NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424


Fax: (619) 501-0627

 After Hours Phone: (619) 515-2424

NPI: 1700821303

Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y
Cultural Competency: N

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

American Sign Language (ASL): License Number: 090000168
N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: Family Health Centers of San Diego

 *Website: www.fhcsd.org*

MID-CITY COMMUNITY CLINIC

Provider ID: 233597

 4290 POLK AVE
SAN DIEGO, CA 92105

 *Phone: (619) 563-0250*

Fax: (858) 633-4681


 *After Hours Phone: (619) 563-0250*

NPI: 1962483040

Accepting New Patients: Yes

Min/Max Age: 0\150

 *Site English Spoken: Y*
Cultural Competency: N

 *Hours: M-F*
8:00AM-5:00PM
SA 8:00AM-2:00PM

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP of Southern Cal-PHP

 *Website: www.sdfamilycare.org*

SAN DIEGO AMERICAN INDIAN HEALTH CENTER

Provider ID: 207382

 2630 1ST AVE
SAN DIEGO, CA 92103

 *Phone: (619) 234-2158*

Fax: (619) 234-0206


 *After Hours Phone: (619) 234-2158*

NPI: 1003902917


Accepting New Patients: Yes

Min/Max Age: 0\150

 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Korean, Spanish, Hindi*

Cultural Competency: N

 *Hours: M-F*
8:00AM-5:00PM

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: IHP of Southern Cal-PHP


 *Website: WWW.SDAIHC.ORG*

Indian Health Services: Y

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

 *Phone: (619) 280-2058*

Fax: (858) 633-4682


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

NPI: 1962483040

Accepting New Patients: Yes

Min/Max Age: 0\22

 *Site English Spoken: Y*
Cultural Competency: N

 *Hours: M-F*
8:00AM-5:00PM
SA 8:00AM-2:00PM


American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: IHP of


Southern Cal-PHP

 *Website: www.sdfamilycare.org*

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 *Phone: (619) 280-4213*

Fax: (619) 795-9849


 *After Hours Phone: (619) 280-4213*

NPI: 1336353721

Accepting New Patients: Yes

Min/Max Age: 0\150

 *Site English Spoken: Y*
Cultural Competency: N


 *Hours: M-F*
8:00AM-5:00PM

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: La Maestra Family Clinic

 *Website: www.lamaestra.org*


Email:

aschmaltz@lamaestra.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*

Fax: (619) 501-0627

 *After Hours Phone: (619) 515-2424*

NPI: 1184169963

Accepting New Patients: Yes

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N
Accepting New Patients: Yes
Min/Max Age: 0\150

Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego

Website: www.fhcsd.org

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

Provider ID: 517403

316 25TH ST
SAN DIEGO, CA 92102

Phone: (619) 238-5551

Fax: (619) 238-3807

After Hours Phone: (619) 238-5551

NPI: 1598308926

Accepting New Patients: Yes

Min/Max Age: 0\120

Site English Spoken: Y
Cultural Competency: N

Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

Website: N/A

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

2391 ISLAND AVE
SAN DIEGO, CA 92102

Phone: (619) 515-2435

Fax: (619) 515-2435

After Hours Phone: (619) 515-2435

NPI: 1174549232

Accepting New Patients: Yes
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego

Website: N/A

Email: dalvarado@fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113

Phone: (619) 515-2422

Fax: (619) 269-0053

After Hours Phone: (619) 515-2422

License Number: 550003113

NPI: 1235521782

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782

1250 6TH AVE STE 100
SAN DIEGO, CA 92101

Phone: (619) 515-2430

Fax: (619) 578-2410

After Hours Phone: (619) 515-2430

License Number: 550002251

NPI: 1588901045

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego

Website: www.fhcsd.org

Email: jinah@fhcsd.org

FAMILY HEALTH CTR OF SD- ELM ST

Provider ID: 419167

140 ELM ST
SAN DIEGO, CA 92101

Phone: (619) 515-2520

Fax: (619) 231-0431

After Hours Phone: (619) 515-2520

License Number: 550002061

NPI: 1316419070




Accepting New Patients: Yes

Min/Max Age: 0\150





Site English Spoken: Y
Cultural Competency: N




D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所


 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: Family
Health Centers of San Diego
 Website: www.fhcsd.org
Email: jinah@fhcsd.org





FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE




Provider ID: 417429
 1550 BROADWAY STE 2
SAN DIEGO, CA 92101
 Phone: (619) 515-2525
Fax: (619) 501-5814
 After Hours Phone: (619)
515-2525
License Number: 550002865
NPI: 1356750376
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:30AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: Family
Health Centers of San Diego
 Website: www.fhcsd.org
Email: janeta@fhcsd.org

SAN YSIDRO HEALTH PRECISION PARK


Provider ID: 631494
 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

 Phone: (619) 662-4100
Fax: (619) 600-4870
 After Hours Phone: (619)
662-4100
License Number: 550007737
NPI: 1124782685
Accepting New Patients: Yes
Min/Max Age: 0\999
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: www.syhealth.org









NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492
 1016 OUTER RD
SAN DIEGO, CA 92154
 Phone: (619) 429-3733
Fax: (619) 628-5550
 After Hours Phone: (619)
429-3733
License Number: 550001474
NPI: 1215246996
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
Cultural Competency: N

 Hours: M 8:30AM-5:00PM
TU-TH 8:30AM-8:00PM
F 8:30AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: www.ibclinic.org
Email: avaldez@ibclinic.org

KING CHAVEZ HEALTH CENTER







Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
Fax: (619) 205-1952
 After Hours Phone: (619)
662-4100
NPI: 1538262092
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
 Site Languages(s) Spoken:
Chinese, Spanish, Tagalog,
Vietnamese
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: [www.syhealth.org/
/clinics/king- chavez- healt
h- center](http://www.syhealth.org/clinics/king-chavez-health-center)

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC






Provider ID: 206363

D. Blue Shield Promise Medi-Cal 网络提供者名单






D1. 联邦认证合格的健康诊所



 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
Fax: (619) 263-2499
 After Hours Phone: (619)
515-2560
NPI: 1982747671
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: Family
Health Centers of San Diego
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER





Provider ID: 624977
 2204 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2355
Fax: (619) 232-7011
 After Hours Phone: (619)
515-2355
NPI: 1447281936
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: Family
Health Centers of San Diego
 Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK


Provider ID: 664747
 2114 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2406
 After Hours Phone: (619)
515-2406
License Number: 550003556
NPI: 1336525906
Accepting New Patients: Yes
Min/Max Age: 0\999
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F
8:30AM-5:30PM
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: Family
Health Centers of San Diego
 Website: www.fhcsd.org





SAN YSIDRO HEALTH CHC - OCEAN VIEW



Provider ID: 227409
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 Phone: (619) 662-4100
Fax: (619) 595-0258
 After Hours Phone: (619)
662-4100
NPI: 1326225632
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
 Site Language(s) Spoken: ,
Spanish
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: <https://www.syhealth.org/locations>

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
Fax: (619) 234-2447
 After Hours Phone: (619)
515-2300
NPI: 1447281936
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: Family
Health Centers of San Diego
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142
 5160 FEDERAL BLVD
SAN DIEGO, CA 92105
 Phone: (619) 515-2454
Fax: (619) 794-2696
 After Hours Phone: (619)
515-2454
License Number: 550003556

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

NPI: 1336525906
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F
8:30AM-5:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: Family
Health Centers of San Diego
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

SAN MARCOS, CA
92078-2450
 Phone: 760-736-6767
Fax: 760-736-6744
 After Hours Phone:
760-736-6767
License Number: 80000167
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

SAN MARCOS, CA
92078-2450
 Phone: 760-736-6767
Fax: 760-736-6744
 After Hours Phone:
760-736-6767
License Number: NP18788
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

SAN MARCOS

TRUECARE

Provider ID: 614511
 1595 GRAND AVE STE 106
SAN MARCOS, CA
92078-2450
 Phone: 760-736-6767
Fax: 760-736-6744
 After Hours Phone:
760-736-6767
License Number: C54157
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92078-2450
 Phone: 760-736-6767
Fax: 760-736-6744
 After Hours Phone:
760-736-6767
License Number: 1598122871
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92078-2450
 Phone: 760-736-6767
Fax: 760-736-6744
 After Hours Phone:
760-736-6767
License Number: PA17718
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 614511
 1595 GRAND AVE STE 106

TRUECARE





Provider ID: 625875
 1595 GRAND AVE STE 100

TRUECARE






Provider ID: 625875
 1595 GRAND AVE STE 100

D. Blue Shield Promise Medi-Cal 网络提供者名单






D1. 联邦认证合格的健康诊所

SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: PA22667
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org






TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: PA51867
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
Fax: 760-736-8740
 After Hours Phone:
760-736-6767
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE






Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
Fax: 760-736-8740
 After Hours Phone:
760-736-6767
License Number: 80000167
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92078-2450
 Phone: 760-520-8200
Fax: 360-462-2749
 After Hours Phone:
760-520-8200
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92078-2450
 Phone: 760-520-8200
Fax: 360-462-2749
 After Hours Phone:
760-520-8200
License Number: 80000167
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

TRUECARE

Provider ID: 625875

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

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: G74757

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: 20A17306

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: 20A15159

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: A116562

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: A48980

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: A60958

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes



Site Languages(s) Spoken:
Spanish

Cultural Competency: No




American Sign Language (ASL):
N

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE



Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: A93248
NPI: 1598122871

Accepting New Patients: Yes




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

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE



Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: DC29074
NPI: 1598122871

Accepting New Patients: Yes




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

Cultural Competency: No

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE



Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: C54157
NPI: 1598122871

Accepting New Patients: Yes



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

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE



Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: A71311
NPI: 1598122871

Accepting New Patients: Yes

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

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE



Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: A63903
NPI: 1598122871

Accepting New Patients: Yes


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

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: NP95001653
NPI: 1598122871

Accepting New Patients: Yes




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

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所


Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: NP95002545
NPI: 1598122871




Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: PA21723
NPI: 1598122871
Accepting New Patients: Yes




Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org



TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: PA19825
NPI: 1598122871






Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: NP95003903
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: PA17101
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: NP20893

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

Phone: 760-736-6767

After Hours Phone: 760-736-6767

License Number: NP21368

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

Phone: 760-736-6767

After Hours Phone:

760-736-6767

License Number: NP18874

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

Phone: 760-736-6767

After Hours Phone: 760-736-6767

License Number: NM235997

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

Phone: 760-736-6767

After Hours Phone: 760-736-6767

License Number: G71182

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

Phone: 760-736-6767

After Hours Phone: 760-736-6767

License Number: NM235844

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 614511

1595 GRAND AVE STE 106

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

SAN MARCOS, CA 92078
☎ Phone: (760) 736-6767
Fax: (760) 736-6744
🕒 After Hours Phone: (760) 736-6767
License Number: 080000167
NPI: 1811617939
Accepting New Patients: Yes
Min/Max Age: 0\999
📄 Site English Spoken: Y
Cultural Competency: N
🕒 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
🌐 Website: www.ihpsocal.org

TRUECARE

Provider ID: 614511
📄 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
☎ Phone: (760) 736-6767
Fax: (760) 736-6744
🕒 After Hours Phone: (760) 736-6767
License Number: 080000167
NPI: 1598484255
Accepting New Patients: Yes
Min/Max Age: 0\999
📄 Site English Spoken: Y
Cultural Competency: N
🕒 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of

Southern Cal-PHP
🌐 Website: www.ihpsocal.org
TRUECARE
Provider ID: 614511
📄 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
☎ Phone: (760) 736-6767
Fax: (760) 736-6744
🕒 After Hours Phone: (760) 736-6767
License Number: 080000167
NPI: 1245246917

Accepting New Patients: Yes
Min/Max Age: 0\999
📄 Site English Spoken: Y
Cultural Competency: N
🕒 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
🌐 Website: www.ihpsocal.org

TRUECARE

Provider ID: 206426
📄 150 VALPRED A RD
SAN MARCOS, CA 92069
☎ Phone: (760) 736-6767
Fax: (760) 736-6744
🕒 After Hours Phone: (760) 736-6767
License Number: 080000167
NPI: 1811617939
Accepting New Patients: Yes
Min/Max Age: 0\150
📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish

Cultural Competency: N
🕒 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
🌐 Website: www.ihpsocal.org

TRUECARE

Provider ID: 206426
📄 150 VALPRED A RD
SAN MARCOS, CA 92069
☎ Phone: (760) 736-6767
Fax: (760) 736-6744
🕒 After Hours Phone: (760) 736-6767
License Number: 080000167
NPI: 1245246917
Accepting New Patients: Yes
Min/Max Age: 0\150
📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish
Cultural Competency: N
🕒 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
🌐 Website: www.ihpsocal.org


TRUECARE

Provider ID: 206426
📄 150 VALPRED A RD

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760) 736-6767


License Number: 080000167

NPI: 1598484255

Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

Cultural Competency: N

 Hours: M-F

8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of

Southern Cal-PHP


 Website: www.ihpsocal.org


SAN YSIDRO

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: A145480

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: A153975

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: A120584

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

 Site English Spoken: Yes

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: A113624

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org


SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-600-4870

 After Hours Phone: 619-600-4870

License Number: NP95018617

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

 *Website: www.ihpsocal.org*

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 *Phone: 619-600-4867*

 *After Hours Phone: 619-600-4867*

License Number: PA22855


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

 *Website: www.ihpsocal.org*

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 *Phone: 619-662-4100*

 *After Hours Phone: 619-662-4100*

License Number: NP12112

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

 *Website: www.ihpsocal.org*

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 *Phone: 619-662-4100*

 *After Hours Phone: 619-662-4100*

License Number: NP95001960

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS


 *Website: www.ihpsocal.org*

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 *Phone: 619-662-4100*

 *After Hours Phone: 619-662-4100*

License Number: NP95003671

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

 *Website: www.ihpsocal.org*

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 *Phone: 619-662-4100*

 *After Hours Phone: 619-662-4100*

License Number: DPM2930

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

 *Website: www.ihpsocal.org*






SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469







 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

D. Blue Shield Promise Medi-Cal 网络提供者名单







D1. 联邦认证合格的健康诊所

 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: C42207
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org







SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: G66745
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org







SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A51843
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org






SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A40473
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS






























Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A164201
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A32571
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS


D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

 Website: www.ihpsocal.org	YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS	 Accessibility: CONTACT PROVIDER
SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS	 Website: www.ihpsocal.org	Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Provider ID: 227469	SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS	 Website: www.ihpsocal.org
 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322	Provider ID: 227469	SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
 Phone: 619-662-4100	 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322	Provider ID: 227469
 After Hours Phone: 619-662-4100	 Phone: 619-662-4100	 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322
License Number: A167529	 After Hours Phone: 619-662-4100	 Phone: 619-662-4100
NPI: 1598122871	License Number: PA58672	 After Hours Phone: 619-662-4100
Accepting New Patients: Yes	NPI: 1598122871	License Number: NP95019995
<input type="checkbox"/> Site English Spoken: Yes	Accepting New Patients: Yes	NPI: 1598122871
Cultural Competency: No	<input type="checkbox"/> Site English Spoken: Yes	Accepting New Patients: Yes
American Sign Language (ASL): N	Cultural Competency: No	<input type="checkbox"/> Site English Spoken: Yes
 Accessibility: CONTACT PROVIDER	American Sign Language (ASL): N	Cultural Competency: No
Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS	 Accessibility: CONTACT PROVIDER	American Sign Language (ASL): N
 Website: www.ihpsocal.org	Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS	 Accessibility: CONTACT PROVIDER
SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS	 Website: www.ihpsocal.org	Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Provider ID: 227469	SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS	 Website: www.ihpsocal.org
 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322	Provider ID: 227469	SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
 Phone: 619-662-4100	 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322	Provider ID: 227469
Fax: 619-600-4870	 Phone: 619-662-4100	 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322
 After Hours Phone: 619-662-4100	 After Hours Phone: 619-662-4100	 Phone: 619-662-4100
NPI: 1598122871	License Number: PT302385	 After Hours Phone: 619-662-4100
Accepting New Patients: Yes	NPI: 1598122871	License Number: NP95017732
<input type="checkbox"/> Site English Spoken: Yes	Accepting New Patients: Yes	NPI: 1598122871
Cultural Competency: No	<input type="checkbox"/> Site English Spoken: Yes	Accepting New Patients: Yes
American Sign Language (ASL): N	Cultural Competency: No	<input type="checkbox"/> Site English Spoken: Yes
 Accessibility: CONTACT PROVIDER	American Sign Language (ASL): N	Cultural Competency: No
Medical Group/IPA: SAN		

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

American Sign Language (ASL):  Site English Spoken: Yes
Cultural Competency: No


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: NP95003721

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NP95004315

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100



Fax: 619-205-6341

 After Hours Phone:
619-662-4100

License Number: A164201

NPI: 1598122871

Accepting New Patients: Yes

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

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD

SAN YSIDRO, CA
92173-2007



 Phone: 619-662-4100
Fax: 619-205-6341

 After Hours Phone:
619-662-4100

License Number: A78373

NPI: 1598122871

Accepting New Patients: Yes

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

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007



 Phone: 619-662-4100
Fax: 619-205-6341

 After Hours Phone:
619-662-4100

License Number: A55469

NPI: 1598122871

Accepting New Patients: Yes
























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

Cultural Competency: No

American Sign Language (ASL):

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所



<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p> <i>After Hours Phone: 619-662-4100</i></p> <p><i>License Number: PA20490</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><input type="checkbox"/> <i>Site Languages(s) Spoken: Spanish, Tagalog, Portuguese</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p><i>Provider ID: 206292</i></p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> <i>Phone: 619-662-4100</i></p> <p><i>Fax: 619-205-6305</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><input type="checkbox"/> <i>Site Languages(s) Spoken: Spanish, Tagalog, Portuguese</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</i></p> <p> <i>Website: www.ihpsocal.org</i></p>
<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p><i>Provider ID: 206292</i></p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> <i>Phone: 619-662-4100</i></p> <p><i>Fax: 619-205-6341</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p><i>License Number: 20A7241</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><input type="checkbox"/> <i>Site Languages(s) Spoken: Spanish, Tagalog, Portuguese</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p><i>Provider ID: 206292</i></p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> <i>Phone: 619-662-4100</i></p> <p><i>Fax: 619-205-6341</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p><i>License Number: DPM2930</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p><i>Provider ID: 206292</i></p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> <i>Phone: 619-662-4100</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p><i>License Number: PA17162</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><input type="checkbox"/> <i>Site Languages(s) Spoken: Spanish, Tagalog,</i></p>

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所



Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone:*
619-662-4100
License Number: A169694
NPI: 1598122871



Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*



SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA


92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone:*
619-662-4100
License Number: A170738
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone:*
619-662-4100


License Number: A173435
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese



Cultural Competency: No
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



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

 *Phone: 619-662-4100*
 *After Hours Phone:*
619-662-4100


License Number: A158364
NPI: 1598122871



Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

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

 *Phone: 619-662-4100*
 *After Hours Phone:*
619-662-4100

License Number: A159673
NPI: 1598122871

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Accepting New Patients: Yes

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

Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: A40480


NPI: 1598122871

Accepting New Patients: Yes

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

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: A40061

NPI: 1598122871

Accepting New Patients: Yes

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

Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: A180886


NPI: 1598122871

Accepting New Patients: Yes

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

Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: A177337

NPI: 1598122871

Accepting New Patients: Yes

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

Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

 After Hours Phone:
619-662-4100

License Number: A175006

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A157505

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO


HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A145008

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A145480

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A138568

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER






 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER




Provider ID: 206292


D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所




 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A132982
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A131952
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A130348
NPI: 1598122871
Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N






 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: A131021
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A114008
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org


D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A125329

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A127188

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,

Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A49307

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA

92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A49267

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A66885

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

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

Cultural Competency: No


American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所




Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org



SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A56153
NPI: 1598122871






Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A63844
NPI: 1598122871






Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER




Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A72235
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A71304
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER




Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A77936
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所


American Sign Language (ASL):  N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: A84160
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No



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

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org




SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100


After Hours Phone: 619-662-4100
License Number: A80832
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: DC33693
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO



HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: G51462
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: C51110
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes




D. Blue Shield Promise Medi-Cal 网络提供者名单



D1. 联邦认证合格的健康诊所



 *Site Languages(s) Spoken:*
*Spanish, Tagalog,
Portuguese*
Cultural Competency: No
American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*
*Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER*
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 *4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007*
 *Phone: 619-662-4100*
 *After Hours Phone:
619-662-4100*
License Number: A99433
NPI: 1598122871



Accepting New Patients: Yes
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken:*
*Spanish, Tagalog,
Portuguese*
Cultural Competency: No
American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*
*Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER*
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER




Provider ID: 206292



 *4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007*
 *Phone: 619-662-4100*
 *After Hours Phone:
619-662-4100*
License Number: A93785
NPI: 1598122871



Accepting New Patients: Yes
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken:*
*Spanish, Tagalog,
Portuguese*
Cultural Competency: No
American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*
*Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER*
 *Website: www.ihpsocal.org*




SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292
 *4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007*
 *Phone: 619-662-4100*
 *After Hours Phone:
619-662-4100*
License Number: C42207
NPI: 1598122871

Accepting New Patients: Yes
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken:*
*Spanish, Tagalog,
Portuguese*
Cultural Competency: No
American Sign Language (ASL):
N



 *Accessibility: CONTACT
PROVIDER*
*Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER*
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 *4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007*
 *Phone: 619-662-4100*
 *After Hours Phone:
619-662-4100*
License Number: G59670
NPI: 1598122871

Accepting New Patients: Yes
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken:*
*Spanish, Tagalog,
Portuguese*
Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*
*Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER*
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 *4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007*
 *Phone: 619-662-4100*
 *After Hours Phone:
619-662-4100*

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

License Number: G80107

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: G81461

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: NP12112

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: NP95003355

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog,

Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: A113914

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411






 4050 BEYER BLVD
SAN YSIDRO, CA

D. Blue Shield Promise Medi-Cal 网络提供者名单






D1. 联邦认证合格的健康诊所

92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A138938
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 Website: www.ihpsocal.org





SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR


Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A169577
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR






Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A178949
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR




Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A175006
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: 20A14949
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: 20A8516
NPI: 1598122871

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A111118

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR


Provider ID: 227411

 4050 BEYER BLVD

SAN YSIDRO, CA

92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A112627

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 20A12555

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 20A14222

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: C160626

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*

 *After Hours Phone: 619-662-4100*

License Number: G52183

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 *Website: www.ihpsocal.org*


SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*

Fax: 619-205-1948

 *After Hours Phone: 619-662-4100*

License Number: A49307

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*

Fax: 619-205-1948

 *After Hours Phone: 619-662-4100*

License Number: A63844

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR


 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH MATERNAL AND CHILD


HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*

Fax: 619-205-1948

 *After Hours Phone: 619-662-4100*


License Number: A72721

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*

 *After Hours Phone: 619-662-4100*


License Number: A94813

NPI: 1598122871

Accepting New Patients: Yes


 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所

*Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR*
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: C149818

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

*American Sign Language (ASL):
N*


 Accessibility: CONTACT
PROVIDER


*Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR*


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007


 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: C158543

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
*American Sign Language (ASL):
N*


 Accessibility: CONTACT
PROVIDER


*Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR*


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A74960

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

*American Sign Language (ASL):
N*


 Accessibility: CONTACT
PROVIDER

*Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR*


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA

92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A157505

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

*American Sign Language (ASL):
N*


 Accessibility: CONTACT
PROVIDER


*Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR*

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A47906

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

*American Sign Language (ASL):
N*

 Accessibility: CONTACT
PROVIDER

*Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR*


 Website: www.ihpsocal.org


D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

Fax: 619-205-1948

 After Hours Phone:
619-662-4100

License Number: G51462

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

Fax: 619-205-1948

 After Hours Phone:
619-662-4100

License Number: G20087

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

Fax: 619-205-1948

 After Hours Phone:
619-662-4100

License Number: A82187

NPI: 1598122871


Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-205-6341


 After Hours Phone:
619-205-6341

License Number: A64487

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Language(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

Fax: 619-205-6305

 After Hours Phone:
619-662-4100

NPI: 1598122871


Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN


D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 20A11153

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 20A12653

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 20A17643

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-428-4463

After Hours Phone:

619-428-4463

License Number: A112627

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 20A10964

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所


HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-428-4463


 After Hours Phone:
619-428-4463

License Number: 20A8245

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A114893

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A113482

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A106103

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

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

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A101827

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes



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

Cultural Competency: No




American Sign Language (ASL):
N

D. Blue Shield Promise Medi-Cal 网络提供者名单



D1. 联邦认证合格的健康诊所

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: A104660
NPI: 1598122871



Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*



License Number: A101017
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*




SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: 20A9907
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N




 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: 20A8081
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER






Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: 20A7502
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog,

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所

Portuguese
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
Fax: (619) 205-6305
 *After Hours Phone: (619) 662-4100*
NPI: 1952364747
Accepting New Patients: Yes
Min/Max Age: 0\150
 *Site English Spoken: Y*
 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*


Cultural Competency: N

 *Hours: M-F 8:00AM-5:30PM SA 8:30AM-2:00PM*

American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*



Medical Group/IPA: IHP of Southern Cal-PHP

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


SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
Fax: (619) 600-4870
 *After Hours Phone: (619) 662-4100*
NPI: 1801438239
Accepting New Patients: Yes
Min/Max Age: 0\150

 *Site English Spoken: Y*
 *Site Languages(s) Spoken: Spanish*


Cultural Competency: N

 *Hours: M-F 8:00AM-5:00PM*




American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*



Medical Group/IPA: IHP of Southern Cal-PHP

 *Website: https://www.syhealth.org/locations*


SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
Fax: (619) 205-1967
 *After Hours Phone: (619) 662-4100*
NPI: 1558852947


Accepting New Patients: Yes
Min/Max Age: 0\150

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


Cultural Competency: N

 *Hours: M-F 8:00AM-5:00PM*

American Sign Language (ASL): N




 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: IHP of Southern Cal-PHP

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

SPRING VALLE

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA 91977-4035
 *Phone: 619-515-2555*
 *After Hours Phone: 619-515-2555*
License Number: 20A11535
NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC


































 *Website: www.fhcsd.org*

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361
 8788 JAMACHA RD


































D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

<p>SPRING VALLE, CA 91977-4035  Phone: 619-515-2555  After Hours Phone: 619-515-2555 License Number: 20A15459 NPI: 1134155377 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC  Website: www.fhcsd.org</p>	<p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Provider ID: 206361  8788 JAMACHA RD SPRING VALLE, CA 91977-4035  Phone: 619-515-2555  After Hours Phone: 619-515-2555 License Number: 20A14919 NPI: 1134155377 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC  Website: www.fhcsd.org</p>	<p><i>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</i>  Website: www.fhcsd.org</p> <p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Provider ID: 206361  8788 JAMACHA RD SPRING VALLE, CA 91977-4035  Phone: 619-515-2555  After Hours Phone: 619-515-2555 License Number: G78814 NPI: 1134155377 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC  Website: www.fhcsd.org</p>
<p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Provider ID: 206361  8788 JAMACHA RD SPRING VALLE, CA 91977-4035  Phone: 619-515-2555  After Hours Phone: 619-515-2555 License Number: A108228 NPI: 1134155377 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC  Website: www.fhcsd.org</p>	<p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Provider ID: 206361  8788 JAMACHA RD SPRING VALLE, CA 91977-4035  Phone: 619-515-2555 Fax: 619-462-5584  After Hours Phone: 619-515-2555 NPI: 1134155377 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA:</p>	<p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Provider ID: 206361  8788 JAMACHA RD SPRING VALLE, CA 91977-4035  Phone: 619-515-2555  After Hours Phone: 619-515-2555 License Number: A76059 NPI: 1134155377 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):</p>

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p> Website: www.fhcsd.org</p> <p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p>Provider ID: 206361</p> <p> 8788 JAMACHA RD SPRING VALLE, CA 91977-4035</p> <p> Phone: 619-515-2555</p> <p> After Hours Phone: 619-515-2555</p> <p>License Number: PA54588 NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):</p>	<p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):</p> <p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p> Website: www.fhcsd.org</p> <p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p>Provider ID: 206361</p> <p> 8788 JAMACHA RD SPRING VALLE, CA 91977-4035</p> <p> Phone: 619-515-2555</p> <p> After Hours Phone: 619-515-2555</p> <p>License Number: NP10943 NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):</p>	<p> After Hours Phone: 619-515-2555 License Number: A55932 NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):</p> <p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p> Website: www.fhcsd.org</p> <p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p>Provider ID: 206361</p> <p> 8788 JAMACHA RD SPRING VALLE, CA 91977-4035</p> <p> Phone: 619-515-2555</p> <p> After Hours Phone: 619-515-2555</p> <p>License Number: A68463 NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):</p>
<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p> Website: www.fhcsd.org</p> <p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p>Provider ID: 206361</p> <p> 8788 JAMACHA RD SPRING VALLE, CA 91977-4035</p> <p> Phone: 619-515-2555</p> <p> After Hours Phone: 619-515-2555</p> <p>License Number: NP95013978 NPI: 1134155377</p>	<p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):</p> <p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p> Website: www.fhcsd.org</p> <p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p>Provider ID: 206361</p> <p> 8788 JAMACHA RD SPRING VALLE, CA 91977-4035</p> <p> Phone: 619-515-2555</p>	<p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p> Website: www.fhcsd.org</p> <p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p>

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

Phone: 619-515-2555

After Hours Phone:
619-515-2555

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

Phone: 619-515-2555

After Hours Phone:
619-515-2555

License Number: A169342

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

Phone: 619-515-2555

After Hours Phone:
619-515-2555

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

Phone: 619-515-2555

After Hours Phone:
619-515-2555

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA:

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

Phone: 619-515-2555

After Hours Phone:
619-515-2555

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

Phone: 619-515-2555

After Hours Phone:
619-515-2555

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:


GROSSMONT SPRING VALLEY


FAMILY HLTH CTRS INC


 *Website: www.fhcsd.org*

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 *Phone: 619-515-2555*

 *After Hours Phone:
619-515-2555*

License Number: A116680


NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:


GROSSMONT SPRING VALLEY


FAMILY HLTH CTRS INC


 *Website: www.fhcsd.org*

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 *Phone: 619-515-2555*

 *After Hours Phone:
619-515-2555*

License Number: A148014


NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:


GROSSMONT SPRING VALLEY


FAMILY HLTH CTRS INC


 *Website: www.fhcsd.org*

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 *Phone: 619-515-2555*

 *After Hours Phone:
619-515-2555*

License Number: A149063


NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC


 *Website: www.fhcsd.org*

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD

SPRING VALLE, CA
91977-4035

 *Phone: 619-515-2555*

 *After Hours Phone:
619-515-2555*

License Number: A154298


NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

GROSSMONT SPRING VALLEY


FAMILY HLTH CTRS INC


 *Website: www.fhcsd.org*


SPRING VALLEY

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

 *Phone: 619-515-2555*

 *After Hours Phone:
619-515-2555*

License Number: A118095


NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA:

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC


D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:


GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA:


GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

Fax: (619) 462-5584

 After Hours Phone: (619)
515-2555

NPI: 1508801069

Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Family
Health Centers of San Diego

 Website: www.fhcsd.org


Email: angelad@fhcsd.org

VALLEY CENTER

NEIGHBORHOOD HEALTHCARE

Provider ID: 519918

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

Fax: (360) 462-2750

 After Hours Phone: (760)
742-9919


License Number: 080000483

NPI: 1437335148

Accepting New Patients: Yes

Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: N/A

NEIGHBORHOOD HEALTHCARE

Provider ID: 519918

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

Fax: (360) 462-2750


 After Hours Phone: (760)
742-9919


License Number: 080000397

NPI: 1437335148

Accepting New Patients: Yes

Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: N/A

NEIGHBORHOOD HEALTHCARE

Provider ID: 519918

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
 Phone: (760) 742-9919
Fax: (360) 462-2750
 After Hours Phone: (760)
742-9919


License Number: 080000483

NPI: 1437335148


Accepting New Patients: Yes

Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: N/A

NEIGHBORHOOD HEALTHCARE

Provider ID: 519918

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
 Phone: (760) 742-9919
Fax: (360) 462-2750

 After Hours Phone: (760)
742-9919


License Number: 080000397

NPI: 1437335148

Accepting New Patients: Yes


Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: N/A

VISTA

VISTA COMMUNITY CLINIC GRAPEVINE


Provider ID: 400339

 134 GRAPEVINE RD
VISTA, CA 92083-4004
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000

License Number: DC32054

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

GRAPEVINE

 Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 136 GRAPEVINE RD
VISTA, CA 92083-4004
 Phone: 760-631-5000
Fax: 760-414-3892

 After Hours Phone:
760-631-5000

License Number: 80000328

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: Yes
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC
GRAPEVINE

 Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 135 GRAPEVINE RD
VISTA, CA 92083-4004
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000

License Number: A60517

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC


GRAPEVINE

 Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 134 GRAPEVINE RD
VISTA, CA 92083-4004
 Phone: 760-631-5000
Fax: 760-414-3892

 After Hours Phone:
760-631-5000

NPI: 1598122871

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC
GRAPEVINE

Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

134 GRAPEVINE RD
VISTA, CA 92083-4004

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: RN410247

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC
GRAPEVINE

Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

134 GRAPEVINE RD
VISTA, CA 92083-4004

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: PA20775

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC
GRAPEVINE

Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

134 GRAPEVINE RD
VISTA, CA 92083-4004

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: NP7791

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC
GRAPEVINE

Website: N/A

VCC DURIAN

Provider ID: 411518

105 DURIAN ST STE A
VISTA, CA 92083-6206

Phone: 844-308-5003

Fax: 760-414-3892

After Hours Phone:
844-308-5003

License Number: 80000328

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VCC
DURIAN

Website: N/A

VCC DURIAN

Provider ID: 411518

105 DURIAN ST STE A
VISTA, CA 92083-6206

Phone: 844-308-5003

Fax: 760-414-3892

After Hours Phone:
844-308-5003

License Number: 1851300123

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VCC
DURIAN

Website: N/A

VCC DURIAN

Provider ID: 411518

105 DURIAN ST STE A
VISTA, CA 92083-6206

Phone: 844-308-5003

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

Fax: 760-414-3892

☎ After Hours Phone:
844-308-5003

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VCC

DURIAN

🌐 Website: N/A

VISTA COMMUNITY CLINIC

Provider ID: 206338

📍 1000 VALE TERRACE DR
VISTA, CA 92084-5218

☎ Phone: 760-414-3892

☎ After Hours Phone:
760-414-3892

License Number: NP23217

NPI: 1598122871

Accepting New Patients: Yes

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

Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

📍 1000 VALE TERRACE DR
VISTA, CA 92084-5218

☎ Phone: 760-414-3892

☎ After Hours Phone:
760-414-3892

License Number: DC31392

NPI: 1598122871

Accepting New Patients: Yes

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

Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

📍 1000 VALE TERRACE DR
VISTA, CA 92084-5218

☎ Phone: 760-631-5000

☎ After Hours Phone:
760-631-5000

License Number: 20A18374

NPI: 1598122871

Accepting New Patients: Yes

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

Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

📍 1000 VALE TERRACE DR
VISTA, CA 92084-5218

☎ Phone: 760-631-5000

☎ After Hours Phone:
760-631-5000

License Number: 20A13745

NPI: 1598122871

Accepting New Patients: Yes

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

Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

📍 1000 VALE TERRACE DR
VISTA, CA 92084-5218

☎ Phone: 760-414-3892

Fax: 760-414-3892

☎ After Hours Phone:
760-414-3892

License Number: 20A9149

NPI: 1598122871

Accepting New Patients: Yes

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

Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-414-3892

 After Hours Phone:
760-414-3892

License Number: NP95003087

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: C162072

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: C171929

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: C52564

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: DC32054

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338



 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000






 After Hours Phone:

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所






760-631-5000
License Number: C143703
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC






Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
License Number: A80635
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338






 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
License Number: A62780
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC





Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
License Number: A56214
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

nityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
License Number: A173511
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC




Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
License Number: 20A8949
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000
License Number: A125026
NPI: 1598122871

Accepting New Patients: Yes

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

Cultural Competency: No
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000

License Number: 20A7241

NPI: 1598122871

Accepting New Patients: Yes

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

Cultural Competency: No
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 844-308-5003
 After Hours Phone:
844-308-5003

License Number: PA20775

NPI: 1598122871

Accepting New Patients: Yes

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

Cultural Competency: No
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 844-308-5003
 After Hours Phone:
844-308-5003


License Number: NP11448

NPI: 1598122871


Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000

License Number: PA19629

NPI: 1598122871

Accepting New Patients: Yes

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



Cultural Competency: No
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC




 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC




Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000

D. Blue Shield Promise Medi-Cal 网络提供者名单






D1. 联邦认证合格的健康诊所

 *After Hours Phone:* 760-631-5000
License Number: NP95009284
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website:* www.vistacommunityclinic.org





VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 *Phone:* 760-631-5000
 *After Hours Phone:* 760-631-5000
License Number: NP95009149
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website:* www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC






Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 *Phone:* 760-631-5000
 *After Hours Phone:* 760-631-5000
License Number: NP95016368
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website:* www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC




Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 *Phone:* 760-631-5000
 *After Hours Phone:* 760-631-5000
License Number: NP95003571
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC

 *Website:* www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 *Phone:* 760-631-5000
 *After Hours Phone:* 760-631-5000
License Number: NP10896
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website:* www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 *Phone:* 760-631-5000
 *After Hours Phone:* 760-631-5000
License Number: G79676
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N

D. Blue Shield Promise Medi-Cal 网络提供者名单

D1. 联邦认证合格的健康诊所

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: VISTA COMMUNITY CLINIC

 *Website: www.vistacommunityclinic.org*

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 *Phone: 760-631-5000*

 *After Hours Phone: 760-631-5000*

License Number: G86902

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: VISTA COMMUNITY CLINIC

 *Website: www.vistacommunityclinic.org*

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 *Phone: 760-631-5000*

 *After Hours Phone: 760-631-5000*

License Number: DPM3999

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:

Spanish

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: VISTA COMMUNITY CLINIC

 *Website: www.vistacommunityclinic.org*

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 *Phone: 760-631-5000*

 *After Hours Phone: 760-631-5000*

License Number: G51286

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: VISTA COMMUNITY CLINIC

 *Website: www.vistacommunityclinic.org*

VCC DURIAN

Provider ID: 411518

 105 DURIAN ST STE A
VISTA, CA 92083

 *Phone: (844) 308-5003*

Fax: (760) 414-3892

 *After Hours Phone: (844) 308-5003*


License Number: 080000328

NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0\999

Site English Spoken: Y
Cultural Competency: N

 *Hours: M-F 8:30AM-5:00PM*

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP of Southern Cal-PHP

 *Website: www.vistacommunityclinic.org*

VCC DURIAN

Provider ID: 411518

 105 DURIAN ST STE A
VISTA, CA 92083

 *Phone: (844) 308-5003*

Fax: (760) 414-3892

 *After Hours Phone: (844) 308-5003*


License Number: 1851300123

NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0\999

Site English Spoken: Y
Cultural Competency: N

 *Hours: M-F 8:30AM-5:00PM*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: IHP of Southern Cal-PHP

 *Website: www.vistacommunityclinic.org*

D. Blue Shield Promise Medi-Cal 网络提供者名单


D1. 联邦认证合格的健康诊所

VISTA COMMUNITY CLINIC

GRAPEVINE

Provider ID: 400339

 134 GRAPEVINE RD
VISTA, CA 92083

 *Phone: (760) 631-5000*

Fax: (760) 414-3892

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

License Number: 080000328


NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0\999

 *Site English Spoken: Y*

Cultural Competency: N

 *Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM*

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

*Medical Group/IPA: IHP of
Southern Cal-PHP*

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

D2. 主治医生名录

ALPINE

CERTIFIED NURSE PRACTITIONER

KAHL, NICHOLAS

Provider ID: 517802

Provider Gender: Male


License Number: NP95006360


NPI: 1821306598


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

KAHL, NICHOLAS

Provider ID: 517802

Provider Gender: Male

License Number: NP95006360


NPI: 1821306598


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE

FAMILY MEDICINE

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 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SANDERS, JESSICA

Provider ID: 517802

Provider Gender: Female

License Number: NP23004


NPI: 1760765333


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


Cultural Competency: N
Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE

FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

CERTIFIED NURSE PRACTITIONER

SANDERS, JESSICA

Provider ID: 517802

Provider Gender: Female

License Number: NP23004


NPI: 1760765333


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


Cultural Competency: N
Board Certified Specialty: No


IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE

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662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA

Provider ID: 517802

Provider Gender: Female

License Number: NP95005999

NPI: 1316478092

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

Cultural Competency: N

D2. 主治医生名录

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
**SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE**

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

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After Hours Phone: (619)
662-4100

Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA

Provider ID: 517802

Provider Gender: Female

License Number: NP95005999

NPI: 1316478092

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

**SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE**

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

ABDULRAHIM, AHMED

Provider ID: 517802

Provider Gender: Male

License Number: DC28335

NPI: 1619040292

Provider English Spoken: Y

Provider Language(s)
Spoken: Burmese, Gujarati,
Hindi, Urdu

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

**SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE**

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

ABDULRAHIM, AHMED

Provider ID: 517802

Provider Gender: Male

License Number: DC28335

NPI: 1619040292

Provider English Spoken: Y

Provider Language(s)
Spoken: Burmese, Gujarati,
Hindi, Urdu

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

**SAN YSIDRO HEALTH ALPINE
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Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

KELCHNER, MATTHEW

Provider ID: 517802

Provider Gender: Male

License Number: DC22733

NPI: 1174656755

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


**SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE**


1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

D2. 主治医生名录


 Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N




 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

KELCHNER, MATTHEW


Provider ID: 517802
Provider Gender: Male
License Number: DC22733
NPI: 1174656755

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

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

 Website: www.mtnhealth.org



Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM


FAMILY PRACTICE

BAUTISTA, LUIS

Provider ID: 517802
Provider Gender: Male

License Number: A97270
NPI: 1295712206
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
ST AGNES MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

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



 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


FAMILY PRACTICE



BAUTISTA, LUIS


Provider ID: 517802
Provider Gender: Male
License Number: A97270
NPI: 1295712206
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,

ST AGNES MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

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 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


FAMILY PRACTICE


DUBE, BIANCA

Provider ID: 517802
Provider Gender: Female
License Number: C172036
NPI: 1740535152

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100
Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100


 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

D2. 主治医生名录

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

DUBE, BIANCA

Provider ID: 517802

Provider Gender: Female

License Number: C172036


NPI: 1740535152


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

Fax: (619) 205-6305


 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


KAUFHOLD, ANNE


Provider ID: 517802

Provider Gender: Female

License Number: A88893

NPI: 1164508073

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



KAUFHOLD, ANNE

Provider ID: 517802

Provider Gender: Female

License Number: A88893

NPI: 1164508073

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Arabic, Spanish
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH ALPINE

FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

VANHOLLEBEKE, RACHEL

Provider ID: 517802

Provider Gender: Female

License Number: A177337

NPI: 1497217756


 Provider English Spoken: Y
 Provider Language(s)


Spoken: Spanish
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

D2. 主治医生名录

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


VANHOLLEBEKE, RACHEL

Provider ID: 517802

Provider Gender: Female

License Number: A177337

NPI: 1497217756

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

 *1620 ALPINE BLVD STE 110 ALPINE, CA 91901*

 *Phone: (619) 662-4100*

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

 *Website: www.mtnhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

WYLIE, BLAKE

Provider ID: 517802

Provider Gender: Male

License Number: 20A11088

NPI: 1922314145


 *Provider English Spoken: Y*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Board Certified Specialty: No IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

 *1620 ALPINE BLVD STE 110 ALPINE, CA 91901*

 *Phone: (619) 662-4100*

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

 *Website: www.mtnhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

WYLIE, BLAKE

Provider ID: 517802

Provider Gender: Male

License Number: 20A11088

NPI: 1922314145

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS


Board Certified Specialty: No IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

 *1620 ALPINE BLVD STE 110 ALPINE, CA 91901*

 *Phone: (619) 662-4100*

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

 *Website: www.mtnhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FQHC

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,


Provider ID: 517802


NPI: 1770124315

 *Provider English Spoken: Y*


Cultural Competency: N


IHP of Southern Cal-PHP SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

 *1620 ALPINE BLVD STE 110 ALPINE, CA 91901*

 *Phone: (619) 662-4100*

Fax: (619) 320-3347

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

 *Website: www.mtnhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,

Provider ID: 517802


D2. 主治医生名录


NPI: 1770124315

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

Fax: (619) 320-3347

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS



STENSMAN, LARS

Provider ID: 517802

Provider Gender: Male

License Number: A158569

NPI: 1659638062


 Provider English Spoken: Y
 Provider Language(s)


Spoken: Danish, French,
Norwegian, Swedish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



PEDIATRICS

STENSMAN, LARS

Provider ID: 595793

Provider Gender: Male

NPI: 1659638062

 Provider English Spoken: Y
 Provider Language(s)


Spoken: Danish, French,
Norwegian, Swedish


Cultural Competency: N

Board Certified Specialty: No


Rady Childrens Health Network

LARS M STENSMAN

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

STENSMAN, LARS

Provider ID: 517802

Provider Gender: Male

License Number: A158569

NPI: 1659638062

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Danish, French,
Norwegian, Swedish


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

BAISLEY, SHAWN

Provider ID: 517802

Provider Gender: Male


License Number: PA52347


NPI: 1376936120


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP



SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100





D2. 主治医生名录

 Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BAISLEY, SHAWN


Provider ID: 517802
Provider Gender: Male
License Number: PA52347
NPI: 1376936120
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE





 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA


Provider ID: 517802
Provider Gender: Female
License Number: PA20490
NPI: 1619100237





 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 517802
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
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 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER


CARLSBAD




CERTIFIED NURSE



PRACTITIONER

YOUNG, JENNIFER

Provider ID: 480120
Provider Gender: Female
License Number: NP95003087
NPI: 1558701094

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM


CERTIFIED NURSE




PRACTITIONER


YOUNG, JENNIFER

Provider ID: 480120
Provider Gender: Female
License Number: NP95003087
NPI: 1558701094


D2. 主治医生名录

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 *Phone: (760) 736-6767*
 *After Hours Phone: (760)*
736-6767

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM




CERTIFIED NURSE


PRACTITIONER

YOUNG, JENNIFER

Provider ID: 480120
Provider Gender: Female
License Number: NP95003087
NPI: 1558701094

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 *Phone: (760) 736-6767*
 *After Hours Phone: (760)*
736-6767

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER


Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM




CERTIFIED NURSE


PRACTITIONER

YOUNG, JENNIFER

Provider ID: 480120
Provider Gender: Female
License Number: NP95003087
NPI: 1558701094

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 *Phone: (760) 736-6767*
 *After Hours Phone: (760)*
736-6767

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM


FQHC


TRUECARE,

Provider ID: 480120
NPI: 1245246917


 *Provider English Spoken: Y*
Cultural Competency: N

IHP of Southern Cal-PHP
TRUECARE


 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008

 *Phone: (760) 736-6767*
Fax: (760) 736-8740

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

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER


Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM


FQHC

TRUECARE,


Provider ID: 480120
NPI: 1245246917

 *Provider English Spoken: Y*
Cultural Competency: N
IHP of Southern Cal-PHP
TRUECARE

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Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 8:00AM-5:00PM

D2. 主治医生名录

SA 8:00AM-2:00PM

INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 480120

Provider Gender: Male

License Number: G74757

NPI: 1467485078

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PPP

TRUCARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

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 Accessibility: CONTACT
PROVIDER

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PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE



Provider ID: 480120




Provider Gender: Female


License Number: A93248

NPI: 1174703680


D2. 主治医生名录

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM




OBSTETRICS / GYNECOLOGY


POUNTNEY, MARLENE

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Provider Gender: Female
License Number: A93248
NPI: 1174703680


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Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP

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OBSTETRICS / GYNECOLOGY




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Hospital Affiliation: TRI CITY
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MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP

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Min/Max Age: 0\150



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OBSTETRICS / GYNECOLOGY


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NPI: 1174703680


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Spoken: Spanish

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

N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PEDIATRICS

BURGAMY, ELIZABETH

D2. 主治医生名录

Provider ID: 326275
Provider Gender: Female
NPI: 1164609558
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SHARP MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
ELIZABETH B BURGAMY

3257 CAMINO DE LOS
COCHES STE 202
CARLSBAD, CA 92009
 Phone: (760) 633-3640
Fax: (760) 633-3644
 After Hours Phone: (760)
633-3640
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

IYENGAR, RADHA

Provider ID: 480120
Provider Gender: Female
License Number: A49273
NPI: 1265448112
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Spanish,
Tagalog, Tamil

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE
 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 Phone: (760) 736-6767
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736-6767
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PEDIATRICS

IYENGAR, RADHA

Provider ID: 480120
Provider Gender: Female
License Number: A49273
NPI: 1265448112
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Spanish,
Tagalog, Tamil
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PEDIATRICS

IYENGAR, RADHA

Provider ID: 480120
Provider Gender: Female
License Number: A49273
NPI: 1265448112
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Spanish,
Tagalog, Tamil
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PEDIATRICS

IYENGAR, RADHA

Provider ID: 480120

D2. 主治医生名录

Provider Gender: Female

License Number: A49273

NPI: 1265448112

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish,
Tagalog, Tamil

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PEDIATRICS

MUTH, NATALIE

Provider ID: 328451

Provider Gender: Female

NPI: 1497982888

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network

NATALIE D MUTH

3257 CAMINO DE LOS
COCHES STE 202
CARLSBAD, CA 92009

Phone: (760) 633-3640

Fax: (760) 633-3644

After Hours Phone: (760)
633-3640

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

OCONNOR, ERICA

Provider ID: 651599

Provider Gender: Female

NPI: 1134782725

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

Rady Childrens Health Network

ERICA L OCONNOR

3257 CAMINO DE LOS
COCHES STE 202
CARLSBAD, CA 92009

Phone: (760) 633-3640

Fax: (760) 633-3644

After Hours Phone: (760)
633-3640

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

TANAKA, MARY

Provider ID: 465387

Provider Gender: Female

NPI: 1295962686

Provider English Spoken: Y

Provider Language(s)
Spoken: Thai

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

Rady Childrens Health Network

MARY S TANAKA

3257 CAMINO DE LOS
COCHES STE 202
CARLSBAD, CA 92009

Phone: (760) 633-3640

Fax: (760) 633-3644

After Hours Phone: (760)
633-3640

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ZACHRY, ALISON



Provider ID: 480120




Provider Gender: Female


License Number: A131678

NPI: 1922402858


D2. 主治医生名录

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM


PEDIATRICS


ZACHRY, ALISON

Provider ID: 480120
Provider Gender: Female
License Number: A131678
NPI: 1922402858

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE
 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767



 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
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PEDIATRICS


ZACHRY, ALISON

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Provider Gender: Female
License Number: A131678
NPI: 1922402858


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

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP

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CHILDRENS HOSPITAL SAN
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PROVIDER
Hours: M-F 8:00AM-5:00PM
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PHYSICIANS ASSISTANT

CHISWICK, GARY

D2. 主治医生名录

Provider ID: 480120

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

 Phone: (760) 736-6767

Fax: (760) 720-7204

 After Hours Phone: (760)
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 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480120

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL


Board Certified Specialty: No

IHP of Southern Cal-PHP

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PROVIDER

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Provider Gender: Male

License Number: PA22667

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Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL


Board Certified Specialty: No

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PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

RUSSO, KRISTA


Provider ID: 480120




Provider Gender: Female


License Number: PA53036


NPI: 1922471192

D2. 主治医生名录

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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PROVIDER
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PHYSICIANS ASSISTANT

RUSSO, KRISTA


Provider ID: 480120
Provider Gender: Female
License Number: PA53036
NPI: 1922471192

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
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736-6767

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Min/Max Age: 0\150
American Sign Language (ASL):


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 *Accessibility: CONTACT*
PROVIDER
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SA 8:00AM-2:00PM


PHYSICIANS ASSISTANT

RUSSO, KRISTA


Provider ID: 480120
Provider Gender: Female
License Number: PA53036
NPI: 1922471192

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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 *Accessibility: CONTACT*
PROVIDER
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SA 8:00AM-2:00PM


PHYSICIANS ASSISTANT



RUSSO, KRISTA


Provider ID: 480120
Provider Gender: Female
License Number: PA53036
NPI: 1922471192


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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Min/Max Age: 0\150
American Sign Language (ASL):
N



 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CHULA VISTA


ALLERGY IMMUNOLOGY

REDDY, SUMANA



Provider ID: 427322
Provider Gender: Female
License Number: C52581
NPI: 1053300251

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Cambodian, Hindi,
Spanish, Telugu
Cultural Competency: N
Hospital Affiliation:

GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA



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

D2. 主治医生名录

662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 427322
Provider Gender: Female
License Number: C52581
NPI: 1053300251
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Cambodian, Hindi,
Spanish, Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

CHAPIN, DENISE


Provider ID: 206355
Provider Gender: Female
License Number: NP23687
NPI: 1952737033


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

CHAPIN, DENISE

Provider ID: 206355
Provider Gender: Female
License Number: NP23687
NPI: 1952737033


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


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 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150



American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

FERNANDEZ LEYVA, JUAN

Provider ID: 206355
Provider Gender: Male
License Number: NP95001964
NPI: 1194115568


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


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

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 Phone: (619) 515-2500

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515-2500

 Website: www.fhcsd.org
Email:

D2. 主治医生名录

MARTHAO@FHCSO.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

FERNANDEZ LEYVA, JUAN

Provider ID: 206355

Provider Gender: Male

License Number: NP95001964

NPI: 1194115568

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego


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 Website: www.fhcsd.org
Email:

MARTHAO@FHCSO.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

IBARRA, MARTHA

Provider ID: 427322

Provider Gender: Female

License Number: NP12112

NPI: 1114957289

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,


SCRIPPS MERCY HOSPITAL

CHULA VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

IBARRA, MARTHA

Provider ID: 427322

Provider Gender: Female

License Number: NP12112

NPI: 1114957289

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,


SCRIPPS MERCY HOSPITAL

CHULA VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

LEONARD, BEVERLY

Provider ID: 206355

Provider Gender: Female

License Number: NP10943

NPI: 1285772392

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

D2. 主治医生名录

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


LEONARD, BEVERLY

Provider ID: 206355

Provider Gender: Female

License Number: NP10943

NPI: 1285772392




 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

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 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


OWEN, MICHAEL

Provider ID: 206355

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

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CTR

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CHULA VISTA, CA 91910
 Phone: (619) 515-2500
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 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

OWEN, MICHAEL

Provider ID: 206355

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
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Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

QUILALANG, SUSAN

Provider ID: 427322



Provider Gender: Female

License Number: NP5579

NPI: 1841200482

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

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


D2. 主治医生名录

 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


QUILALANG, SUSAN


Provider ID: 427322
Provider Gender: Female
License Number: RN371480
NPI: 1841200482
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE **PRACTITIONER**

QUILALANG, SUSAN


Provider ID: 427322
Provider Gender: Female
License Number: RN371480
NPI: 1841200482
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

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 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER




CERTIFIED NURSE

PRACTITIONER

QUILALANG, SUSAN

Provider ID: 427322
Provider Gender: Female
License Number: NP5579
NPI: 1841200482
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

ROSS, CRYSTAL

Provider ID: 427322
Provider Gender: Female
License Number: NP95015413
NPI: 1548683378
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

D2. 主治医生名录

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

ROSS, CRYSTAL

Provider ID: 427322

Provider Gender: Female

License Number: NP95015413

NPI: 1548683378

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON,


GROSSMONT HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA VISTA

 *678 3RD AVE*
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*


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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

SICKLES, MAGGIE

Provider ID: 427322

Provider Gender: Female

License Number: NP22000


NPI: 1821346826


 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA VISTA

 *678 3RD AVE*
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

SICKLES, MAGGIE

Provider ID: 427322

Provider Gender: Female

License Number: NP22000


NPI: 1821346826


 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA VISTA

 *678 3RD AVE*
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

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

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

al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

VEGA, TERESA

Provider ID: 206355

Provider Gender: Female

License Number: NP95001705

NPI: 1912304569

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego

CHULA VISTA FAMILY HLTH CTR

 *251 LANDIS AVE*
CHULA VISTA, CA 91910

 *Phone: (619) 515-2500*

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

 *Website: www.fhcsd.org*
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

D2. 主治医生名录


VEGA, TERESA

Provider ID: 206355

Provider Gender: Female

License Number: NP95001705

NPI: 1912304569

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


WILLIAMS, TAKISHA

Provider ID: 206355

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

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PROVIDER

CERTIFIED NURSE

PRACTITIONER


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Provider ID: 206355

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

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 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
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Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

BOSTON, LAURA

Provider ID: 206355

Provider Gender: Female

License Number: NM792

NPI: 1174553259

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

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CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
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 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

D2. 主治医生名录

BOSTON, LAURA

Provider ID: 206355

Provider Gender: Female

License Number: NM792

NPI: 1174553259

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH

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 Phone: (619) 515-2500

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 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

HASHEM, SHIVA

Provider ID: 206355

Provider Gender: Female

License Number: DC26269

NPI: 1952950776

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH

CTR

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 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

CHIROPRACTOR

HASHEM, SHIVA

Provider ID: 206355

Provider Gender: Female

License Number: DC26269

NPI: 1952950776

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

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 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

CHIROPRACTOR

KAZEM, HARON

Provider ID: 427322

Provider Gender: Male

License Number: DC33295

NPI: 1306221262

Provider English Spoken: Y

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


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: [www.syhealth.org/
/clinics/chula- vista- medic
al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

KAZEM, HARON



Provider ID: 427322

Provider Gender: Male

License Number: DC33295

D2. 主治医生名录

NPI: 1306221262


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Persian,
Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

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CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

PLANTE, CHARLES

Provider ID: 427322

Provider Gender: Male

License Number: DC31963


NPI: 1760464960

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

PLANTE, CHARLES

Provider ID: 427322

Provider Gender: Male

License Number: DC31963


NPI: 1760464960


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

REYNOSO, ALFONSO

Provider ID: 427322

Provider Gender: Male

License Number: DC20760


NPI: 1285921627


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

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 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

REYNOSO, ALFONSO

Provider ID: 427322

Provider Gender: Male

License Number: DC20760


NPI: 1285921627


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

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662-4100

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

D2. 主治医生名录


al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY **METABOLISM DIABETES** **CARRILLO, MARITZA**

Provider ID: 427322
Provider Gender: Female
License Number: A163183
NPI: 1649628587
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: [www.syhealth.org/clinics/chula- vista- medic al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

ENDOCRINOLOGY **METABOLISM DIABETES**

CARRILLO, MARITZA
Provider ID: 427322
Provider Gender: Female
License Number: A163183
NPI: 1649628587
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA



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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

ENDOCRINOLOGY **METABOLISM DIABETES** **CRUZ, MICHAEL**

Provider ID: 427322
Provider Gender: Male
License Number: A138772

NPI: 1265851133
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: [www.syhealth.org/clinics/chula- vista- medic al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY **METABOLISM DIABETES** **CRUZ, MICHAEL**

Provider ID: 427322
Provider Gender: Male
License Number: A138772
NPI: 1265851133
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP

D2. 主治医生名录

SAN YSIDRO HEALTH CHULA VISTA

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY **METABOLISM DIABETES**

VINCENT, LAUREN

Provider ID: 427322

Provider Gender: Female

License Number: A134303

NPI: 1053757997

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA VISTA

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY **METABOLISM DIABETES**

VINCENT, LAUREN

Provider ID: 427322

Provider Gender: Female

License Number: A134303

NPI: 1053757997

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA VISTA

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Phone: (619) 662-4100
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Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ALANIZ, MATEO

Provider ID: 427322

Provider Gender: Male

License Number: A124388

NPI: 1700175577

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA VISTA

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ALANIZ, MATEO

Provider ID: 427322

Provider Gender: Male

License Number: A124388

NPI: 1700175577

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA VISTA

678 3RD AVE
CHULA VISTA, CA 91910

D2. 主治医生名录

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


AMANAT, SOROOSH

Provider ID: 427322

Provider Gender: Male

License Number: A153022

NPI: 1003279621

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

SA 8:00AM-2:30PM

FAMILY PRACTICE


AMANAT, SOROOSH

Provider ID: 427322

Provider Gender: Male

License Number: A153022

NPI: 1003279621

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Board Certified Specialty: No


IHP of Southern Cal-PHP


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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

SA 8:00AM-2:30PM

FAMILY PRACTICE

ARCEGOMEZ, LAURA


Provider ID: 427322

Provider Gender: Female

License Number: A123604

NPI: 1053532986

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: CHULA

VISTA COMM HOSP


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

ARCEGOMEZ, LAURA


Provider ID: 427322

Provider Gender: Female

License Number: A123604

NPI: 1053532986

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: CHULA

D2. 主治医生名录

VISTA COMM HOSP

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

CAMPOS, MELISSA

Provider ID: 427322

Provider Gender: Female

License Number: A138474

NPI: 1427475318

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

678 3RD AVE

CHULA VISTA, CA 91910



Phone: (619) 662-4100



After Hours Phone: (619)
662-4100



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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CAMPOS, MELISSA

Provider ID: 427322

Provider Gender: Female

License Number: A138474

NPI: 1427475318

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

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After Hours Phone: (619)
662-4100



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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N



Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CHERY, FARAH

Provider ID: 417641

Provider Gender: Female

License Number: A108681

NPI: 1114183688

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: EL CENTRO

REGIONAL MEDICAL CENTER,

SHARP CHULA VISTA MED CTR

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC

352 L ST

CHULA VISTA, CA 91911

Phone: (619) 515-2325

After Hours Phone: (619)
515-2325

Website: www.fhcsd.org

Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N



Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

CHERY, FARAH

Provider ID: 417641

Provider Gender: Female

D2. 主治医生名录

License Number: A108681

NPI: 1114183688

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: EL CENTRO

REGIONAL MEDICAL CENTER,
SHARP CHULA VISTA MED CTR

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC

352 L ST

CHULA VISTA, CA 91911

Phone: (619) 515-2325

After Hours Phone: (619)
515-2325

Website: www.fhcsd.org

Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

CHERY, FARAH

Provider ID: 206355

Provider Gender: Female

License Number: A108681

NPI: 1114183688

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: EL CENTRO

REGIONAL MEDICAL CENTER,

SHARP CHULA VISTA MED CTR

Board Certified Specialty: No

Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

251 LANDIS AVE

CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

CHERY, FARAH

Provider ID: 206355

Provider Gender: Female

License Number: A108681

NPI: 1114183688

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: EL CENTRO

REGIONAL MEDICAL CENTER,
SHARP CHULA VISTA MED CTR

Board Certified Specialty: No

Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

251 LANDIS AVE

CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

DY, DIANE

Provider ID: 206355

Provider Gender: Female

License Number: A153344

NPI: 1467807560

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

251 LANDIS AVE

CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT

D2. 主治医生名录

PROVIDER		
<u>FAMILY PRACTICE</u> DY, DIANE Provider ID: 206355 Provider Gender: Female License Number: A153344 NPI: 1467807560 Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No Family Health Centers of San Diego CHULA VISTA FAMILY HLTH CTR 251 LANDIS AVE CHULA VISTA, CA 91910 Phone: (619) 515-2500 After Hours Phone: (619) 515-2500 Website: www.fhcsd.org Email: MARTHAO@FHCSD.ORG Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER	CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL Board Certified Specialty: No Community Care IPA LLC MOHAMMED K ELSAYED 330 OXFORD ST STE 106 CHULA VISTA, CA 91911 Phone: (619) 409-1802 Fax: (619) 409-1831 After Hours Phone: (619) 409-1802 Website: N/A Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-TH 9:00AM-5:00PM F 8:00AM-4:00PM	SCRIPPS MERCY HOSPITAL Board Certified Specialty: No Imperial Health Holdings Medical Group-SD MOHAMMED K ELSAYED 330 OXFORD ST STE 106 CHULA VISTA, CA 91911 Phone: (619) 409-1802 Fax: (619) 409-1831 After Hours Phone: (619) 409-1802 Website: N/A Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-TH 9:00AM-5:00PM F 8:00AM-4:00PM
<u>FAMILY PRACTICE</u> ELSAYED, MOHAMMED Provider ID: 19561 Provider Gender: Male NPI: 1821033424 Provider English Spoken: Y Provider Language(s) Spoken: Arabic, German, Spanish Cultural Competency: N Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, PARADISE VALLEY HOSPITAL,	<u>FAMILY PRACTICE</u> ELSAYED, MOHAMMED Provider ID: 19561 Provider Gender: Male NPI: 1821033424 Provider English Spoken: Y Provider Language(s) Spoken: Arabic, German, Spanish Cultural Competency: N Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, PARADISE VALLEY HOSPITAL,	<u>FAMILY PRACTICE</u> GARCIA, KARLA Provider ID: 427322 Provider Gender: Female License Number: A120672 NPI: 1154647410 Provider English Spoken: Y Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH CHULA VISTA 678 3RD AVE

D2. 主治医生名录

CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

GARCIA, KARLA

Provider ID: 427322
Provider Gender: Female
License Number: A120672
NPI: 1154647410
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

HUBLEY, PAUL

Provider ID: 206355
Provider Gender: Male
License Number: A73172
NPI: 1568496974
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No Family Health Centers of San Diego
CHULA VISTA FAMILY HLTH CTR
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org

Email: MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

HUBLEY, PAUL

Provider ID: 206355

Provider Gender: Male
License Number: A73172
NPI: 1568496974
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No Family Health Centers of San Diego
CHULA VISTA FAMILY HLTH CTR
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

JIMENEZ, KRISTAL

Provider ID: 427322
Provider Gender: Female
License Number: A159831
NPI: 1922531250
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA

D2. 主治医生名录

VISTA

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


JIMENEZ, KRystal

Provider ID: 427322

Provider Gender: Female

License Number: A159831

NPI: 1922531250

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1679137780

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


LACH, REBECCA


Provider ID: 427322

Provider Gender: Female

License Number: A177922

NPI: 1679137780

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

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CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LACH, REBECCA

Provider ID: 427322

Provider Gender: Female

License Number: A177922

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

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CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LAW, KAREN

Provider ID: 427322

Provider Gender: Female

License Number: A138534

NPI: 1205253150

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: CHULA

VISTA COMM HOSP

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

D2. 主治医生名录

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


LAW, KAREN

Provider ID: 427322

Provider Gender: Female

License Number: A138534

NPI: 1205253150

 Provider English Spoken: Y

 Provider Language(s)
 Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: CHULA VISTA COMM HOSP

Board Certified Specialty: No
 IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA VISTA

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


MCKENNETT, MARIANNE

Provider ID: 427322

Provider Gender: Female

License Number: G57243

NPI: 1376639666

 Provider English Spoken: Y

 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL


HOSPITAL

HOSPITAL

Board Certified Specialty: No
 IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
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 662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MCKENNETT, MARIANNE

Provider ID: 427322

Provider Gender: Female

License Number: G57243

NPI: 1376639666

 Provider English Spoken: Y

 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL


HOSPITAL


HOSPITAL


Board Certified Specialty: No
 IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
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 Phone: (619) 662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MENON, POOJA

Provider ID: 427322

Provider Gender: Female

License Number: A123263

NPI: 1053600064

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No
 IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA VISTA

D2. 主治医生名录

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE



MENON, POOJA

Provider ID: 427322
Provider Gender: Female
License Number: A123263
NPI: 1053600064
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
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662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE



MERRILL, SARAH

Provider ID: 427322
Provider Gender: Female
License Number: A123492
NPI: 1225399512
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

MERRILL, SARAH



Provider ID: 427322
Provider Gender: Female
License Number: A123492
NPI: 1225399512
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

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 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

MOYA, MARY

Provider ID: 427322
Provider Gender: Female
License Number: A80185
NPI: 1093844417
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP

D2. 主治医生名录

SAN YSIDRO HEALTH CHULA VISTA

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MOYA, MARY

Provider ID: 427322

Provider Gender: Female

License Number: A80185

NPI: 1093844417

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

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Phone: (619) 662-4100

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

al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, CARIE

Provider ID: 427322

Provider Gender: Female

License Number: A106103

NPI: 1174781132

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

678 3RD AVE
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Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, LINH

Provider ID: 417641

Provider Gender: Female

License Number: A144995

NPI: 1619357993

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC

352 L ST
CHULA VISTA, CA 91911

Phone: (619) 515-2325

After Hours Phone: (619) 515-2325

Website: www.fhcsd.org
Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, LINH

Provider ID: 417641

Provider Gender: Female

License Number: A144995

NPI: 1619357993

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

Family Health Centers of San

D2. 主治医生名录

Diego

FAMILY HLTH CTR SAN
DIEGO-RICE FAM HC

352 L ST

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Website: www.fhcsd.org

Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NGUYEN, CARIE

Provider ID: 427322

Provider Gender: Female

License Number: A106103

NPI: 1174781132

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

678 3RD AVE

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Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PALOMINO, MARY

Provider ID: 427322

Provider Gender: Female

License Number: A115699

NPI: 1770718975

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

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662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

PALOMINO, MARY

Provider ID: 427322

Provider Gender: Female

License Number: A115699

NPI: 1770718975

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

PEDROTTY, JOHN

Provider ID: 427322

Provider Gender: Male

License Number: G80234

NPI: 1992861629

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

D2. 主治医生名录

HEALTHCARE CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PEDROTTY, JOHN

Provider ID: 427322

Provider Gender: Male

License Number: G80234

NPI: 1992861629

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND
HEALTHCARE CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PEREZ, PERLITA

Provider ID: 206355

Provider Gender: Female

License Number: A119689

NPI: 1174810972

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PEREZ, PERLITA

Provider ID: 206355

Provider Gender: Female

License Number: A119689

NPI: 1174810972

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

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

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PIEROS, JANELLE

Provider ID: 427322

Provider Gender: Female

License Number: 20A13225

NPI: 1386935914

Provider English Spoken: Y

Provider Language(s)
Spoken: Faroese, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

D2. 主治医生名录

VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA

VISTA

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

PIEROS, JANELLE

Provider ID: 427322

Provider Gender: Female

License Number: 20A13225

NPI: 1386935914

Provider English Spoken: Y

Provider Language(s)
Spoken: Faroese, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

PINA, RAQUEL

Provider ID: 206355

Provider Gender: Female

License Number: A177698

NPI: 1255893368

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San

Diego

CHULA VISTA FAMILY HLTH

CTR

251 LANDIS AVE

CHULA VISTA, CA 91910

Phone: (619) 515-2500

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Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PINA, RAQUEL

Provider ID: 206355

Provider Gender: Female

License Number: A177698

NPI: 1255893368

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San

Diego

CHULA VISTA FAMILY HLTH

CTR

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Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PISINGER, PATRICIA

Provider ID: 427322

Provider Gender: Female

License Number: A69264

NPI: 1861428302

Provider English Spoken: Y

Provider Language(s)
Spoken: Czech

Cultural Competency: N

D2. 主治医生名录

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PISINGER, PATRICIA

Provider ID: 427322

Provider Gender: Female

License Number: A69264

NPI: 1861428302

Provider English Spoken: Y

Provider Language(s)
Spoken: Czech

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

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Phone: (619) 662-4100
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662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RAJ, ASHA

Provider ID: 417641

Provider Gender: Female

License Number: 20A15683

NPI: 1003293507

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-RICE FAM HC

352 L ST
CHULA VISTA, CA 91911
Phone: (619) 515-2500
After Hours Phone: (619)
515-2500

Website: www.fhcsd.org
Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

RAJ, ASHA

Provider ID: 417641

Provider Gender: Female

License Number: 20A15683

NPI: 1003293507

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC

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Website: www.fhcsd.org
Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

ROSENBLATT, EUGENE

Provider ID: 427322

Provider Gender: Male

License Number: 20A9060

NPI: 1427123991

Provider English Spoken: Y

Cultural Competency: N

D2. 主治医生名录

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA


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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ROSENBLATT, EUGENE

Provider ID: 427322

Provider Gender: Male

License Number: 20A9060


NPI: 1427123991


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

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 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SERPAS, SHAILA

Provider ID: 427322

Provider Gender: Female

License Number: G74728

NPI: 1124039136

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR, SCRIPPS

MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

SERPAS, SHAILA

Provider ID: 427322

Provider Gender: Female

License Number: G74728

NPI: 1124039136

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR, SCRIPPS

MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

SHAHTAJI, ALAN


Provider ID: 427322

Provider Gender: Male



License Number: 20A11087


NPI: 1972751089

D2. 主治医生名录

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

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CHULA VISTA, CA 91910


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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

FAMILY PRACTICE


SHAHTAJI, ALAN

Provider ID: 427322

Provider Gender: Male

License Number: 20A11087

NPI: 1972751089


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

FAMILY PRACTICE



SWARTZ, JOHN

Provider ID: 427322

Provider Gender: Male

License Number: G72486

NPI: 1396754131

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, LOS ANGELES

COUNTY HARBOR UCLA


MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

SWARTZ, JOHN


Provider ID: 427322

Provider Gender: Male

License Number: G72486

NPI: 1396754131

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, LOS ANGELES

COUNTY HARBOR UCLA

MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP


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 *Phone: (619) 662-4100*

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

D2. 主治医生名录

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

TALAVERA, GREGORY

Provider ID: 427322

Provider Gender: Male

License Number: A40061

NPI: 1740337161

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA


VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TALAVERA, GREGORY

Provider ID: 427322

Provider Gender: Male

License Number: A40061

NPI: 1740337161

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


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 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TEE, ALEXANDRA

Provider ID: 427322

Provider Gender: Female

License Number: A164392

NPI: 1881198406

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA


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 After Hours Phone: (619)
662-4100

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

al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

TEE, ALEXANDRA

Provider ID: 427322

Provider Gender: Female

License Number: A164392

NPI: 1881198406

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Board Certified Specialty: No


IHP of Southern Cal-PHP


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662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

D2. 主治医生名录

FAMILY PRACTICE

TOLEDO-NADER, CAROLL

Provider ID: 427322

Provider Gender: Male

License Number: A41486

NPI: 1427126648

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TOLEDO-NADER, CAROLL

Provider ID: 427322

Provider Gender: Male

License Number: A41486

NPI: 1427126648

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP

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 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TREJO, RAUL

Provider ID: 427322

Provider Gender: Male

License Number: A77936

NPI: 1174534184

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TREJO, RAUL

Provider ID: 427322

Provider Gender: Male

License Number: A77936

NPI: 1174534184

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA


Board Certified Specialty: No
IHP of Southern Cal-PHP

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 After Hours Phone: (619)
662-4100

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


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 主治医生名录

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


VELASQUEZ, SHARON

Provider ID: 427322

Provider Gender: Female

License Number: A71304

NPI: 1972732584

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA


VISTA

 *678 3RD AVE*

CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


VELASQUEZ, SHARON

Provider ID: 427322

Provider Gender: Female

License Number: A71304

NPI: 1972732584

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA


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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


WHITLEY, NICHOLAS


Provider ID: 427322

Provider Gender: Male

License Number: A118250

NPI: 1629394721

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


*SAN YSIDRO HEALTH CHULA
VISTA*

 *678 3RD AVE*

CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

WHITLEY, NICHOLAS

Provider ID: 427322

Provider Gender: Male

License Number: A118250

NPI: 1629394721

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 *678 3RD AVE*


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 *Phone: (619) 662-4100*

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

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

D2. 主治医生名录

al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


FAMILY PRACTICE

YOON, RYAN

Provider ID: 427322
Provider Gender: Male
License Number: A114600
NPI: 1942435144
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH CHULA VISTA
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medic-al-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER



FAMILY PRACTICE

YOON, RYAN

Provider ID: 427322
Provider Gender: Male
License Number: A114600
NPI: 1942435144
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH CHULA VISTA
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medic-al-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FQHC

CHULA VISTA FAMILY HLTH CTR,

Provider ID: 206355
NPI: 1346480837
 Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego
CHULA VISTA FAMILY HLTH CTR
 251 LANDIS AVE

CHULA VISTA, CA 91910
 Phone: (619) 515-2500
Fax: (619) 397-1161
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
Email: MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

CHULA VISTA FAMILY HLTH CTR,

Provider ID: 206355
NPI: 1346480837
 Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego
CHULA VISTA FAMILY HLTH CTR
 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
Fax: (619) 397-1161
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
Email: MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT

D2. 主治医生名录

PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC,

Provider ID: 417641

NPI: 1083959464

☐ Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

📍 352 L ST
CHULA VISTA, CA 91911

☎ Phone: (619) 515-2325
Fax: (619) 420-0660

🕒 After Hours Phone: (619) 515-2325

🌐 Website: www.fhcsd.org
Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC,

Provider ID: 417641

NPI: 1083959464

☐ Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

📍 352 L ST
CHULA VISTA, CA 91911

☎ Phone: (619) 515-2325
Fax: (619) 420-0660

🕒 After Hours Phone: (619) 515-2325

🌐 Website: www.fhcsd.org
Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH CHULA VISTA,

Provider ID: 427322

NPI: 1326486861

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA VISTA

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎ Phone: (619) 662-4100
Fax: (619) 425-6941

🕒 After Hours Phone: (619) 662-4100

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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:00PM

FQHC

SAN YSIDRO HEALTH CHULA VISTA,

Provider ID: 427322

NPI: 1326486861

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA VISTA

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎ Phone: (619) 662-4100
Fax: (619) 425-6941

🕒 After Hours Phone: (619) 662-4100

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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

FQHC

SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS,

Provider ID: 664445

NPI: 1184135873

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS

📍 280 E ST

D2. 主治医生名录

CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
Fax: (619) 426-2170
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS,

Provider ID: 664445
NPI: 1184135873
☑ Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS

📍 280 E ST
CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
Fax: (619) 426-2170
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

GENERAL DENTISTRY

PHAM, QUYNH

Provider ID: 427322
Provider Gender: Female
License Number: DDS102880
NPI: 1366917353
☑ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

GENERAL DENTISTRY

PHAM, QUYNH

Provider ID: 427322
Provider Gender: Female
License Number: DDS102880
NPI: 1366917353
☑ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

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☎ Phone: (619) 662-4100

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🌐 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

GENERAL PRACTICE

SAMI, REMAN

Provider ID: 427322
Provider Gender: Female
License Number: 20A19457
NPI: 1295362242
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

D2. 主治医生名录

GENERAL PRACTICE

SAMI, REMAN

Provider ID: 427322

Provider Gender: Female

License Number: 20A19457

NPI: 1295362242

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA


VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

HEMATOLOGY / ONCOLOGY

QUIROZ, ELISA

Provider ID: 427322

Provider Gender: Female

License Number: A162816

NPI: 1932558301

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA


VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

HEMATOLOGY / ONCOLOGY

QUIROZ, ELISA

Provider ID: 427322

Provider Gender: Female

License Number: A162816

NPI: 1932558301

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA
VISTA

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 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

CHEN, TSUH-YIN

Provider ID: 427322

Provider Gender: Female

License Number: C55563

NPI: 1093803520

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE


CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

D2. 主治医生名录

/clinics/chula- vista- medic
al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CHEN, TSUH-YIN

Provider ID: 427322
Provider Gender: Female
License Number: C55563
NPI: 1093803520
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Portuguese,
Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
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 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
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662-4100
 Website: [www.syhealth.org
/clinics/chula- vista- medic
al- plaza](http://www.syhealth.org/clinics/chula- vista- medic
al- plaza)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

HAMMETT, ERIN



Provider ID: 427322
Provider Gender: Female
License Number: 20A14025
NPI: 1467884098
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SANTA
BARBARA COTTAGE HOSP,
GOLETA VALLEY COTTAGE
HOSP
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [www.syhealth.org
/clinics/chula- vista- medic
al- plaza](http://www.syhealth.org/clinics/chula- vista- medic
al- plaza)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
INTERNAL MEDICINE
HAMMETT, ERIN
Provider ID: 427322
Provider Gender: Female
License Number: 20A14025

NPI: 1467884098

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SANTA
BARBARA COTTAGE HOSP,
GOLETA VALLEY COTTAGE
HOSP
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [www.syhealth.org
/clinics/chula- vista- medic
al- plaza](http://www.syhealth.org/clinics/chula- vista- medic
al- plaza)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

KAKAIYA, ROSHNI

Provider ID: 427322
Provider Gender: Female
License Number: 20A19485
NPI: 1073179529
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

D2. 主治医生名录


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE


KAKAIYA, ROSHNI

Provider ID: 427322

Provider Gender: Female

License Number: 20A19485

NPI: 1073179529

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

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 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

KIM, JIUN

Provider ID: 427322

Provider Gender: Female


License Number: C182935


NPI: 1598020752

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

KIM, JIUN

Provider ID: 427322

Provider Gender: Female

License Number: C182935


NPI: 1598020752


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
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 678 3RD AVE
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 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

UWEDJOJEVWE, LETICIA

Provider ID: 380242

Provider Gender: Female

NPI: 1891882221

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

D2. 主治医生名录

Imperial Health Holdings
Medical Group-SD
LETICIA M UWEDJOJEVWE
340 4TH AVE STE 10
CHULA VISTA, CA 91910
Phone: (619) 934-2215
Fax: (619) 500-5955
After Hours Phone: (619)
934-2215
Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:00PM
F 8:00AM-4:00PM

INTERNAL MEDICINE

VELAZQUEZ CAMARENA, MARIA

Provider ID: 427322

Provider Gender: Female

License Number: A56153

NPI: 1518965714

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

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

662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

VELAZQUEZ CAMARENA, MARIA

Provider ID: 427322

Provider Gender: Female

License Number: A56153

NPI: 1518965714

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP

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678 3RD AVE
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Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

INTERNAL MEDICINE

WEN, AKI YEN CHANG

Provider ID: 427322

Provider Gender: Male

License Number: 20A12555

NPI: 1205126505

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

WEN, AKI YEN CHANG

Provider ID: 427322

Provider Gender: Male

License Number: 20A12555

NPI: 1205126505

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

D2. 主治医生名录

VISTA

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


ALIMONOS, LYSISTRATI

Provider ID: 206355

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY


ALIMONOS, LYSISTRATI

Provider ID: 206355

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

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Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206355

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL


CHULA VISTA, SHARP MARY


BIRCH HOSP FOR WOMEN
AND NEWBORNS


Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE


D2. 主治医生名录

Provider ID: 206355

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS


Board Certified Specialty: No


Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:


MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


CARTER, KHALIL

Provider ID: 206355

Provider Gender: Male

License Number: A113001

NPI: 1225231582

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR


Board Certified Specialty: No


Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY


CARTER, KHALIL

Provider ID: 206355

Provider Gender: Male

License Number: A113001

NPI: 1225231582

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,


GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR


Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE

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515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 206355

Provider Gender: Female

License Number: A163464

NPI: 1326531401

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH

CTR

D2. 主治医生名录

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500
 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA

Provider ID: 206355

Provider Gender: Female

License Number: A163464

NPI: 1326531401

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


DE MIK, TRAVIS

Provider ID: 206355

Provider Gender: Male

License Number: A108228

NPI: 1629277322


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


DE MIK, TRAVIS

Provider ID: 206355

Provider Gender: Male

License Number: A108228

NPI: 1629277322

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
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 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 206355

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N



Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

D2. 主治医生名录

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

 Website: www.fhcsd.org

Email:


MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


DORUELO, ASHLEY

Provider ID: 206355

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Provider Gender: Female
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


HANLEY, LAUREN

Provider ID: 206355

Provider Gender: Female

License Number: C174771

NPI: 1053392035

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Provider Gender: Female
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206355

License Number: C174771

NPI: 1053392035

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No

Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

 251 LANDIS AVE
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 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA


Provider ID: 206355

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

D2. 主治医生名录

CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
CHULA VISTA FAMILY HLTH
CTR

251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619)
515-2500
Website: www.fhcsd.org

Email:
MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206355
Provider Gender: Female
License Number: A72005
NPI: 1649208711
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No

Family Health Centers of San
Diego
CHULA VISTA FAMILY HLTH
CTR

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Email:
MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206355
Provider Gender: Female
License Number: A116680
NPI: 1700073962
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
CHULA VISTA FAMILY HLTH
CTR
251 LANDIS AVE

CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619)
515-2500
Website: www.fhcsd.org
Email:
MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206355
Provider Gender: Female
License Number: A116680
NPI: 1700073962
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
CHULA VISTA FAMILY HLTH
CTR
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619)
515-2500
Website: www.fhcsd.org

D2. 主治医生名录

Email:

MARTHAO@FHCSO.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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



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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

[/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 206355

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s) Spoken: Hindi


Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org

Email:


MARTHAO@FHCSO.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

Provider ID: 427322

Provider Gender: Male

License Number: A47906

NPI: 1437181922

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, BAKERSFIELD

MEMORIAL HOSP, SHARP

MEMORIAL HOSPITAL,

Adventist Health Bakersfield,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, KERN MEDICAL

CENTER, KERN MEDICAL


CENTER

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

Provider ID: 427322

Provider Gender: Male

License Number: A47906

NPI: 1437181922

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, BAKERSFIELD

MEMORIAL HOSP, SHARP

MEMORIAL HOSPITAL,

Adventist Health Bakersfield,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, KERN MEDICAL

CENTER, KERN MEDICAL

CENTER

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org

D2. 主治医生名录

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 206355

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:


MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI

Provider ID: 427322

Provider Gender: Male

License Number: G59670

NPI: 1902993660

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP


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


CHULA VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: [www.syhealth.org
/clinics/chula- vista- medic
al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI

Provider ID: 427322

Provider Gender: Male

License Number: G59670

NPI: 1902993660

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP


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


CHULA VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: [www.syhealth.org
/clinics/chula- vista- medic
al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SHORT, ABIADÉ

Provider ID: 427322

Provider Gender: Male

License Number: A114893

NPI: 1750559589

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

D2. 主治医生名录


CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medic-al-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

SHORT, ABIADÉ

Provider ID: 427322
Provider Gender: Male
License Number: A114893
NPI: 1750559589
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

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

al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206355
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San Diego
CHULA VISTA FAMILY HLTH CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER



OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206355
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San Diego
CHULA VISTA FAMILY HLTH CTR
 251 LANDIS AVE
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 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER


Provider ID: 427322
Provider Gender: Female
License Number: 20A8204
NPI: 1053407593
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA

D2. 主治医生名录

MED CTR



Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA



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


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER

Provider ID: 427322
Provider Gender: Female
License Number: 20A8204
NPI: 1053407593
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA


 678 3RD AVE
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 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206355
Provider Gender: Male
License Number: G78814
NPI: 1699790634
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
CHULA VISTA FAMILY HLTH
CTR
 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500
 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206355
Provider Gender: Male
License Number: G78814
NPI: 1699790634
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
CHULA VISTA FAMILY HLTH
CTR
 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500
 Website: www.fhcsd.org
Email:
MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

D2. 主治医生名录

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY

PAPASTERGIU, GEORGIOS

Provider ID: 427322

Provider Gender: Male

License Number: A127706

NPI: 1790054393

Provider English Spoken: Y


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


Cultural Competency: N


Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY

PAPASTERGIU, GEORGIOS

Provider ID: 427322

Provider Gender: Male

License Number: A127706

NPI: 1790054393

Provider English Spoken: Y


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


Cultural Competency: N


Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY

PONS, MAURICIO

Provider ID: 427322

Provider Gender: Male

License Number: A87650

NPI: 1376723759

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, EL
CENTRO REGIONAL MEDICAL
CENTER, SHARP MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

PONS, MAURICIO

Provider ID: 427322

Provider Gender: Male

License Number: A87650

NPI: 1376723759

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

D2. 主治医生名录

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL



Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*


OPHTHALMOLOGY

SKAF, AYHAM

Provider ID: 427322
Provider Gender: Male
License Number: A120584
NPI: 1285888628
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, Spanish*
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL





Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA




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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

OPHTHALMOLOGY






SKAF, AYHAM

Provider ID: 427322
Provider Gender: Male
License Number: A120584
NPI: 1285888628
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, Spanish*
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA
 678 3RD AVE
CHULA VISTA, CA 91910
 *Phone: (619) 662-4100*


 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org /clinics/chula- vista- medic al- plaza*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

AKASHI, MARC

Provider ID: 163322
Provider Gender: Male
NPI: 1205002417
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
MARC K AKASHI
 769 MEDICAL CENTER CT
STE 300
CHULA VISTA, CA 91911
 *Phone: (619) 482-3090*
Fax: (619) 482-7350
 *After Hours Phone: (619) 482-3090*
 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

D2. 主治医生名录

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ATIENZA, PAMELA

Provider ID: 106987

Provider Gender: Female

NPI: 1417916107

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Tagalog*

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR


Board Certified Specialty: No

Rady Childrens Health Network

PAMELA V ATIENZA

 *890 EASTLAKE PKWY STE 200*

CHULA VISTA, CA 91914

 *Phone: (619) 656-6817*

Fax: (619) 656-6908

 *After Hours Phone: (619) 506-1218*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

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

PEDIATRICS

BARBADILLO, FERDINAND

Provider ID: 70456

Provider Gender: Male

NPI: 1982662193

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish, Tagalog
Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR


Board Certified Specialty: No

Rady Childrens Health Network

FERDINAND F BARBADILLO

 *890 EASTLAKE PKWY STE 200*

CHULA VISTA, CA 91914

 *Phone: (619) 656-6817*

Fax: (619) 656-6908

 *After Hours Phone: (619) 656-6817*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

BROUDY, ABRAHAM

Provider ID: 109328

Provider Gender: Male

NPI: 1528039526

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO, SHARP

CHULA VISTA MED CTR,


SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network

ABRAHAM E BROUDY

 *2440 FENTON ST STE 100*
CHULA VISTA, CA 91914

 *Phone: (619) 656-3040*
Fax: (619) 656-3045

 *After Hours Phone: (619) 656-3040*


 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


CAPETANAKIS, ELENI

Provider ID: 89610

Provider Gender: Female

NPI: 1346211554

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Greek, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SHARP MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL, SHARP CHULA


VISTA MED CTR

Board Certified Specialty: Yes

Rady Childrens Health Network

ELENI I CAPETANAKIS

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

 *Phone: (619) 426-7910*

Fax: (619) 426-2337

 *After Hours Phone: (619) 426-7910*

 *Website: N/A*

D2. 主治医生名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CORDOBA, MIGUEL

Provider ID: 88187

Provider Gender: Male

NPI: 1053382176

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,

SHARP CHULA VISTA MED

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO,

SCRIPPS MERCY HOSPITAL


CHULA VISTA, SCRIPPS MERCY


HOSPITAL

Board Certified Specialty: No


Rady Childrens Health Network


MIGUEL A CORDOBA

 865 3RD AVE STE 101
CHULA VISTA, CA 91911

 Phone: (619) 426-7910

Fax: (619) 426-2337

 After Hours Phone: (619)
426-7910

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

DONG, TAMMY

Provider ID: 427322

Provider Gender: Female

License Number: A66903

NPI: 1386655413

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

DONG, TAMMY

Provider ID: 427322

Provider Gender: Female

License Number: A66903

NPI: 1386655413

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

DORINGO, ELAINIE

Provider ID: 267100

Provider Gender: Female

NPI: 1013005636

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ALVARADO

HOSPITAL LLC, RADY

CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SHARP CHULA VISTA MED

CTR, UCSD LA JOLLA JOHN

SALLY THORNTON, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network

ELAINIE D DORINGO

 865 3RD AVE STE 101

D2. 主治医生名录

CHULA VISTA, CA 91911

Phone: (619) 426-7910

Fax: (619) 426-2337

After Hours Phone: (619) 426-7910

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

FLETCHER, EMILY

Provider ID: 232312

Provider Gender: Female

NPI: 1780935940

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
MERCY HOSPITAL

BAKERSFIELD, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS MERCY HOSPITAL,

UCSF BENIOFF CHILDREN'S
HOSPITAL OAKLAND

Board Certified Specialty: No
Rady Childrens Health Network

EMILY E FLETCHER

2440 FENTON ST STE 100
CHULA VISTA, CA 91914

Phone: (619) 656-3040

Fax: (619) 656-3045

After Hours Phone: (619) 656-3040

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

FLORES, ERNEST

Provider ID: 658652

Provider Gender: Male

NPI: 1043848807

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Rady Childrens Health Network

ERNEST A FLORES

865 3RD AVE STE 101
CHULA VISTA, CA 91911

Phone: (619) 426-7910

Fax: (619) 426-2337

After Hours Phone: (619) 426-7910

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

PEDIATRICS

FRESNO, BLANCA

Provider ID: 102434

Provider Gender: Female

NPI: 1346258787

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog
Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

Rady Childrens Health Network
BLANCA I FRESNO

1741 EASTLAKE PKWY STE
107

CHULA VISTA, CA 91915

Phone: (619) 482-1700

Fax: (619) 475-4578

After Hours Phone: (619) 482-1700

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GARCIA, CARLOS

Provider ID: 64734

Provider Gender: Male

NPI: 1417959370

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, RADY

CHILDRENS HOSPITAL SAN

DIEGO

Board Certified Specialty: No

Rady Childrens Health Network

D2. 主治医生名录

CARLOS M GARCIA

1392 E PALOMAR ST STE 501

CHULA VISTA, CA 91913

Phone: (619) 271-4059

Fax: (619) 271-7451

After Hours Phone: (619) 271-4059

Website: N/A

Email:

HERITAGEPARKPEDIATRICS@YAHOO.COM

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

F 8:30AM-5:00PM

PEDIATRICS

GARCIA, RAFAEL

Provider ID: 360408

Provider Gender: Male

NPI: 1053414086

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO

Board Certified Specialty: No

Rady Childrens Health Network

RAFAEL A GARCIA

752 MEDICAL CENTER CT STE 210

CHULA VISTA, CA 91911

Phone: (619) 656-0206

Fax: (619) 656-8936

After Hours Phone: (619) 656-0206

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GHAHREMANI, SIMIN

Provider ID: 664445

Provider Gender: Female

License Number: C51110

NPI: 1508904657

Provider English Spoken: Y

Provider Language(s)

Spoken: Faroese, Farsi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH

BAY PEDIATRICS

280 E ST

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GHAHREMANI, SIMIN

Provider ID: 664445

Provider Gender: Female

License Number: C51110

NPI: 1508904657

Provider English Spoken: Y

Provider Language(s)

Spoken: Faroese, Farsi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH

BAY PEDIATRICS

280 E ST

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS



GHAHREMANI, SIMIN

Provider ID: 634787

Provider Gender: Female

NPI: 1508904657


D2. 主治医生名录



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Faroese, Farsi
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR, SCRIPPS MERCY
HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
SIMIN MOOSAVI
GHAHREMANI




 280 E ST
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (619) 662-4196
 After Hours Phone: (619)
662-4100
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

HOLLICK, NATALIE



Provider ID: 473802
Provider Gender: Female
NPI: 1558716845
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: Yes
Rady Childrens Health Network
NATALIE V HOLLICK

 865 3RD AVE STE 101
CHULA VISTA, CA 91911
 Phone: (619) 426-7910

Fax: (619) 426-2337
 After Hours Phone: (619)
426-7910
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ISAIAS, AGNELA

Provider ID: 664445
Provider Gender: Female
License Number: A82912
NPI: 1790772572
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC,
SHARP CORONADO HOSP
AND HEALTHCARE CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SOUTH
BAY PEDIATRICS



 280 E ST
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (619) 426-2170
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):


N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

ISAIAS, AGNELA

Provider ID: 664445
Provider Gender: Female
License Number: A82912
NPI: 1790772572

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC,
SHARP CORONADO HOSP
AND HEALTHCARE CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SOUTH
BAY PEDIATRICS

 280 E ST
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (619) 426-2170
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

JACOBS-KLEISLI, MILAGROS

Provider ID: 467596
Provider Gender: Female

D2. 主治医生名录

NPI: 1811221641

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO, HUNTINGTON
MEMORIAL HOSPITAL, USC
Arcadia Hospital

Board Certified Specialty: No
Rady Childrens Health Network
MILAGROS J JACOBS-KLEISLI

769 MEDICAL CENTER CT
STE 300

CHULA VISTA, CA 91911

Phone: (619) 482-3090

Fax: (619) 482-7350

After Hours Phone: (619)
482-3090

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

KORSAND, SID

Provider ID: 664445

Provider Gender: Male

License Number: A49591

NPI: 1588634513

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Persian,
Turkish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SOUTH
BAY PEDIATRICS

280 E ST
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

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

Min/Max Age: 0\21

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

KORSAND, SID

Provider ID: 634788

Provider Gender: Male

NPI: 1588634513

Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Persian,
Turkish

Cultural Competency: N

Board Certified Specialty: No
Rady Childrens Health Network
SID S KORSAND

280 E ST
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 662-4196

After Hours Phone: (619)
662-4100

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

KORSAND, SID

Provider ID: 664445

Provider Gender: Male

License Number: A49591

NPI: 1588634513

Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Persian,
Turkish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SOUTH
BAY PEDIATRICS

280 E ST
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

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

Min/Max Age: 0\21

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MCMAHON, SHARON

Provider ID: 648721

Provider Gender: Female

NPI: 1487279246

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

D2. 主治医生名录

Rady Childrens Health Network

SHARON L MCMAHON

865 THIRD AVE STE 101
CHULA VISTA, CA 91911

Phone: (619) 426-7910

Fax: (619) 426-2337

After Hours Phone: (619)
426-7910

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

MISTRY, CHETAN

Provider ID: 86439

Provider Gender: Male

NPI: 1467505834

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL
CHULA VISTA, RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network

CHETAN A MISTRY

2440 FENTON ST STE 100
CHULA VISTA, CA 91914

Phone: (619) 656-3040

Fax: (619) 656-3045

After Hours Phone: (619)
656-3040

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MOSQUERA, DIANA

Provider ID: 371232

Provider Gender: Female

NPI: 1144238098

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

Rady Childrens Health Network

DIANA I MOSQUERA

769 MEDICAL CENTER CT
STE 300

CHULA VISTA, CA 91911

Phone: (619) 482-3090

Fax: (619) 482-7350

After Hours Phone: (619)
482-3090

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MOSQUERA, DIANA

Provider ID: 463001

Provider Gender: Female

NPI: 1144238098

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

Rady Childrens Health Network

DIANA I MOSQUERA

865 3RD AVE STE 101
CHULA VISTA, CA 91911

Phone: (619) 426-7910

After Hours Phone: (619)
426-7910

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

NGUYEN, TRUC

Provider ID: 78518

Provider Gender: Female

NPI: 1881884054

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR, RADY CHILDRENS

D2. 主治医生名录

HOSPITAL SAN DIEGO,
WASHINGTON HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
TRUC H NGUYEN

2440 FENTON ST STE 100
CHULA VISTA, CA 91914

Phone: (619) 656-3040

Fax: (619) 656-3045

After Hours Phone: (619)
656-3040

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

OIRA, VICTORIA

Provider ID: 73140

Provider Gender: Female

NPI: 1134172448

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

Rady Childrens Health Network

VICTORIA R OIRA

890 EASTLAKE PKWY STE
203

CHULA VISTA, CA 91914

Phone: (619) 656-3020

Fax: (619) 656-3019

After Hours Phone: (619)

370-6661

Website: N/A

Email:

VICKYODAN@HOTMAIL.COM

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-4:30PM

PEDIATRICS

PIANSAY, MARIACORAZON

Provider ID: 427322

Provider Gender: Female

License Number: A93785

NPI: 1669680351

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

PIANSAY, MARIACORAZON

Provider ID: 427322

Provider Gender: Female

License Number: A93785

NPI: 1669680351

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

ROWHANI, NAGHMEH

Provider ID: 664445

Provider Gender: Female

D2. 主治医生名录

License Number: A92037

NPI: 1992876759

Provider English Spoken: Y

Provider Language(s)
Spoken: Persian

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH
BAY PEDIATRICS

280 E ST

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ROWHANI, NAGHMEH

Provider ID: 664445

Provider Gender: Female

License Number: A92037

NPI: 1992876759

Provider English Spoken: Y

Provider Language(s)
Spoken: Persian

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH
BAY PEDIATRICS

280 E ST

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

SALAZAR, JUANITA

Provider ID: 206355

Provider Gender: Female

License Number: A78355

NPI: 1912938325

Provider English Spoken: Y

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

251 LANDIS AVE

CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SALAZAR, JUANITA

Provider ID: 206355

Provider Gender: Female

License Number: A78355

NPI: 1912938325

Provider English Spoken: Y

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

251 LANDIS AVE

CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SANTIAGO, ROXANE

D2. 主治医生名录

Provider ID: 269279

Provider Gender: Female

NPI: 1033461801

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SHARP CHULA VISTA

MED CTR, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS MEMORIAL

HOSPITAL, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network

ROXANE M SANTIAGO

865 3RD AVE STE 101

CHULA VISTA, CA 91911

Phone: (619) 426-7910

Fax: (619) 426-2337

After Hours Phone: (619)

426-7910

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

SHETH, HASMUKH

Provider ID: 427322

Provider Gender: Male

License Number: A45942

NPI: 1396812236

Provider English Spoken: Y

Provider Language(s)

Spoken: Gujarati, Hindi,
Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

Website: www.syhealth.org

/clinics/chula- vista- medic
al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SHETH, HASMUKH

Provider ID: 427322

Provider Gender: Male

License Number: A45942

NPI: 1396812236

Provider English Spoken: Y

Provider Language(s)

Spoken: Gujarati, Hindi,
Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

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Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

Website: www.syhealth.org

/clinics/chula- vista- medic
al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

VALENCIA, MARILES

Provider ID: 104059

Provider Gender: Female

NPI: 1275541625

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, PARADISE VALLEY

HOSPITAL, SHARP CHULA

VISTA MED CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network

MARILES F VALENCIA

1741 EASTLAKE PKWY STE

107

D2. 主治医生名录

CHULA VISTA, CA 91915

☎ Phone: (619) 482-1700

Fax: (619) 475-4578

📞 After Hours Phone: (619)
482-1700

🌐 Website: N/A

Email:

PEDIATRICSINPARADISE@YAHOO.COM

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

YAO, CATHERINE

Provider ID: 371204

Provider Gender: Female

NPI: 1801166442

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

Rady Childrens Health Network

CATHERINE S YAO

📍 769 MEDICAL CENTER CT
STE 300

CHULA VISTA, CA 91911

☎ Phone: (619) 482-3090

Fax: (619) 482-7350

📞 After Hours Phone: (619)
482-3090

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ZARGAR, SHABNAM

Provider ID: 371075

Provider Gender: Female

NPI: 1417256074

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, DESERT
REGIONAL MED CTR, JOHN F
KENNEDY MEMORIAL HOSP,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Board Certified Specialty: No

Rady Childrens Health Network

SHABNAM ZARGAR

📍 769 MEDICAL CENTER CT
STE 300

CHULA VISTA, CA 91911

☎ Phone: (619) 482-3090

Fax: (619) 482-7350

📞 After Hours Phone: (619)
482-3090

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

BALDONADO, ANALICIA

Provider ID: 417641

Provider Gender: Female

License Number: PA61683

NPI: 1215477765

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-RICE FAM HC

📍 352 L ST

CHULA VISTA, CA 91911

☎ Phone: (619) 515-2325

📞 After Hours Phone: (619)
515-2325

🌐 Website: www.fhcsd.org

Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

BALDONADO, ANALICIA

Provider ID: 417641

Provider Gender: Female

License Number: PA61683

NPI: 1215477765

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-RICE FAM HC

D2. 主治医生名录

 352 L ST
CHULA VISTA, CA 91911
 Phone: (619) 515-2325
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 Website: www.fhcsd.org
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT


INDA, PRISCILLA


Provider ID: 427322

Provider Gender: Female

License Number: PA54404

NPI: 1679008379

 Provider English Spoken: Y

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT


INDA, PRISCILLA


Provider ID: 427322

Provider Gender: Female

License Number: PA54404

NPI: 1679008379

 Provider English Spoken: Y

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

MENDEZ, JESUS

Provider ID: 427322

Provider Gender: Male

License Number: PA13796

NPI: 1023202108

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

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 Phone: (619) 662-4100

 After Hours Phone: (619)
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 Website: www.syhealth.org/clinics/chula-vista-medic-al-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

MENDEZ, JESUS

Provider ID: 427322

Provider Gender: Male

License Number: PA13796

NPI: 1023202108

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

D2. 主治医生名录

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

QUICK, ELISABETH

Provider ID: 206355
Provider Gender: Female
License Number: PA21591
NPI: 1790055010
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
CHULA VISTA FAMILY HLTH CTR
 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
Email: MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER



PHYSICIANS ASSISTANT

QUICK, ELISABETH

Provider ID: 206355
Provider Gender: Female
License Number: PA21591
NPI: 1790055010
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
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 Website: www.fhcsd.org
Email: MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

REVELES, DIANA

Provider ID: 417641
Provider Gender: Female
License Number: PA19306
NPI: 1548455405
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

 352 L ST
CHULA VISTA, CA 91911
 Phone: (619) 515-2325
 After Hours Phone: (619) 515-2325
 Website: www.fhcsd.org
Email: chantalt@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


REVELES, DIANA

Provider ID: 417641
Provider Gender: Female
License Number: PA19306
NPI: 1548455405
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-RICE FAM HC
 352 L ST
CHULA VISTA, CA 91911
 Phone: (619) 515-2325
 After Hours Phone: (619) 515-2325
 Website: www.fhcsd.org
Email: chantalt@fhcsd.org
Medi-Cal Open Panel: Yes

D2. 主治医生名录

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PODIATRIST


MANCHEL, BRUCE

Provider ID: 427322

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP


CORONADO HOSP AND


HEALTHCARE CTR


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PODIATRIST


MANCHEL, BRUCE

Provider ID: 427322

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP


CORONADO HOSP AND


HEALTHCARE CTR


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PODIATRIST


SCHNEIDER, SARAH

Provider ID: 206355

Provider Gender: Female

License Number: DPM4819

NPI: 1326282237

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San

Diego

CHULA VISTA FAMILY HLTH

CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 206355

Provider Gender: Female

License Number: DPM4819

NPI: 1326282237


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San

Diego

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 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

D2. 主治医生名录

 *Accessibility: CONTACT PROVIDER*

REGISTERED NURSE LICENSED

VOCATIONAL NURSE

QUILALANG, SUSAN

Provider ID: 427322

Provider Gender: Female


License Number: RN371480

NPI: 1841200482


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

REGISTERED NURSE LICENSED

VOCATIONAL NURSE

QUILALANG, SUSAN

Provider ID: 427322

Provider Gender: Female


License Number: NP5579

NPI: 1841200482


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

REGISTERED NURSE LICENSED

VOCATIONAL NURSE

QUILALANG, SUSAN

Provider ID: 427322

Provider Gender: Female


License Number: RN371480

NPI: 1841200482


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA VISTA

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 *Phone: (619) 662-4100*

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

REGISTERED NURSE LICENSED

VOCATIONAL NURSE

QUILALANG, SUSAN

Provider ID: 427322

Provider Gender: Female


License Number: NP5579

NPI: 1841200482


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

REGISTERED PHYSICAL

THERAPIST

AMAYA, RICARDO

Provider ID: 206355

Provider Gender: Male

License Number: PT37189

NPI: 1437445566


Provider English Spoken: Y
Cultural Competency: N


D2. 主治医生名录


Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

AMAYA, RICARDO

Provider ID: 206355

Provider Gender: Male

License Number: PT37189


NPI: 1437445566


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

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

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST


CUMMINGS, GEORGE

Provider ID: 206355

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

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 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE

Provider ID: 206355

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

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 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

GEORGE, JENNIFER

Provider ID: 206355

Provider Gender: Female

License Number: PT294245

NPI: 1215402177

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

D2. 主治医生名录

Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

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Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

REGISTERED PHYSICAL THERAPIST

GEORGE, JENNIFER

Provider ID: 206355

Provider Gender: Female

License Number: PT294245

NPI: 1215402177

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

251 LANDIS AVE
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Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

REGISTERED PHYSICAL THERAPIST

GONZALES, MICHELLE

Provider ID: 206355

Provider Gender: Female

License Number: PT291706

NPI: 1548714652

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

GONZALES, MICHELLE

Provider ID: 206355

Provider Gender: Female

License Number: PT291706

NPI: 1548714652

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

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Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

Provider ID: 206355

Provider Gender: Male

License Number: PT293536

NPI: 1043736879


Provider English Spoken: Y
Cultural Competency: N


D2. 主治医生名录


Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500


 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

Provider ID: 206355

Provider Gender: Male

License Number: PT293536


NPI: 1043736879


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

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 Phone: (619) 515-2500

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 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST


RODRIGUEZ, CASSANDRA

Provider ID: 206355

Provider Gender: Female

License Number: PT292823

NPI: 1770025595

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

RODRIGUEZ, CASSANDRA

Provider ID: 206355

Provider Gender: Female

License Number: PT292823

NPI: 1770025595

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
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 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

RHEUMATOLOGY

REDDY, DANA


Provider ID: 427322

Provider Gender: Female

License Number: A115598

NPI: 1144538778

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,

D2. 主治医生名录

SCRIPPS MERCY HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

RHEUMATOLOGY


REDDY, DANA

Provider ID: 427322

Provider Gender: Female

License Number: A115598

NPI: 1144538778

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL
ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP
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 Phone: (619) 662-4100
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 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

SPEECH PATHOLOGIST


CABADING, DOREEN

Provider ID: 427322

Provider Gender: Female

License Number: SP18192

NPI: 1043507585

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SPEECH PATHOLOGIST

CABADING, DOREEN

Provider ID: 427322

Provider Gender: Female

License Number: SP18192

NPI: 1043507585

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA


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662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

EL CAJON

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 569910

Provider Gender: Female

D2. 主治医生名录

License Number: C52581

NPI: 1053300251

Provider English Spoken: Y

Provider Language(s)
Spoken: Cambodian, Hindi,
Spanish, Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL
CAJON

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

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

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 569910

Provider Gender: Female

License Number: C52581

NPI: 1053300251

Provider English Spoken: Y

Provider Language(s)
Spoken: Cambodian, Hindi,
Spanish, Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

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662-4100

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

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

BELEN, NEZER

Provider ID: 418340

Provider Gender: Male

License Number: NP95009292

NPI: 1386120723

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

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

CERTIFIED NURSE

PRACTITIONER

BELEN, NEZER

Provider ID: 418340

Provider Gender: Male

License Number: NP95009292

NPI: 1386120723

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
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Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE

PRACTITIONER

DRISCOLL, SUSAN

Provider ID: 569910

Provider Gender: Female

License Number: NP95012943

NPI: 1477755684

Provider English Spoken: Y
 Provider Language(s)

D2. 主治医生名录





Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON


 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

DRISCOLL, SUSAN

Provider ID: 569910
Provider Gender: Female
License Number: NP95012943
NPI: 1477755684
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

GARCIA, JOHNNY

Provider ID: 418340
Provider Gender: Male
License Number: NP95007000
NPI: 1932622156
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

HAMID, WAHIDA

Provider ID: 569910
Provider Gender: Female
License Number: NP95001707
NPI: 1164812293
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Persian, Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

Provider ID: 418340
Provider Gender: Male
License Number: NP95007000
NPI: 1932622156
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
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Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

Provider ID: 569910
Provider Gender: Female
License Number: NP95001707
NPI: 1164812293
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Persian, Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

D2. 主治医生名录

SAN YSIDRO HEALTH EL CAJON


 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HAMID, WAHIDA


Provider ID: 569910
Provider Gender: Female
License Number: NP95001707
NPI: 1164812293
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Persian, Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP






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EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER


HARPEL, SHERYL

Provider ID: 569910
Provider Gender: Female
License Number: NP95009329
NPI: 1780177147
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

HARPEL, SHERYL


Provider ID: 569910
Provider Gender: Female
License Number: NP95009329
NPI: 1780177147
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL





CAJON

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 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

JENSEN, ADRIENNE

Provider ID: 569910
Provider Gender: Female
License Number: NP95023148
NPI: 1184389934
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

D2. 主治医生名录

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

JENSEN, ADRIENNE

Provider ID: 569910

Provider Gender: Female

License Number: NP95023148

NPI: 1184389934

Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL
CAJON

 *875 EL CAJON BLVD*
EL CAJON, CA 92020

 *Phone: (619) 662-4100*

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


 *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

KELLOGG, KRISTEN

Provider ID: 418340

Provider Gender: Female

License Number: NP95009180

NPI: 1649757741

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 *525 E MAIN ST*
EL CAJON, CA 92020

 *Phone: (619) 515-2498*

 *After Hours Phone: (619)*
515-2498

 *Website: www.fhcsd.org*

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

KELLOGG, KRISTEN

Provider ID: 418340

Provider Gender: Female

License Number: NP95009180

NPI: 1649757741

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

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515-2498

 *Website: www.fhcsd.org*

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

LEONARD, BEVERLY

Provider ID: 206354

Provider Gender: Female

License Number: NP10943

NPI: 1285772392

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

 *1111 W CHASE AVE*
EL CAJON, CA 92020

 *Phone: (619) 515-2499*

 *After Hours Phone: (619)*
515-2499

 *Website: www.fhcsd.org*

Email: jaquelin@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

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

D2. 主治医生名录

CERTIFIED NURSE **PRACTITIONER**

LEONARD, BEVERLY

Provider ID: 206354

Provider Gender: Female

License Number: NP10943

NPI: 1285772392

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

 1111 W CHASE AVE

EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619)
515-2499

 Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE **PRACTITIONER**

LU, TAMMY

Provider ID: 206354

Provider Gender: Female

License Number: NP95007253

NPI: 1457879132

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego


CHASE AVENUE FAMILY
HEALTH CTRS INC

 1111 W CHASE AVE

EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619)
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 Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
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 Accessibility: CONTACT
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CERTIFIED NURSE **PRACTITIONER**

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Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE **PRACTITIONER**

MANGENE, CYNTHIA

Provider ID: 206354

Provider Gender: Female

License Number: NP6782

NPI: 1548292626

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

 1111 W CHASE AVE

EL CAJON, CA 92020

 Phone: (619) 515-2499

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 Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE **PRACTITIONER**

MANGENE, CYNTHIA


Provider ID: 206354




Provider Gender: Female

License Number: NP6782


NPI: 1548292626

D2. 主治医生名录

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
CHASE AVENUE FAMILY
HEALTH CTRS INC

 1111 W CHASE AVE
EL CAJON, CA 92020
 *Phone: (619) 515-2499*
 *After Hours Phone: (619) 515-2499*

 *Website: www.fhcsd.org*
Email: jaquelin@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

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




CERTIFIED NURSE



PRACTITIONER

OCHOA, ERLINDA

Provider ID: 418501
Provider Gender: Female
License Number: NP4430
NPI: 1346437464

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021
 *Phone: (619) 795-5991*
 *After Hours Phone: (619)*



795-5991
 *Website: www.lamaestra.org*
9
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM





CERTIFIED NURSE


PRACTITIONER

OCHOA, ERLINDA

Provider ID: 418501
Provider Gender: Female
License Number: NP4430
NPI: 1346437464

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021
 *Phone: (619) 795-5991*
 *After Hours Phone: (619) 795-5991*
 *Website: www.lamaestra.org*
9



Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER


OCHOA, ERLINDA

Provider ID: 185267
Provider Gender: Female
License Number: NP4430
NPI: 1346437464

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 165 S 1ST ST
EL CAJON, CA 92019
 *Phone: (619) 312-0347*
 *After Hours Phone: (619) 312-0347*
 *Website: www.lamaestra.org*
9
Email:

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

OCHOA, ERLINDA

Provider ID: 185267
Provider Gender: Female
License Number: NP4430
NPI: 1346437464

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

D2. 主治医生名录

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
**LA MAESTRA FAMILY CLINIC
INC**
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619)
312-0347
Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

Provider ID: 418340
Provider Gender: Female
License Number: NP95000205
NPI: 1063835692
Provider English Spoken: Y
Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified Specialty: No
*Family Health Centers of San
Diego*
**FAMILY HLTH CTR SAN
DIEGO-EL CAJON**
525 E MAIN ST

EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619)
515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

Provider ID: 418340
Provider Gender: Female
License Number: NP95000205
NPI: 1063835692
Provider English Spoken: Y
Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified Specialty: No
*Family Health Centers of San
Diego*
**FAMILY HLTH CTR SAN
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Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

Provider ID: 418340
Provider Gender: Female
License Number: RN810863
NPI: 1063835692
Provider English Spoken: Y
Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified Specialty: No
*Family Health Centers of San
Diego*
**FAMILY HLTH CTR SAN
DIEGO-EL CAJON**
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515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR


Provider ID: 418340
Provider Gender: Female
License Number: RN810863
NPI: 1063835692
Provider English Spoken: Y
Provider Language(s)
Spoken: Amharic, Arabic

D2. 主治医生名录

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

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


 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

PRACTITIONER


REAL, MARIA


Provider ID: 185267

Provider Gender: Female

License Number: NP17328

NPI: 1548450471

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Catalan, German, Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No


La Maestra Family Clinic


LA MAESTRA FAMILY CLINIC INC

 165 S 1ST ST

EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619) 312-0347

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER


REAL, MARIA


Provider ID: 185267

Provider Gender: Female

License Number: NP17328

NPI: 1548450471

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Catalan, German, Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No

La Maestra Family Clinic

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aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

REGEV, SHANEE

Provider ID: 569910

Provider Gender: Female

License Number: NP95022460

NPI: 1477218121

 *Provider English Spoken: Y*

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH EL

CAJON

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

D2. 主治医生名录

PRACTITIONER

REGEV, SHANEE

Provider ID: 569910

Provider Gender: Female

License Number: NP95022460

NPI: 1477218121

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL

CAJON

875 EL CAJON BLVD

EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

REID, EMILY

Provider ID: 185267

Provider Gender: Female

License Number: NP95002766

NPI: 1083081467

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

165 S 1ST ST

EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

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Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

CERTIFIED NURSE

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Provider ID: 185267

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License Number: NP95002766

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Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

SMITH, SHARON

Provider ID: 418340

Provider Gender: Female

License Number: RN428876

NPI: 1780603597

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST

EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

SMITH, SHARON


Provider ID: 418340

Provider Gender: Female

License Number: NP15444

D2. 主治医生名录

NPI: 1780603597

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

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CERTIFIED NURSE

PRACTITIONER


SMITH, SHARON

Provider ID: 418340

Provider Gender: Female

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NPI: 1780603597

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 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

SWAN, MELANIE

Provider ID: 206354

Provider Gender: Female

License Number: NP95000818

NPI: 1871934414

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

 1111 W CHASE AVE
EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619)
515-2499

 Website: www.fhcsd.org


Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE

PRACTITIONER

SWAN, MELANIE


Provider ID: 206354

Provider Gender: Female

License Number: NP95000818

NPI: 1871934414

 Provider English Spoken: Y

 Provider Language(s)

D2. 主治医生名录

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

1111 W CHASE AVE
EL CAJON, CA 92020

Phone: (619) 515-2499

After Hours Phone: (619)
515-2499

Website: www.fhcsd.org
Email: jaquelin@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE

PRACTITIONER

**VERDUZCO GONZALEZ,
AURORA**

Provider ID: 185267

Provider Gender: Female

License Number: NP95001961

NPI: 1932452323

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

**VERDUZCO GONZALEZ,
AURORA**

Provider ID: 185267

Provider Gender: Female

License Number: NP95001961

NPI: 1932452323

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

**VILLANUEVADEGUTIE,
BERENICE**

Provider ID: 185267

Provider Gender: Female

License Number: NP95002188

NPI: 1952795536

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

D2. 主治医生名录

VILLANUEVADEGUTIE, BERENICE

Provider ID: 185267

Provider Gender: Female


License Number: NP95002188


NPI: 1952795536


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 165 S 1ST ST
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 After Hours Phone: (619)
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 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHA

Provider ID: 185267

Provider Gender: Female

License Number: NP95001840

NPI: 1063884864

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

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INC

 165 S 1ST ST

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 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHA

Provider ID: 185267

Provider Gender: Female

License Number: NP95001840

NPI: 1063884864


Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

La Maestra Family Clinic
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 Website: www.lamaestra.org

g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 418340

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D2. 主治医生名录

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 418340

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

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515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

CORRY, ANDREA

Provider ID: 418340

Provider Gender: Female

License Number: NM1721

NPI: 1255489571

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

CORRY, ANDREA

Provider ID: 418340

Provider Gender: Female

License Number: NM1721

NPI: 1255489571

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

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 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

HOURIHAN, KEITH

Provider ID: 418501

Provider Gender: Male

License Number: DC29314

NPI: 1306916994

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA CHC EL CAJON

BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5983

 After Hours Phone: (619)
795-5983

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

CHIROPRACTOR

HOURIHAN, KEITH

Provider ID: 418501


Provider Gender: Male





License Number: DC29314


NPI: 1306916994

Provider English Spoken: Y

D2. 主治医生名录


 *Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY*

 1032 BROADWAY
EL CAJON, CA 92021
 *Phone: (619) 795-5983*
 *After Hours Phone: (619)
795-5983*
 *Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM**


CHIROPRACTOR

SOSA, DAVID

*Provider ID: 206354
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
 *Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego**


*CHASE AVENUE FAMILY
HEALTH CTRS INC*

 1111 W CHASE AVE
EL CAJON, CA 92020
 *Phone: (619) 515-2499*
 *After Hours Phone: (619)
515-2499*
 *Website: www.fhcsd.org
Email: jaquelin@fhcsd.org*

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT
PROVIDER**

CHIROPRACTOR

SOSA, DAVID


*Provider ID: 206354
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
 *Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
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Min/Max Age: 0\150
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CHIROPRACTOR


SOSA, DAVID

*Provider ID: 418340
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
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License Number: DC33150
NPI: 1013308675
 *Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON**


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

 *Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes*

D2. 主治医生名录

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR


UY, ASHLEY


Provider ID: 418340

Provider Gender: Female

License Number: DC33869

NPI: 1174059760

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
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UY, ASHLEY


Provider ID: 418340

Provider Gender: Female

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NPI: 1174059760

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 Provider Language(s)
Spoken: Chinese

Cultural Competency: N


Board Certified Specialty: No


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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES


ISLAM, JULIE


Provider ID: 418340

Provider Gender: Female

License Number: A149552

NPI: 1750780516

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Bengali, Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

ENDOCRINOLOGY

METABOLISM DIABETES

ISLAM, JULIE


Provider ID: 418340

Provider Gender: Female

License Number: A149552

NPI: 1750780516

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Bengali, Spanish

Cultural Competency: N


Board Certified Specialty: No


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Min/Max Age: 0\150

American Sign Language (ASL):
N

D2. 主治医生名录

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

ENDOCRINOLOGY

METABOLISM DIABETES


NAGELBERG, JODI

Provider ID: 418340

Provider Gender: Female

License Number: A146838

NPI: 1720474141

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SAN

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

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

ENDOCRINOLOGY

METABOLISM DIABETES


NAGELBERG, JODI

Provider ID: 418340

Provider Gender: Female

License Number: A146838

NPI: 1720474141

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N


Board Certified Specialty: No


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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

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

FAMILY PRACTICE


AL ANI, NAJWAN


Provider ID: 418340

Provider Gender: Female

License Number: A144974

NPI: 1275948473

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Arabic*

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SAN

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

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

FAMILY PRACTICE

AL ANI, NAJWAN

Provider ID: 418340

Provider Gender: Female

License Number: A144974

NPI: 1275948473

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Arabic*

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SAN

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT*

D2. 主治医生名录

PROVIDER

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

FAMILY PRACTICE

ALGHAMDI, ASMA

Provider ID: 569910

Provider Gender: Female

License Number: A167529

NPI: 1316310840

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
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 Phone: (619) 662-4100
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662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ALGHAMDI, ASMA

Provider ID: 569910

Provider Gender: Female





License Number: A167529

NPI: 1316310840

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
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Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BAGINGITO, AUSTIN

Provider ID: 418340

Provider Gender: Male

License Number: A163977


NPI: 1942705637

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

BAGINGITO, AUSTIN

Provider ID: 418340

Provider Gender: Male






License Number: A163977

NPI: 1942705637

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Cultural Competency: N

Board Certified Specialty: No
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Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

BROWN, BRANDON

Provider ID: 418340

Provider Gender: Male

License Number: A148499

NPI: 1013399559

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

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

D2. 主治医生名录

DIEGO-EL CAJON

 525 E MAIN ST
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 Phone: (619) 515-2498
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515-2498

 Website: www.fhcsd.org


Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

SA 8:30AM-5:30PM

FAMILY PRACTICE


BROWN, BRANDON

Provider ID: 418340

Provider Gender: Male

License Number: A148499

NPI: 1013399559

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


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 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1447888284

N

 Accessibility: CONTACT
PROVIDER

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

SA 8:30AM-5:30PM

FAMILY PRACTICE

BRUHN, JOSHUA

Provider ID: 418340

Provider Gender: Male

License Number: A186694

NPI: 1447888284

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

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 Phone: (619) 515-2498

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 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

SA 8:30AM-5:30PM

FAMILY PRACTICE

BRUHN, JOSHUA

Provider ID: 418340

Provider Gender: Male

License Number: A186694

NPI: 1447888284

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

SA 8:30AM-5:30PM

FAMILY PRACTICE


CORMAN, DANIEL


Provider ID: 418340

Provider Gender: Male

License Number: 20A13060

NPI: 1629339593

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San

Diego




FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

D2. 主治医生名录

 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER








FAMILY PRACTICE

CORMAN, DANIEL

Provider ID: 418340
Provider Gender: Male
License Number: 20A13060
NPI: 1629339593
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER



FAMILY PRACTICE





DOMINGUEZ, DENNIS

Provider ID: 569910
Provider Gender: Male
License Number: G43179
NPI: 1225063811
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL CAJON
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE






DOMINGUEZ, DENNIS

Provider ID: 569910
Provider Gender: Male
License Number: G43179
NPI: 1225063811
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL CAJON
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 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

GORDON, CHRISTOPHER

Provider ID: 418340
Provider Gender: Male
License Number: A83390
NPI: 1477711521
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes

D2. 主治医生名录

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE


GORDON, CHRISTOPHER

Provider ID: 418340

Provider Gender: Male


License Number: A83390


NPI: 1477711521


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE


HASTANAN, CAROL

Provider ID: 206354

Provider Gender: Female


License Number: A110192


NPI: 1861648461


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

 1111 W CHASE AVE
EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619)
515-2499

 Website: www.fhcsd.org
Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


HASTANAN, CAROL

Provider ID: 206354

Provider Gender: Female


License Number: A110192


NPI: 1861648461


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

 1111 W CHASE AVE
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 Phone: (619) 515-2499

 After Hours Phone: (619)
515-2499

 Website: www.fhcsd.org
Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


HODGKIN, EDWARD

Provider ID: 418340

Provider Gender: Male


License Number: A177445


NPI: 1922619766


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

HODGKIN, EDWARD

Provider ID: 418340

Provider Gender: Male

License Number: A177445

D2. 主治医生名录


NPI: 1922619766


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE


KASAWA, JOHN


Provider ID: 569910

Provider Gender: Male

License Number: A79338

NPI: 1134230329

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL
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 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


KASAWA, JOHN


Provider ID: 569910

Provider Gender: Male

License Number: A79338

NPI: 1134230329

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

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

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MANDOYAN, AUSTIN

Provider ID: 418340

Provider Gender: Female

License Number: A161682

NPI: 1841726148


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Board Certified Specialty: No
Family Health Centers of San Diego

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DIEGO-EL CAJON

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:00AM-5:00PM

FAMILY PRACTICE

MANDOYAN, AUSTIN

Provider ID: 418340

Provider Gender: Female

License Number: A161682

NPI: 1841726148

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

D2. 主治医生名录

Board Certified Specialty: No
Family Health Centers of San Diego

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Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:00AM-5:00PM

FAMILY PRACTICE

NASSIR, BASSAM

Provider ID: 569910

Provider Gender: Male

License Number: A101888

NPI: 1386848166

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL CAJON

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

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

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

NASSIR, BASSAM

Provider ID: 569910

Provider Gender: Male

License Number: A101888

NPI: 1386848166

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

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Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

NAIAZI, HARRIS

Provider ID: 418340

Provider Gender: Male

License Number: A146111

NPI: 1174905871

Provider English Spoken: Y

Provider Language(s) Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

525 E MAIN ST
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Phone: (619) 515-2498

After Hours Phone: (619) 515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

NAIAZI, HARRIS

Provider ID: 418340

Provider Gender: Male

License Number: A146111

NPI: 1174905871

Provider English Spoken: Y

Provider Language(s) Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

525 E MAIN ST

D2. 主治医生名录

EL CAJON, CA 92020
☎ Phone: (619) 515-2498
🕒 After Hours Phone: (619) 515-2498
🌐 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

FAMILY PRACTICE

PUTRUS, RAMIZ

Provider ID: 664824
Provider Gender: Male
License Number: A68184
NPI: 1144300534
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC-REA AVE

📍 181 REA AVE
EL CAJON, CA 92020
☎ Phone: (619) 312-0347
🕒 After Hours Phone: (619) 312-0347
🌐 Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PUTRUS, RAMIZ

Provider ID: 664824
Provider Gender: Male
License Number: A68184
NPI: 1144300534
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC-REA AVE

📍 181 REA AVE
EL CAJON, CA 92020
☎ Phone: (619) 312-0347
🕒 After Hours Phone: (619) 312-0347
🌐 Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PUTRUS, RAMIZ

Provider ID: 185267
Provider Gender: Male
License Number: A68184
NPI: 1144300534
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

📍 165 S 1ST ST
EL CAJON, CA 92019
☎ Phone: (619) 312-0347
🕒 After Hours Phone: (619) 312-0347
🌐 Website: www.lamaestra.org
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PUTRUS, RAMIZ

Provider ID: 185267
Provider Gender: Male
License Number: A68184
NPI: 1144300534
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

📍 165 S 1ST ST
EL CAJON, CA 92019
☎ Phone: (619) 312-0347
🕒 After Hours Phone: (619) 312-0347
🌐 Website: www.lamaestra.org
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

D2. 主治医生名录

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


RODRIGUEZ, LOUIE

Provider ID: 418340

Provider Gender: Male

License Number: A176144

NPI: 1558823625

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE


RODRIGUEZ, LOUIE


Provider ID: 418340

Provider Gender: Male

License Number: A176144

NPI: 1558823625

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE


SALEM, RAMSEY

Provider ID: 569910

Provider Gender: Male

License Number: A158364

NPI: 1245401298

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL

CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SALEM, RAMSEY

Provider ID: 569910

Provider Gender: Male

License Number: A158364

NPI: 1245401298

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL

CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SCHUMAKER, EDWARD


Provider ID: 418501

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

D2. 主治医生名录

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY

1032 BROADWAY
EL CAJON, CA 92021

Phone: (619) 795-5991

After Hours Phone: (619)
795-5991

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

SCHUMAKER, EDWARD

Provider ID: 418501

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY

1032 BROADWAY
EL CAJON, CA 92021

Phone: (619) 795-5991

After Hours Phone: (619)
795-5991

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1184616872

N

Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

SCHUMAKER, EDWARD

Provider ID: 185267

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SCHUMAKER, EDWARD

Provider ID: 185267

Provider Gender: Male

License Number: 20A6433

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FQHC

CHASE AVENUE FAMILY HEALTH CTRS INC,

Provider ID: 206354

NPI: 1104861681

Provider English Spoken: Y

Cultural Competency: N

Family Health Centers of San
Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC


1111 W CHASE AVE
EL CAJON, CA 92020

Phone: (619) 515-2499

Fax: (619) 593-7164

After Hours Phone: (619)
515-2499

D2. 主治医生名录

 Website: www.fhcsd.org
Email: jaquelininc@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

FQHC

CHASE AVENUE FAMILY HEALTH CTRS INC,


Provider ID: 206354

NPI: 1104861681


 Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San
Diego

CHASE AVENUE FAMILY HEALTH CTRS INC


 1111 W CHASE AVE
EL CAJON, CA 92020

 Phone: (619) 515-2499
Fax: (619) 593-7164

 After Hours Phone: (619)
515-2499

 Website: www.fhcsd.org
Email: jaquelininc@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

FQHC

FAMILY HLTH CTR SAN DIEGO-EL CAJON,

Provider ID: 418340

NPI: 1932561198


 Provider English Spoken: Y

Cultural Competency: N
Family Health Centers of San
Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498
Fax: (619) 269-0191

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


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

FQHC

FAMILY HLTH CTR SAN DIEGO-EL CAJON,


Provider ID: 418340

NPI: 1932561198


 Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON


 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498
Fax: (619) 269-0191

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N


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

FQHC


LA MAESTRA CHC EL CAJON BROADWAY,


Provider ID: 418501


NPI: 1134590086

 Provider English Spoken: Y
Cultural Competency: N
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY


 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5991
Fax: (619) 795-5992

 After Hours Phone: (619)
795-5991

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

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

FQHC






LA MAESTRA CHC EL CAJON BROADWAY,

Provider ID: 418501





NPI: 1134590086

 Provider English Spoken: Y

D2. 主治医生名录

Cultural Competency: N
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON BROADWAY
 1032 BROADWAY
EL CAJON, CA 92021
 Phone: (619) 795-5991
Fax: (619) 795-5992
 After Hours Phone: (619) 795-5991
 Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC





LA MAESTRA CHC-REA AVE,
Provider ID: 664824
NPI: 1609849074
 Provider English Spoken: Y
Cultural Competency: N
La Maestra Family Clinic
LA MAESTRA CHC-REA AVE
 181 REA AVE
EL CAJON, CA 92020
 Phone: (619) 312-0347
Fax: (619) 510-4649
 After Hours Phone: (619) 312-0347
 Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER



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

FQHC

LA MAESTRA CHC-REA AVE,
Provider ID: 664824
NPI: 1609849074
 Provider English Spoken: Y
Cultural Competency: N
La Maestra Family Clinic
LA MAESTRA CHC-REA AVE
 181 REA AVE
EL CAJON, CA 92020
 Phone: (619) 312-0347
Fax: (619) 510-4649
 After Hours Phone: (619) 312-0347
 Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC

LA MAESTRA FAMILY CLINIC INC,
Provider ID: 185267
NPI: 1336353721
 Provider English Spoken: Y
Cultural Competency: N
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC
 165 S 1ST ST
EL CAJON, CA 92019
 Phone: (619) 312-0347
Fax: (619) 749-5480
 After Hours Phone: (619)

312-0347
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-TU 8:00AM-5:00PM
TH-F 8:00AM-5:00PM

FQHC

LA MAESTRA FAMILY CLINIC INC,
Provider ID: 185267
NPI: 1336353721
 Provider English Spoken: Y
Cultural Competency: N
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC
 165 S 1ST ST
EL CAJON, CA 92019
 Phone: (619) 312-0347
Fax: (619) 749-5480
 After Hours Phone: (619) 312-0347
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-TU 8:00AM-5:00PM

D2. 主治医生名录


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

FQHC

SAN YSIDRO HEALTH EL CAJON,

Provider ID: 569910

NPI: 1568845741


 Provider English Spoken: Y

Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100


Fax: (619) 785-3356

 After Hours Phone: (619)
662-4100

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

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH EL CAJON,

Provider ID: 569910

NPI: 1568845741


 Provider English Spoken: Y

Cultural Competency: N

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH EL CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

Fax: (619) 785-3356

 After Hours Phone: (619)
662-4100

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

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

HEPATOLOGY


GISH, ROBERT


Provider ID: 185267

Provider Gender: Male

License Number: G45632

NPI: 1548281322

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Dutch, French,
Spanish, Vietnamese


Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

HEPATOLOGY

GISH, ROBERT

Provider ID: 185267

Provider Gender: Male

License Number: G45632

NPI: 1548281322

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Dutch, French,
Spanish, Vietnamese


Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org


Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

INTERNAL MEDICINE

ALWASH, MUSTAFA

Provider ID: 418340

Provider Gender: Male

License Number: A160516



NPI: 1679936439

D2. 主治医生名录

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE







ALWASH, MUSTAFA


Provider ID: 418340
Provider Gender: Male
License Number: A160516
NPI: 1679936439
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No

Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE








AWDISHO, ALAN

Provider ID: 569910
Provider Gender: Male
License Number: 20A18702
NPI: 1164795498
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Assyrian, Syriac
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

AWDISHO, ALAN


Provider ID: 569910
Provider Gender: Male
License Number: 20A18702
NPI: 1164795498
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Assyrian, Syriac
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CARPENTERIII, ROBERT

Provider ID: 569910
Provider Gender: Male
License Number: 20A10964
NPI: 1356343040

D2. 主治医生名录


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 *Phone: (619) 662-4100*
 *After Hours Phone: (619)*
662-4100
 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER


INTERNAL MEDICINE

CARPENTERIII, ROBERT

Provider ID: 569910
Provider Gender: Male
License Number: 20A10964
NPI: 1356343040



 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 *Phone: (619) 662-4100*
 *After Hours Phone: (619)*
662-4100
 *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER


INTERNAL MEDICINE

DUONG, MAI

Provider ID: 418340
Provider Gender: Female
License Number: A127798
NPI: 1629339304
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Vietnamese
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020
 *Phone: (619) 515-2498*
 *After Hours Phone: (619)*
515-2498
 *Website: www.fhcsd.org*


Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

DUONG, MAI



Provider ID: 418340
Provider Gender: Female

License Number: A127798
NPI: 1629339304

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

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

 *Website: www.fhcsd.org*
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

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

INTERNAL MEDICINE

GORGES, RANDA

Provider ID: 418340
Provider Gender: Female
License Number: A138815
NPI: 1285079509

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON


D2. 主治医生名录

 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

GORGES, RANDA

Provider ID: 418340
Provider Gender: Female
License Number: A138815
NPI: 1285079509
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON






 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT

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

INTERNAL MEDICINE

JABRI, ZAIN

Provider ID: 418501
Provider Gender: Male
License Number: A160760
NPI: 1891159620
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: ST AGNES
MEDICAL CENTER, CITY OF
HOPE NATIONAL MED CTR,
JOHN F KENNEDY MEMORIAL
HOSP, SUTTER MEDICAL
CENTER SACRAMENTO,
PIONEERS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY






 1032 BROADWAY
EL CAJON, CA 92021
 Phone: (619) 795-5991
 After Hours Phone: (619)
795-5991
 Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT

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

INTERNAL MEDICINE

JABRI, ZAIN

Provider ID: 418501
Provider Gender: Male
License Number: A160760
NPI: 1891159620
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: ST AGNES
MEDICAL CENTER, CITY OF
HOPE NATIONAL MED CTR,
JOHN F KENNEDY MEMORIAL
HOSP, SUTTER MEDICAL
CENTER SACRAMENTO,
PIONEERS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021
 Phone: (619) 795-5991
 After Hours Phone: (619)
795-5991
 Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT

D2. 主治医生名录

PROVIDER

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

INTERNAL MEDICINE

MANSY, TAMARA

Provider ID: 569910

Provider Gender: Female


License Number: A164238


NPI: 1396277737

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020


 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

MANSY, TAMARA

Provider ID: 569910

Provider Gender: Female

License Number: A164238


NPI: 1396277737


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

MAY, LOUIS

Provider ID: 569910

Provider Gender: Male

License Number: A138568

NPI: 1720497514


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


Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

MAY, LOUIS

Provider ID: 569910

Provider Gender: Male

License Number: A138568

NPI: 1720497514


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


Cultural Competency: N


Hospital Affiliation:

EISENHOWER MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020


 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

MICHAEL, RAMI

Provider ID: 569910

Provider Gender: Male

License Number: A144513

NPI: 1467871673

Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

D2. 主治医生名录

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

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

Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

MICHAEL, RAMI

Provider ID: 569910
Provider Gender: Male
License Number: A144513
NPI: 1467871673

Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

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

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

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

NADI, FAHIMA

Provider ID: 418340
Provider Gender: Female
License Number: A175325
NPI: 1770072290

Provider English Spoken: Y
Provider Language(s)
Spoken: Pashto, Persian,
Urdu

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

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

Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

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

INTERNAL MEDICINE

NADI, FAHIMA

Provider ID: 418340

Provider Gender: Female

License Number: A175325
NPI: 1770072290

Provider English Spoken: Y
Provider Language(s)
Spoken: Pashto, Persian,
Urdu

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

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

Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

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

INTERNAL MEDICINE

NARAYAN, ARCHANA

Provider ID: 569910
Provider Gender: Female
License Number: A101773
NPI: 1003053950

Provider English Spoken: Y
Provider Language(s)
Spoken: Hindi, Kannada
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER
Board Certified Specialty: No

D2. 主治医生名录

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

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

Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

NARAYAN, ARCHANA

Provider ID: 569910

Provider Gender: Female

License Number: A101773

NPI: 1003053950

Provider English Spoken: Y
Provider Language(s)
Spoken: Hindi, Kannada

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

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

Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

PARIKH, MILIND

Provider ID: 418340

Provider Gender: Male

License Number: 20A13745

NPI: 1194161406

Provider English Spoken: Y

Provider Language(s)
Spoken: Gujarati, Hindi,
Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital, Adventist

Health and Rideout

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

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

Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

PARIKH, MILIND

Provider ID: 418340

Provider Gender: Male

License Number: 20A13745

NPI: 1194161406

Provider English Spoken: Y
Provider Language(s)
Spoken: Gujarati, Hindi,
Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital, Adventist
Health and Rideout

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

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

Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

REDDY, ARJUN

Provider ID: 428134

Provider Gender: Male

NPI: 1730132457

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

Cultural Competency: N

D2. 主治医生名录

Hospital Affiliation:

GROSSMONT HOSPITAL
Board Certified Specialty: No
Community Care IPA LLC
ARJUN N REDDY

5442 SYCUAN RD
EL CAJON, CA 92019

Phone: (619) 445-0707

Fax: (619) 445-0988

After Hours Phone: (619)
445-0707

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:00PM

INTERNAL MEDICINE

ROUEL, LINDA

Provider ID: 308485

Provider Gender: Female

NPI: 1326128950

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Assyrian,
Mandarin, Syriac

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No
Imperial Health Holdings

Medical Group-SD

LINDA Y ROUEL

860 JAMACHA RD STE 107
EL CAJON, CA 92019

Phone: (619) 456-9920

Fax: (619) 456-9340

After Hours Phone: (619)
456-9920

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-7:00PM

INTERNAL MEDICINE

ROUEL, WADI

Provider ID: 185267

Provider Gender: Male

License Number: C55979

NPI: 1740254713

Provider English Spoken: Y

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

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, GROSSMONT

HOSPITAL

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 269-1262

After Hours Phone: (619)
269-1262

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

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

INTERNAL MEDICINE

ROUEL, WADI

Provider ID: 185267

Provider Gender: Male

License Number: C55979

NPI: 1740254713

Provider English Spoken: Y

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

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, GROSSMONT

HOSPITAL

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 269-1262

After Hours Phone: (619)
269-1262

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 主治医生名录



N

 *Accessibility: CONTACT PROVIDER*
Hours: M-TU 8:00AM-5:00PM
TH-F 8:00AM-5:00PM





INTERNAL MEDICINE

ROUEL, WADI

Provider ID: 418501
Provider Gender: Male
License Number: C55979
NPI: 1740254713

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac*
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL


Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021
 *Phone: (619) 795-5983*
 *After Hours Phone: (619) 795-5983*
 *Website: www.lamaestra.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):



N

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





INTERNAL MEDICINE

ROUEL, WADI

Provider ID: 418501
Provider Gender: Male
License Number: C55979
NPI: 1740254713

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac*

Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021
 *Phone: (619) 795-5983*
 *After Hours Phone: (619) 795-5983*
 *Website: www.lamaestra.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):



N
 *Accessibility: CONTACT PROVIDER*





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

INTERNAL MEDICINE

SHEIKH-MOHAMED, HALA

Provider ID: 569910
Provider Gender: Female
License Number: A159247
NPI: 1972946770

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, Hindi, Urdu*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL CAJON



 875 EL CAJON BLVD
EL CAJON, CA 92020
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*


INTERNAL MEDICINE

SHEIKH-MOHAMED, HALA





Provider ID: 569910
Provider Gender: Female
License Number: A159247
NPI: 1972946770

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, Hindi, Urdu*
Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL CAJON



 875 EL CAJON BLVD
EL CAJON, CA 92020

D2. 主治医生名录

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE



TCHAKMAKJIAN, LEVON

Provider ID: 569910
Provider Gender: Male
License Number: C144411
NPI: 1790744795
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Armenian, Hebrew
Cultural Competency: N
Hospital Affiliation: NORTH BAY VACAVALLEY HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE



TCHAKMAKJIAN, LEVON

Provider ID: 569910
Provider Gender: Male
License Number: C144411
NPI: 1790744795
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Armenian, Hebrew
Cultural Competency: N
Hospital Affiliation: NORTH BAY VACAVALLEY HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL CAJON




 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

YOON, TAE



Provider ID: 418340
Provider Gender: Male
License Number: C161090
NPI: 1508918178
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Korean
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN

DIEGO-EL CAJON


 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

YOON, TAE

Provider ID: 418340
Provider Gender: Male
License Number: C161090
NPI: 1508918178
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Korean
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

D2. 主治医生名录

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

INTERVENTIONAL CARDIOLOGY


KAFRI, HASSAN

Provider ID: 569910
Provider Gender: Male
License Number: A96002
NPI: 1730258401

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, French, German, Russian, Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH EL CAJON

 *875 EL CAJON BLVD EL CAJON, CA 92020*
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

INTERVENTIONAL

CARDIOLOGY

KAFRI, HASSAN

Provider ID: 569910
Provider Gender: Male
License Number: A96002
NPI: 1730258401

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, French, German, Russian, Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH EL CAJON

 *875 EL CAJON BLVD EL CAJON, CA 92020*
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 418340
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

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

 *Website: www.fhcsd.org*
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*

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

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 418340
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031

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

Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

D2. 主治医生名录

Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

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

Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 418340

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

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

Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 418340

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS

Board Certified Specialty: No
Family Health Centers of San Diego

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DIEGO-EL CAJON

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Phone: (619) 515-2498
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Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 418340

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

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Phone: (619) 515-2498
After Hours Phone: (619) 515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

D2. 主治医生名录

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

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 418340

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,
GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 418340

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

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Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 418340

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 418340

Provider Gender: Male

License Number: A108228

NPI: 1629277322

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

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Phone: (619) 515-2498

After Hours Phone: (619)
515-2498


Website: www.fhcsd.org

D2. 主治医生名录



Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 418340
Provider Gender: Male
License Number: A108228
NPI: 1629277322
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN
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Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER



OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 418340
Provider Gender: Female
License Number: A178499
NPI: 1033613732



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON
 525 E MAIN ST
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 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498






 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY



Provider ID: 418340
Provider Gender: Female
License Number: A178499
NPI: 1033613732
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San Diego

Diego
FAMILY HLTH CTR SAN
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Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 418340
Provider Gender: Female
License Number: C174771
NPI: 1053392035
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON
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EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org

D2. 主治医生名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Provider ID: 418501

N

 Accessibility: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY


HANLEY, LAUREN

Provider ID: 418340

Provider Gender: Female

License Number: C174771

NPI: 1053392035

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org


Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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


OBSTETRICS / GYNECOLOGY

KHAN, ALIYA

Provider Gender: Female

License Number: G50634

NPI: 1285687350


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Hindi, Urdu

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5991

 After Hours Phone: (619)
795-5991

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

OBSTETRICS / GYNECOLOGY


KHAN, ALIYA

Provider ID: 418501

Provider Gender: Female

License Number: G50634

NPI: 1285687350

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Urdu

Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic


LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY

EL CAJON, CA 92021

 Phone: (619) 795-5991

 After Hours Phone: (619)
795-5991

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

OBSTETRICS / GYNECOLOGY


LIPSCHITZ, LISA

Provider ID: 418340

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

D2. 主治医生名录



 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N


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

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA



Provider ID: 418340
Provider Gender: Female
License Number: A72005
NPI: 1649208711
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON



Provider ID: 418340
Provider Gender: Female
License Number: A116680
NPI: 1700073962
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON


 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 418340
Provider Gender: Female
License Number: A116680
NPI: 1700073962
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
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Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

Provider ID: 569910

D2. 主治医生名录

Provider Gender: Male
License Number: A47906
NPI: 1437181922
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, BAKERSFIELD
MEMORIAL HOSP, SHARP
MEMORIAL HOSPITAL,
Adventist Health Bakersfield,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, KERN MEDICAL
CENTER, KERN MEDICAL
CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON
📍 875 EL CAJON BLVD
EL CAJON, CA 92020
☎ Phone: (619) 662-4100
📞 After Hours Phone: (619)
662-4100
🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

Provider ID: 569910
Provider Gender: Male
License Number: A47906

NPI: 1437181922
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, BAKERSFIELD
MEMORIAL HOSP, SHARP
MEMORIAL HOSPITAL,
Adventist Health Bakersfield,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, KERN MEDICAL
CENTER, KERN MEDICAL
CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON
📍 875 EL CAJON BLVD
EL CAJON, CA 92020
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📞 After Hours Phone: (619)
662-4100
🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 418340
Provider Gender: Female
License Number: A164859
NPI: 1952751711
☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
📍 525 E MAIN ST
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🌐 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 418340
Provider Gender: Female
License Number: A164859
NPI: 1952751711
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN

D2. 主治医生名录

DIEGO-EL CAJON

 525 E MAIN ST
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 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 418340

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp


Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
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 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 418340

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp


Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

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515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 418340

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL,


DESERT REGIONAL MED CTR


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

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 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 418340

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

 Provider English Spoken: Y



 Provider Language(s)






D2. 主治医生名录

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL, DESERT REGIONAL MED CTR
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY



ZIEG, ALAN

Provider ID: 418340
Provider Gender: Male
License Number: G78814
NPI: 1699790634
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY




ZIEG, ALAN

Provider ID: 418340
Provider Gender: Male
License Number: G78814
NPI: 1699790634
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL

CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY

ALBORZIAN, SHERVIN

Provider ID: 418340
Provider Gender: Male
License Number: A107093
NPI: 1588825129
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Farsi, Persian, Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST

D2. 主治医生名录

EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OPHTHALMOLOGY

ALBORZIAN, SHERVIN

Provider ID: 418340
Provider Gender: Male
License Number: A107093
NPI: 1588825129
Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi, Persian,
Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619)
515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OPHTHALMOLOGY

JARDON, JAVIER

Provider ID: 569910
Provider Gender: Male
License Number: A131365
NPI: 1609171982
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
CALIFORNIA HOSP MED CTR
LOS ANGELES, EL CENTRO
REGIONAL MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

OPHTHALMOLOGY

JARDON, JAVIER

Provider ID: 569910
Provider Gender: Male
License Number: A131365
NPI: 1609171982
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
CALIFORNIA HOSP MED CTR
LOS ANGELES, EL CENTRO
REGIONAL MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

OPHTHALMOLOGY

MANI, NASRIN

Provider ID: 569910
Provider Gender: Female
License Number: A40473
NPI: 1023061314
Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Faroese,
Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS


D2. 主治医生名录

MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR, SHARP CHULA
VISTA MED CTR, GROSSMONT
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON



 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY


MANI, NASRIN

Provider ID: 569910
Provider Gender: Female
License Number: A40473
NPI: 1023061314
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Faroese,
Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR, SHARP CHULA
VISTA MED CTR, GROSSMONT
HOSPITAL
Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON



 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM



OPHTHALMOLOGY




PAPASTERGIOU, GEORGIOS

Provider ID: 569910
Provider Gender: Male
License Number: A127706
NPI: 1790054393
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Farsi,
French, Greek, Italian,
Spanish

Cultural Competency: N
Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM





OPHTHALMOLOGY

PAPASTERGIOU, GEORGIOS

Provider ID: 569910
Provider Gender: Male
License Number: A127706
NPI: 1790054393
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Farsi,
French, Greek, Italian,
Spanish
Cultural Competency: N


Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):



D2. 主治医生名录





N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM


OPHTHALMOLOGY

PONS, MAURICIO

Provider ID: 569910
Provider Gender: Male
License Number: A87650
NPI: 1376723759
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH EL CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):



N





 *Accessibility: CONTACT PROVIDER*

OPHTHALMOLOGY

PONS, MAURICIO

Provider ID: 569910

Provider Gender: Male
License Number: A87650
NPI: 1376723759
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH EL CAJON



 875 EL CAJON BLVD
EL CAJON, CA 92020
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N





 *Accessibility: CONTACT PROVIDER*

OPHTHALMOLOGY

SKAF, AYHAM

Provider ID: 569910
Provider Gender: Male
License Number: A120584
NPI: 1285888628
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, Spanish*
Cultural Competency: N
Hospital Affiliation: EL CENTRO

REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH EL CAJON




 875 EL CAJON BLVD
EL CAJON, CA 92020
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OPHTHALMOLOGY

SKAF, AYHAM

Provider ID: 569910
Provider Gender: Male
License Number: A120584
NPI: 1285888628
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, Spanish*
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH EL CAJON
 875 EL CAJON BLVD

D2. 主治医生名录

EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

ADJAN, ROULA

Provider ID: 185267
Provider Gender: Female
License Number: A81682
NPI: 1992847263
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, French, Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

ADJAN, ROULA

Provider ID: 185267
Provider Gender: Female
License Number: A81682
NPI: 1992847263
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, French, Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

ALWAHAB, AREEJ

Provider ID: 678064
Provider Gender: Female
NPI: 1497138002
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N

Hospital Affiliation: ST BERNARDINE MED CTR, KAISER FOUNDATION HOSPITAL SAN DIEGO
Board Certified Specialty: No
Rady Childrens Health Network
AREEJ K ALWAHAB
250 E CHASE AVE STE 110
EL CAJON, CA 92020
Phone: (619) 399-7878
Fax: (858) 499-5006
After Hours Phone: (619) 399-7878
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CONE, STEPHANIE

Provider ID: 418501
Provider Gender: Female
License Number: A123929
NPI: 1437444858
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON BROADWAY

D2. 主治医生名录

1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
After Hours Phone: (619)
795-5991
Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

PEDIATRICS

CONE, STEPHANIE

Provider ID: 418501

Provider Gender: Female

License Number: A123929

NPI: 1437444858

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA CHC EL CAJON

BROADWAY

1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
After Hours Phone: (619)
795-5991
Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

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

N

Accessibility: CONTACT
PROVIDER

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

PEDIATRICS

CONE, STEPHANIE

Provider ID: 185267

Provider Gender: Female

License Number: A123929

NPI: 1437444858

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619)
312-0347
Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CONE, STEPHANIE

Provider ID: 185267

Provider Gender: Female

License Number: A123929

NPI: 1437444858

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619)
312-0347
Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

FLEMING, TARA

Provider ID: 418340

Provider Gender: Female

License Number: A152462

D2. 主治医生名录

NPI: 1972965242


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org


Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

PEDIATRICS

FLEMING, TARA

Provider ID: 418340

Provider Gender: Female

License Number: A152462

NPI: 1972965242

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

PEDIATRICS

HOANG, VY

Provider ID: 546310

Provider Gender: Female

NPI: 1649575135

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SHARP MARY BIRCH HOSP

FOR WOMEN AND

NEWBORNS, RADY

CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No

Rady Childrens Health Network

VY U HOANG

 844 JACKMAN ST

EL CAJON, CA 92020

 Phone: (619) 442-2560

Fax: (619) 442-7836

 After Hours Phone: (619)
442-2560

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


JACKSON, DANA

Provider ID: 418340

Provider Gender: Female

License Number: 20A14119

NPI: 1689060063

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation:

MARINHEALTH AND

MARINHEALTH MEDICAL


CENTER, SCRIPPS MERCY
HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

D2. 主治医生名录

PEDIATRICS


JACKSON, DANA


Provider ID: 418340

Provider Gender: Female

License Number: 20A14119

NPI: 1689060063

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation:

MARINHEALTH AND

MARINHEALTH MEDICAL

CENTER, SCRIPPS MERCY

HOSPITAL


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498


 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

JONES, SETAREH

Provider ID: 418501

Provider Gender: Female

License Number: A110010

NPI: 1033441316

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5983

 After Hours Phone: (619)
795-5983

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

PEDIATRICS

JONES, SETAREH

Provider ID: 418501

Provider Gender: Female

License Number: A110010

NPI: 1033441316

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5983

 After Hours Phone: (619)
795-5983

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

PEDIATRICS

JONES, SETAREH

Provider ID: 185267

Provider Gender: Female

License Number: A110010

NPI: 1033441316

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

D2. 主治医生名录

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

PEDIATRICS


JONES, SETAREH

Provider ID: 185267

Provider Gender: Female


License Number: A110010


NPI: 1033441316

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 *165 S 1ST ST*
EL CAJON, CA 92019

 *Phone: (619) 312-0347*

 *After Hours Phone: (619)*
312-0347

 *Website: www.lamaestra.org*


Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

PEDIATRICS


KODSI, ALICIA

Provider ID: 418340

Provider Gender: Female


License Number: A147976


NPI: 1932514353


 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 *525 E MAIN ST*
EL CAJON, CA 92020

 *Phone: (619) 515-2498*

 *After Hours Phone: (619)*
515-2498

 *Website: www.fhcsd.org*
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

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

PEDIATRICS


KODSI, ALICIA

Provider ID: 418340

Provider Gender: Female


License Number: A147976

NPI: 1932514353


 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

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EL CAJON, CA 92020

 *Phone: (619) 515-2498*

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515-2498

 *Website: www.fhcsd.org*
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

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

PEDIATRICS



NAGNUR, PRITI

Provider ID: 206354

Provider Gender: Female

License Number: A170055


NPI: 1316289929


 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Hindi, Kannada


Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

 *1111 W CHASE AVE*
EL CAJON, CA 92020

 *Phone: (619) 515-2499*

 *After Hours Phone: (619)*
515-2499

 *Website: www.fhcsd.org*
Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

D2. 主治医生名录

PEDIATRICS

NAGNUR, PRITI

Provider ID: 206354

Provider Gender: Female

License Number: A170055

NPI: 1316289929

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Kannada


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

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EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619)
515-2499

 Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

NAIK, SHILPA

Provider ID: 546498

Provider Gender: Female

NPI: 1902156904

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT


HOSPITAL, Sharp Grossmont
Hospital

Board Certified Specialty: No


Rady Childrens Health Network N

SHILPA NAIK

 844 JACKMAN ST
EL CAJON, CA 92020

 Phone: (619) 442-2560

Fax: (619) 442-7836

 After Hours Phone: (619)
442-2560

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

NGUYEN, VI

Provider ID: 546509

Provider Gender: Female

NPI: 1053540534

Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

Rady Childrens Health Network

VI T NGUYEN

 844 JACKMAN ST
EL CAJON, CA 92020

 Phone: (619) 442-2560

Fax: (619) 442-7836

 After Hours Phone: (619)
442-2560

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

PINTO, ANITA

Provider ID: 546215

Provider Gender: Female

NPI: 1477663722

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SHARP MARY BIRCH HOSP

FOR WOMEN AND

NEWBORNS, RADY

CHILDRENS HOSPITAL SAN


DIEGO

Board Certified Specialty: No

Rady Childrens Health Network

ANITA PINTO

 844 JACKMAN ST
EL CAJON, CA 92020

 Phone: (619) 442-2560

Fax: (619) 442-7836

 After Hours Phone: (619)
442-2560

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

D2. 主治医生名录

PEDIATRICS

RODRIGUEZ, ALDO

Provider ID: 569910

Provider Gender: Male

License Number: A134995

NPI: 1508209651

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL

CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

RODRIGUEZ, ALDO

Provider ID: 569910

Provider Gender: Male

License Number: A134995

NPI: 1508209651

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,

Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL

CAJON

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 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

ALYAS, ALISIA

Provider ID: 418501

Provider Gender: Female

License Number: PA58466

NPI: 1437768017

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA CHC EL CAJON

BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5991

 After Hours Phone: (619)
795-5991

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

PHYSICIANS ASSISTANT

ALYAS, ALISIA

Provider ID: 418501

Provider Gender: Female

License Number: PA58466

NPI: 1437768017

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic


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 After Hours Phone: (619)
795-5991


 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

PHYSICIANS ASSISTANT

ALYAS, ALISIA

Provider ID: 185267

Provider Gender: Female

License Number: PA58466


NPI: 1437768017


Provider English Spoken: Y

D2. 主治医生名录

Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
**LA MAESTRA FAMILY CLINIC
INC**

 165 S 1ST ST
EL CAJON, CA 92019

 *Phone: (619) 312-0347*

 *After Hours Phone: (619)
312-0347*

 *Website: www.lamaestra.org*


Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

PHYSICIANS ASSISTANT

ALYAS, ALISIA

Provider ID: 185267

Provider Gender: Female

License Number: PA58466


NPI: 1437768017


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic

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 *Website: www.lamaestra.org*

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

PHYSICIANS ASSISTANT

ARMENTA, JORGE

Provider ID: 185267

Provider Gender: Male

License Number: PA13694


NPI: 1346382611


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic

**LA MAESTRA FAMILY CLINIC
INC**

 165 S 1ST ST
EL CAJON, CA 92019

 *Phone: (619) 312-0347*

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 *Website: www.lamaestra.org*

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

*Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM*

PHYSICIANS ASSISTANT

ARMENTA, JORGE

Provider ID: 185267

Provider Gender: Male

License Number: PA13694


NPI: 1346382611


 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No
La Maestra Family Clinic

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Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

PHYSICIANS ASSISTANT

CONDEZ, ESEL

Provider ID: 418340

Provider Gender: Male

License Number: PA53129

NPI: 1073978680





 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
*Family Health Centers of San
Diego*

**FAMILY HLTH CTR SAN
DIEGO-EL CAJON**

 525 E MAIN ST
EL CAJON, CA 92020

D2. 主治医生名录

 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

PHYSICIANS ASSISTANT


CONDEZ, EDSEL

Provider ID: 418340
Provider Gender: Male
License Number: PA53129
NPI: 1073978680
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM



PHYSICIANS ASSISTANT

MERCER, KELLY






Provider ID: 418501
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON BROADWAY
 1032 BROADWAY
EL CAJON, CA 92021
 Phone: (619) 795-5991
 After Hours Phone: (619) 795-5991
 Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

MERCER, KELLY







Provider ID: 418501
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021
 Phone: (619) 795-5991
 After Hours Phone: (619) 795-5991
 Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 185267
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC
 165 S 1ST ST
EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619) 312-0347
 Website: www.lamaestra.org
Email:
aschmaltz@lamaestra.org

D2. 主治医生名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Provider ID: 206354

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 185267

Provider Gender: Female

License Number: PA21625

NPI: 1154609790

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic


Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 165 S 1ST ST
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 After Hours Phone: (619)
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 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

PHYSICIANS ASSISTANT

PATEL, SHREYA

Provider Gender: Female

License Number: PA18719

NPI: 1447468137

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

 1111 W CHASE AVE
EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619)
515-2499

 Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

PHYSICIANS ASSISTANT

PATEL, SHREYA

Provider ID: 206354

Provider Gender: Female

License Number: PA18719

NPI: 1447468137

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

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 After Hours Phone: (619)
515-2499

 Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

PHYSICIANS ASSISTANT

ROSENBLATT, SHERILYN

Provider ID: 569910

Provider Gender: Female

License Number: PA22872

NPI: 1114041621

Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150


D2. 主治医生名录





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


 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT **ROSENBLATT, SHERILYN**

Provider ID: 569910
Provider Gender: Female
License Number: PA22872
NPI: 1114041621


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT **TURNER, ERIC**


Provider ID: 206354
Provider Gender: Male
License Number: PA55067
NPI: 1669756128


 *Provider English Spoken: Y*

Board Certified Specialty: No
Family Health Centers of San Diego

CHASE AVENUE FAMILY HEALTH CTRS INC



 1111 W CHASE AVE
EL CAJON, CA 92020
 *Phone: (619) 515-2499*
 *After Hours Phone: (619) 515-2499*

 *Website: www.fhcsd.org*
Email: jaquelin@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

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


PHYSICIANS ASSISTANT **TURNER, SHEREENA**

Provider ID: 418340
Provider Gender: Female
License Number: PA20396
NPI: 1992934988


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

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


 *Website: www.fhcsd.org*
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N




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


PHYSICIANS ASSISTANT **TURNER, ERIC**


Provider ID: 206354
Provider Gender: Male
License Number: PA55067
NPI: 1669756128

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

CHASE AVENUE FAMILY HEALTH CTRS INC

 1111 W CHASE AVE
EL CAJON, CA 92020
 *Phone: (619) 515-2499*
 *After Hours Phone: (619) 515-2499*

 *Website: www.fhcsd.org*
Email: jaquelin@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

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

PHYSICIANS ASSISTANT **TURNER, SHEREENA**

Provider ID: 418340

D2. 主治医生名录

Provider Gender: Female
License Number: PA20396
NPI: 1992934988
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
 525 E MAIN ST
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515-2498
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Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

PODIATRIST

JUAREZ, LETICIA


Provider ID: 418340
Provider Gender: Female
License Number: DPM5661
NPI: 1508393778
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN

DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2400
 After Hours Phone: (619)
515-2400
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

PODIATRIST

JUAREZ, LETICIA

Provider ID: 418340
Provider Gender: Female
License Number: DPM5661
NPI: 1508393778
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
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Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

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

PODIATRIST

LE, DIANA

Provider ID: 418340
Provider Gender: Female
License Number: DPM5734
NPI: 1184112864
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

PODIATRIST

LE, DIANA

Provider ID: 418340
Provider Gender: Female

D2. 主治医生名录

License Number: DPM5734

NPI: 1184112864

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE

Provider ID: 418340

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE

Provider ID: 418340

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST
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Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

DASCENZO, EMILY

Provider ID: 569910

Provider Gender: Female

License Number: PT40025

NPI: 1952982761

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL
CAJON

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

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

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

DASCENZO, EMILY

Provider ID: 569910

Provider Gender: Female

License Number: PT40025


NPI: 1952982761


Provider English Spoken: Y


D2. 主治医生名录

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020


 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 8:00AM-5:00PM

REGISTERED PHYSICAL **THERAPIST**

GUTIERREZ, JUSTINE

Provider ID: 418340

Provider Gender: Female

License Number: PT292482


NPI: 1851834873


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

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

REGISTERED PHYSICAL **THERAPIST**

GUTIERREZ, JUSTINE

Provider ID: 418340

Provider Gender: Female

License Number: PT292482


NPI: 1851834873


 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

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

REGISTERED PHYSICAL **THERAPIST**

KUIOKA, TROY

Provider ID: 569910

Provider Gender: Male


License Number: PT42665


NPI: 1912640053

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020


 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 8:00AM-5:00PM

REGISTERED PHYSICAL **THERAPIST**

KUIOKA, TROY

Provider ID: 569910


Provider Gender: Male


License Number: PT42665


NPI: 1912640053

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

D2. 主治医生名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1043736879

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

Provider ID: 418340

Provider Gender: Male

License Number: PT293536


NPI: 1043736879


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

Provider ID: 418340

Provider Gender: Male

License Number: PT293536


NPI: 1043736879


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300


 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

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

ENCINITAS

PEDIATRICS

BRION, SONJA

Provider ID: 386639

Provider Gender: Female

NPI: 1306817317

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network
SONJA K BRION

 499 N EL CAMINO REAL
STE B100

ENCINITAS, CA 92024

 Phone: (760) 436-4511

Fax: (760) 436-5106

 After Hours Phone: (760) 436-4511

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CLEMENTINO, NANCY

Provider ID: 386643

Provider Gender: Female

NPI: 1619948619

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MEMORIAL


HOSPITAL ENCINITAS

Board Certified Specialty: No

Rady Childrens Health Network
NANCY A CLEMENTINO

 499 N EL CAMINO REAL
STE B100

ENCINITAS, CA 92024

 Phone: (760) 436-4511

Fax: (760) 436-5106

 After Hours Phone: (760)

D2. 主治医生名录

436-4511
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MENDENHALL, ANNA

Provider ID: 386635
Provider Gender: Female
NPI: 1639140650
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MEMORIAL
HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
ANNA K MENDENHALL

499 N EL CAMINO REAL
STE B100
ENCINITAS, CA 92024
Phone: (760) 436-4511
Fax: (760) 436-5106
After Hours Phone: (760)
436-4511
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

TERRY, AMANDA

Provider ID: 386739
Provider Gender: Female
NPI: 1861770885
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND
Board Certified Specialty: No
Rady Childrens Health Network
AMANDA R TERRY

499 N EL CAMINO REAL
STE B100
ENCINITAS, CA 92024
Phone: (760) 436-4511
Fax: (760) 436-5106
After Hours Phone: (760)
436-4511

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

TOLBA, KAMEI

Provider ID: 386624
Provider Gender: Male

NPI: 1144221763
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, RADY CHILDRENS
HOSPITAL SAN DIEGO,
SCRIPPS MEMORIAL
HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
KAMEI B TOLBA

499 N EL CAMINO REAL
STE B100
ENCINITAS, CA 92024

Phone: (760) 436-4511
Fax: (760) 436-5106

After Hours Phone: (760)
436-4511

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

ESCONDIDO

CERTIFIED NURSE

PRACTITIONER




CARNEY, AMY


Provider ID: 206271
Provider Gender: Female
License Number: NP8169
NPI: 1164445227

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER


D2. 主治医生名录

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER
Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM

CERTIFIED NURSE




PRACTITIONER



CARNEY, AMY

Provider ID: 206271
Provider Gender: Female
License Number: NP8169
NPI: 1164445227

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)


737-6900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM






CERTIFIED NURSE

PRACTITIONER

KAHL, NICHOLAS

Provider ID: 588941
Provider Gender: Male
License Number: NP95006360
NPI: 1821306598

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE


 704 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER




CERTIFIED NURSE



PRACTITIONER

KAHL, NICHOLAS

Provider ID: 588941
Provider Gender: Male
License Number: NP95006360
NPI: 1821306598

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100


 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

CERTIFIED NURSE

PRACTITIONER

MITCHELL, CATHY

Provider ID: 424775
Provider Gender: Female
License Number: NP4799
NPI: 1356365365

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL

 426 N DATE ST
ESCONDIDO, CA 92025


D2. 主治医生名录






 Phone: (760) 690-5900
 After Hours Phone: (760) 690-5900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

MITCHELL, CATHY



Provider ID: 424775
Provider Gender: Female
License Number: NP4799
NPI: 1356365365
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL






 426 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 690-5900
 After Hours Phone: (760) 690-5900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

TODD, MIKAYLA



Provider ID: 588941
Provider Gender: Female
License Number: NP95005999
NPI: 1316478092
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER






CERTIFIED NURSE

PRACTITIONER

TODD, MIKAYLA






Provider ID: 588941
Provider Gender: Female
License Number: NP95005999
NPI: 1316478092
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CHIROPRACTOR

ROBINSON, DEAN

Provider ID: 206270
Provider Gender: Male
License Number: DC12036
NPI: 1851320337
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760) 520-8100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CHIROPRACTOR

D2. 主治医生名录

ROBINSON, DEAN

Provider ID: 206270

Provider Gender: Male

License Number: DC12036

NPI: 1851320337


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025


 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

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

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

ZECHA, RONALD

Provider ID: 206270

Provider Gender: Male

License Number: DC28605

NPI: 1427252121


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

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

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

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

CHIROPRACTOR

ZECHA, RONALD

Provider ID: 206270

Provider Gender: Male

License Number: DC28605

NPI: 1427252121


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


Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

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

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

ARRIETA, NOEMI

Provider ID: 588941

Provider Gender: Female

License Number: 20A11153

NPI: 1912223496

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


ESCONDIDO FAMILY

MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A
Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ARRIETA, NOEMI

Provider ID: 588941

Provider Gender: Female

License Number: 20A11153

NPI: 1912223496

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

D2. 主治医生名录

MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

📍 704 E GRAND AVE
ESCONDIDO, CA 92025
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619)
662-4100

🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

AVILA, MICHAEL

Provider ID: 206270
Provider Gender: Male
License Number: A159727
NPI: 1962936450

🗣 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO

📍 460 N ELM ST
ESCONDIDO, CA 92025
☎ Phone: (760) 520-8100
🕒 After Hours Phone: (760)
520-8100

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

AVILA, MICHAEL

Provider ID: 206270
Provider Gender: Male
License Number: A159727
NPI: 1962936450

🗣 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO

📍 460 N ELM ST
ESCONDIDO, CA 92025
☎ Phone: (760) 520-8100
🕒 After Hours Phone: (760)
520-8100

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

CASTANER, ZALYA

Provider ID: 206271
Provider Gender: Female
License Number: A139490
NPI: 1487072179
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR

MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025
☎ Phone: (760) 737-6900
🕒 After Hours Phone: (760)
737-6900

🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE

CASTANER, ZALYA



Provider ID: 206271
Provider Gender: Female
License Number: A139490
NPI: 1487072179

🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY


📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025
☎ Phone: (760) 737-6900
🕒 After Hours Phone: (760)
737-6900

D2. 主治医生名录






 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE

CASTANER, ZALYA

Provider ID: 206270
Provider Gender: Female
License Number: A139490
NPI: 1487072179
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD


HEALTHCARE ESCONDIDO






 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CASTANER, ZALYA


Provider ID: 206270
Provider Gender: Female


License Number: A139490
NPI: 1487072179
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO



 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

COBIAN, VANESSA


Provider ID: 206271
Provider Gender: Female
License Number: A145349
NPI: 1134513039
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY






 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE

COBIAN, VANESSA

Provider ID: 206271
Provider Gender: Female
License Number: A145349
NPI: 1134513039
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 728 E VALLEY PKWY
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737-6900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE

COX, VICTORIA

Provider ID: 588941

D2. 主治医生名录

Provider Gender: Female

License Number: C171064

NPI: 1093087819

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

ESCONDIDO FAMILY

MEDICINE

📍 704 E GRAND AVE
ESCONDIDO, CA 92025

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

COX, VICTORIA

Provider ID: 588941

Provider Gender: Female

License Number: C171064

NPI: 1093087819

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

ESCONDIDO FAMILY

MEDICINE

📍 704 E GRAND AVE
ESCONDIDO, CA 92025

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

FERRAILOLO, NATALIE

Provider ID: 206270

Provider Gender: Female

License Number: A152372

NPI: 1306290143

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

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

📍 460 N ELM ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100

🕒 After Hours Phone: (760)
520-8100

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

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

FERRAILOLO, NATALIE

Provider ID: 206270

Provider Gender: Female

License Number: A152372

NPI: 1306290143

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

📍 460 N ELM ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100

🕒 After Hours Phone: (760)
520-8100

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

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

HAMILTON, LISA MARIE

Provider ID: 652372

Provider Gender: Female

License Number: 20A14772

NPI: 1235576059

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San

Diego

ESCONDIDO FAMILY HEALTH
CENTER

📍 128 N BROADWAY
ESCONDIDO, CA 92025

☎ Phone: (760) 546-2858

D2. 主治医生名录

 After Hours Phone: (760) 546-2858

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Cultural Competency: N

N Board Certified Specialty: No

 Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE


HAMILTON, LISA MARIE

Provider ID: 652372

Provider Gender: Female

License Number: 20A14772

NPI: 1235576059

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

ESCONDIDO FAMILY HEALTH CENTER

 128 N BROADWAY
ESCONDIDO, CA 92025


 Phone: (760) 546-2858

 After Hours Phone: (760) 546-2858

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

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

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


KAUR, JATINDER

Provider ID: 206270

Provider Gender: Female

License Number: A120771

NPI: 1912141391

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Hindi, Punjabi,
Urdu

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760) 520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE


KAUR, JATINDER


Provider ID: 206270

Provider Gender: Female

License Number: A120771

NPI: 1912141391

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Hindi, Punjabi,
Urdu

Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

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ESCONDIDO, CA 92025

 Phone: (760) 520-8100

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 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE


LAI, AMARA


Provider ID: 206271

Provider Gender: Female

License Number: A120348

NPI: 1790912855

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE VALLEY

PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900

 After Hours Phone: (760) 737-6900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

D2. 主治医生名录

PROVIDER
Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE

LAI, AMARA

Provider ID: 206271
Provider Gender: Female
License Number: A120348
NPI: 1790912855
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE

MATSHE, ZENZIWE

Provider ID: 665448

Provider Gender: Female
NPI: 1285256073
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Community Care IPA LLC
ZENZIWE MATSHE
 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
Fax: (760) 466-1373
 After Hours Phone: (760)
520-8100
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

MCHENRY, KATHRYN

Provider ID: 206270
Provider Gender: Female
License Number: 20A14292
NPI: 1326458373
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100
 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

MCHENRY, KATHRYN

Provider ID: 206270
Provider Gender: Female
License Number: 20A14292
NPI: 1326458373
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

NAKAMURA, MELANIE

Provider ID: 206270

D2. 主治医生名录

Provider Gender: Female
License Number: A107557
NPI: 1104022672

☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO

📍 460 N ELM ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100
🕒 After Hours Phone: (760)
520-8100

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE **NAKAMURA, MELANIE**

Provider ID: 206270
Provider Gender: Female
License Number: A107557
NPI: 1104022672

☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO

📍 460 N ELM ST
ESCONDIDO, CA 92025
☎ Phone: (760) 520-8100
🕒 After Hours Phone: (760)
520-8100

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE **PATEL, JITENBHAI**

Provider ID: 206270
Provider Gender: Male
License Number: A94128
NPI: 1902921406

☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO

📍 460 N ELM ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100
🕒 After Hours Phone: (760)
520-8100

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE **PATEL, JITENBHAI**

Provider ID: 206270
Provider Gender: Male
License Number: A94128
NPI: 1902921406

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

IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO

📍 460 N ELM ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100
🕒 After Hours Phone: (760)
520-8100

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE **PATEL, JITENBHAI**

Provider ID: 206271
Provider Gender: Male
License Number: A94128
NPI: 1902921406

☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD

HEALTHCARE VALLEY
PARKWAY


📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025

☎ Phone: (760) 737-6900
🕒 After Hours Phone: (760)
737-6900

🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

D2. 主治医生名录

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PATEL, JITENBHAI

Provider ID: 206271

Provider Gender: Male

License Number: A94128


NPI: 1902921406


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900


 After Hours Phone: (760)
737-6900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RAO, USHA

Provider ID: 588941

Provider Gender: Female

License Number: A148750

NPI: 1184019911

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RAO, USHA

Provider ID: 588941

Provider Gender: Female

License Number: A148750

NPI: 1184019911

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RASHCOVSKY SCHIFF, KARIN

Provider ID: 206270

Provider Gender: Female

License Number: A82173

NPI: 1699706333

Provider English Spoken: Y

Provider Language(s)
Spoken: French


Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP

NEIGHBORHOOD
HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE






RASHCOVSKY SCHIFF, KARIN

Provider ID: 206270


Provider Gender: Female


D2. 主治医生名录

License Number: A82173
NPI: 1699706333
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE **RODARTE, GABRIEL**

Provider ID: 206266
Provider Gender: Male
License Number: A87906
NPI: 1184649212
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE PEDS AND
PRENATAL
 425 N DATE ST

ESCONDIDO, CA 92025
 Phone: (760) 520-8340
 After Hours Phone: (760)
520-8340
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM






FAMILY PRACTICE **RODARTE, GABRIEL**

Provider ID: 206266
Provider Gender: Male
License Number: A87906
NPI: 1184649212
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE PEDS AND
PRENATAL

 425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8340
 After Hours Phone: (760)
520-8340
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE **SANDHU, BASANT**

Provider ID: 206271
Provider Gender: Male
License Number: A140398
NPI: 1265795744
 Provider English Spoken: Y
 Provider Language(s)
Spoken: German, Hindi,
Punjabi, Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY




 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM


FAMILY PRACTICE **SANDHU, BASANT**

Provider ID: 206271
Provider Gender: Male
License Number: A140398
NPI: 1265795744
 Provider English Spoken: Y
 Provider Language(s)
Spoken: German, Hindi,
Punjabi, Spanish

D2. 主治医生名录


Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE



SCHULTZ, JAMES

Provider ID: 206271

Provider Gender: Male

License Number: G61829

NPI: 1356376164

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Farsi, Greek,
Spanish

Cultural Competency: N


Hospital Affiliation:

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
PALOMAR MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD

HEALTHCARE VALLEY
PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER

FAMILY PRACTICE



SCHULTZ, JAMES

Provider ID: 206270

Provider Gender: Male

License Number: G61829

NPI: 1356376164




 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Farsi, Greek,
Spanish

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
PALOMAR MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD

 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

FAMILY PRACTICE



SCHULTZ, JAMES

Provider ID: 206270

Provider Gender: Male

License Number: G61829

NPI: 1356376164

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Farsi, Greek,
Spanish




Cultural Competency: N


Hospital Affiliation:

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
PALOMAR MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER

D2. 主治医生名录

FAMILY PRACTICE


SCHULTZ, JAMES


Provider ID: 206271

Provider Gender: Male

License Number: G61829

NPI: 1356376164

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Farsi, Greek,
Spanish

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
PALOMAR MEDICAL CENTER


Board Certified Specialty: No
IHP of Southern Cal-PHP


NEIGHBORHOOD


HEALTHCARE VALLEY

PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900

 After Hours Phone: (760)
737-6900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


TANTOD, KULIN


Provider ID: 206270

Provider Gender: Male

License Number: A109655

NPI: 1902058928

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


TANTOD, KULIN

Provider ID: 206270

Provider Gender: Male

License Number: A109655

NPI: 1902058928

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

THOMPSON, CHERYL


Provider ID: 206270

Provider Gender: Female

License Number: A102687

NPI: 1548429863

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

FAMILY PRACTICE

THOMPSON, CHERYL


Provider ID: 206270

Provider Gender: Female

D2. 主治医生名录

License Number: A102687

NPI: 1548429863

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM


SA 8:00AM-0:00PM

FQHC

ESCONDIDO FAMILY HEALTH CENTER,

Provider ID: 652372

NPI: 1417640491

 Provider English Spoken: Y


Cultural Competency: N


Family Health Centers of San
Diego

ESCONDIDO FAMILY HEALTH
CENTER

 128 N BROADWAY

ESCONDIDO, CA 92025

 Phone: (619) 515-2474

 After Hours Phone: (619)
515-2474

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER

FQHC

ESCONDIDO FAMILY HEALTH CENTER,

Provider ID: 652372

NPI: 1417640491

 Provider English Spoken: Y


Cultural Competency: N


Family Health Centers of San
Diego


ESCONDIDO FAMILY HEALTH
CENTER

 128 N BROADWAY

ESCONDIDO, CA 92025

 Phone: (619) 515-2474

 After Hours Phone: (619)
515-2474

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER

FQHC

NEIGHBORHOOD HEALTHCARE ESCONDIDO,

Provider ID: 206270

NPI: 1598703647

 Provider English Spoken: Y

Cultural Competency: N


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8100

Fax: (360) 466-2745

 After Hours Phone: (760)
520-8100


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD HEALTHCARE ESCONDIDO,

Provider ID: 206270

NPI: 1598703647

 Provider English Spoken: Y

Cultural Competency: N


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8100

Fax: (360) 466-2745

 After Hours Phone: (760)
520-8100


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD

D2. 主治医生名录

HEALTHCARE PEDIATRICS AND PRENATAL,

Provider ID: 424775

NPI: 1437335353

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE PEDIATRICS
AND PRENATAL

📍 426 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 690-5900

Fax: (360) 462-2747

🕒 After Hours Phone: (760)
690-5900

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD

HEALTHCARE PEDIATRICS AND PRENATAL,

Provider ID: 424775

NPI: 1437335353

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE PEDIATRICS
AND PRENATAL

📍 426 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 690-5900

Fax: (360) 462-2747

🕒 After Hours Phone: (760)
690-5900

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD

HEALTHCARE PEDIATRICS AND PRENATAL,

Provider ID: 206266

NPI: 1265618185

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE PEDIATRICS
AND PRENATAL

📍 425 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8340

Fax: (360) 462-2752

🕒 After Hours Phone: (760)
520-8340

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

Min/Max Age: 0\21

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD

HEALTHCARE PEDIATRICS AND PRENATAL,

PRENATAL,

Provider ID: 206266

NPI: 1265618185

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE PEDIATRICS
AND PRENATAL

📍 425 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8340

Fax: (360) 462-2752

🕒 After Hours Phone: (760)
520-8340

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

Min/Max Age: 0\21

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD

HEALTHCARE VALLEY

PARKWAY,

Provider ID: 206271

NPI: 1720264641

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE VALLEY
PARKWAY

📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025

☎ Phone: (760) 737-6900

Fax: (360) 462-2748

🕒 After Hours Phone: (760)

D2. 主治医生名录

737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY,

Provider ID: 206271
NPI: 1720264641
Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
Fax: (360) 462-2748
After Hours Phone: (760)
737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE,

Provider ID: 588941
NPI: 1801438239
Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
Fax: (760) 745-7847

After Hours Phone: (619)
662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

FQHC

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE,

Provider ID: 588941
NPI: 1801438239
Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100

Fax: (760) 745-7847
After Hours Phone: (619)
662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

AGUERO, AMETHYST

Provider ID: 652372
Provider Gender: Female
License Number: 20A19473
NPI: 1568021913
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
ESCONDIDO FAMILY HEALTH
CENTER

128 N BROADWAY
ESCONDIDO, CA 92025
Phone: (760) 546-2858
After Hours Phone: (760)
546-2858
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

AGUERO, AMETHYST

D2. 主治医生名录

Provider ID: 652372

Provider Gender: Female

License Number: 20A19473

NPI: 1568021913

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

ESCONDIDO FAMILY HEALTH
CENTER

 128 N BROADWAY
ESCONDIDO, CA 92025

 Phone: (760) 546-2858

 After Hours Phone: (760)
546-2858

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CARRERA, JORGE

Provider ID: 588941

Provider Gender: Male

License Number: G58033

NPI: 1184728586

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

ESCONDIDO FAMILY

MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CARRERA, JORGE

Provider ID: 588941

Provider Gender: Male

License Number: G58033

NPI: 1184728586

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

ESCONDIDO FAMILY

MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CHEN, MARGARET

Provider ID: 206270

Provider Gender: Female

License Number: A61751

NPI: 1659305084

Provider English Spoken: Y

Provider Language(s)
Spoken: Greek, Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

INTERNAL MEDICINE

CHEN, MARGARET

Provider ID: 206270

Provider Gender: Female

D2. 主治医生名录

License Number: A61751

NPI: 1659305084

Provider English Spoken: Y

Provider Language(s)
Spoken: Greek, Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

460 N ELM ST

ESCONDIDO, CA 92025

Phone: (760) 520-8100

After Hours Phone: (760)
520-8100

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

INTERNAL MEDICINE

CHEN, MARGARET

Provider ID: 235296

Provider Gender: Female

NPI: 1659305084

Provider English Spoken: Y

Provider Language(s)
Spoken: Greek, Spanish

Cultural Competency: N

Board Certified Specialty: No

Community Care IPA LLC

MARGARET K CHEN

460 N ELM ST

ESCONDIDO, CA 92025

Phone: (760) 520-8100

Fax: (360) 462-2745

After Hours Phone: (760)

520-8100

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

INTERNAL MEDICINE

VETTICADEN, SANTOSH

Provider ID: 206270

Provider Gender: Male

License Number: C53062

NPI: 1679102461

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

460 N ELM ST

ESCONDIDO, CA 92025

Phone: (760) 520-8100

After Hours Phone: (760)
520-8100

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

INTERNAL MEDICINE

VETTICADEN, SANTOSH

Provider ID: 206270

Provider Gender: Male

License Number: C53062

NPI: 1679102461

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

460 N ELM ST

ESCONDIDO, CA 92025

Phone: (760) 520-8100

After Hours Phone: (760)
520-8100

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

PEDIATRICS

AGUILAR, EDITA

Provider ID: 424775

Provider Gender: Female

License Number: A56054

NPI: 1467407411

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

NEIGHBORHOOD



HEALTHCARE PEDIATRICS


AND PRENATAL

426 N DATE ST


ESCONDIDO, CA 92025

D2. 主治医生名录

 Phone: (760) 690-5900
 After Hours Phone: (760) 690-5900

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


AGUILAR, EDITA


Provider ID: 206266

Provider Gender: Female

License Number: A56054

NPI: 1467407411

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE PEDS AND

PRENATAL

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8340

 After Hours Phone: (760) 520-8340


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


AGUILAR, EDITA


Provider ID: 424775

Provider Gender: Female

License Number: A56054

NPI: 1467407411

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD


HEALTHCARE PEDIATRICS

AND PRENATAL

 426 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 690-5900

 After Hours Phone: (760) 690-5900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


AGUILAR, EDITA


Provider ID: 206266

Provider Gender: Female

License Number: A56054

NPI: 1467407411

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


NEIGHBORHOOD


HEALTHCARE PEDS AND

PRENATAL

 425 N DATE ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8340

 After Hours Phone: (760) 520-8340


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

ALDANA, NANCY


Provider ID: 424775

Provider Gender: Female

License Number: A62467

NPI: 1558371963

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE PEDIATRICS

AND PRENATAL

 426 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8340

 After Hours Phone: (760) 520-8340

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

D2. 主治医生名录

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM




PEDIATRICS


ALDANA, NANCY

Provider ID: 424775
Provider Gender: Female
License Number: A62467
NPI: 1558371963


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

Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No IHP of Southern Cal-PHP NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

 *426 N DATE ST ESCONDIDO, CA 92025*
 *Phone: (760) 520-8340*
 *After Hours Phone: (760) 520-8340*

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM




PEDIATRICS


CHOW, BYRON

Provider ID: 206270
Provider Gender: Male
License Number: A78116
NPI: 1619907607

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

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Board Certified Specialty: No IHP of Southern Cal-PHP NEIGHBORHOOD HEALTHCARE ESCONDIDO

 *460 N ELM ST ESCONDIDO, CA 92025*
 *Phone: (760) 520-8100*
 *After Hours Phone: (760) 520-8100*

 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

CHOW, BYRON




Provider ID: 206270
Provider Gender: Male
License Number: A78116
NPI: 1619907607


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

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

DIEGO, PALOMAR MEDICAL CENTER

Board Certified Specialty: No IHP of Southern Cal-PHP NEIGHBORHOOD HEALTHCARE ESCONDIDO

 *460 N ELM ST ESCONDIDO, CA 92025*
 *Phone: (760) 520-8100*
 *After Hours Phone: (760) 520-8100*

 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS



COHEN, CARA

Provider ID: 661879
Provider Gender: Female
NPI: 1215021274

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

Hospital Affiliation: PALOMAR HEALTH, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Board Certified Specialty: No Rady Childrens Health Network CARA E COHEN

 *625 CITRACADO PKWY STE 100 ESCONDIDO, CA 92025*
 *Phone: (760) 746-2641*

D2. 主治医生名录

Fax: (760) 740-2178

☎ After Hours Phone: (760) 746-2641

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

COULLAHAN, JESSICA

Provider ID: 661887

Provider Gender: Female

NPI: 1750579108

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER

Board Certified Specialty: No
Rady Childrens Health Network
JESSICA M COULLAHAN

📍 625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025

☎ Phone: (760) 746-2641

Fax: (760) 740-2178

☎ After Hours Phone: (760) 746-2641

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:30AM-0:00PM

PEDIATRICS

CURET, ZULMA

Provider ID: 206270

Provider Gender: Female

License Number: A119661

NPI: 1841561107

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD HEALTHCARE ESCONDIDO

📍 460 N ELM ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100

☎ After Hours Phone: (760) 520-8100

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

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

CURET, ZULMA

Provider ID: 206270

Provider Gender: Female

License Number: A119661

NPI: 1841561107

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD HEALTHCARE ESCONDIDO

📍 460 N ELM ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100

☎ After Hours Phone: (760) 520-8100

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

DOSHI, NEELIMA

Provider ID: 640252

Provider Gender: Female

NPI: 1417921578

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
Community Care IPA LLC
NEELIMA G DOSHI

📍 426 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8340

Fax: (360) 462-2752

☎ After Hours Phone: (760)

D2. 主治医生名录

520-8340
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER








PEDIATRICS

DOSHI, NEELIMA

Provider ID: 424775
Provider Gender: Female
License Number: A67626
NPI: 1417921578
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL
 426 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 690-5900
 After Hours Phone: (760)
690-5900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER



PEDIATRICS





DOSHI, NEELIMA

Provider ID: 424775
Provider Gender: Female
License Number: A67626
NPI: 1417921578
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL
 426 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 690-5900
 After Hours Phone: (760)
690-5900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS








SONG, JOYCE

Provider ID: 661892
Provider Gender: Female
NPI: 1417510694
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Rady Childrens Health Network
JOYCE Y SONG
 625 CITRACADO PKWY STE

100
ESCONDIDO, CA 92025
 Phone: (760) 746-2641
Fax: (760) 740-2178
 After Hours Phone: (760)
746-2641
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

STRAZICICH, KARLA

Provider ID: 206270
Provider Gender: Female
License Number: A45413
NPI: 1134154958
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT

D2. 主治医生名录

<p><i>PROVIDER</i></p> <p><u>PEDIATRICS</u></p> <p>STRAZICICH, KARLA</p> <p>Provider ID: 206270</p> <p>Provider Gender: Female</p> <p>License Number: A45413</p> <p>NPI: 1134154958</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p><input type="checkbox"/> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: PALOMAR MEDICAL CENTER</p> <p>Board Certified Specialty: No</p> <p>IHP of Southern Cal-PHP NEIGHBORHOOD HEALTHCARE ESCONDIDO</p> <p> 460 N ELM ST ESCONDIDO, CA 92025</p> <p> Phone: (760) 520-8100</p> <p> After Hours Phone: (760) 520-8100</p> <p> Website: www.ihpsocal.org</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\150</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p><u>PEDIATRICS</u></p> <p>TELLECHEA-SANCHEZ, SELMIRA</p> <p>Provider ID: 424775</p> <p>Provider Gender: Female</p> <p>License Number: G83438</p> <p>NPI: 1730288747</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p><input type="checkbox"/> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Board Certified Specialty: No</p> <p>IHP of Southern Cal-PHP NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL</p> <p> 426 N DATE ST ESCONDIDO, CA 92025</p> <p> Phone: (760) 690-5900</p> <p> After Hours Phone: (760) 690-5900</p> <p> Website: N/A</p> <p>Medi-Cal Open Panel: Yes</p>	<p>Cultural Competency: N</p> <p>Board Certified Specialty: No</p> <p>IHP of Southern Cal-PHP NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL</p> <p> 426 N DATE ST ESCONDIDO, CA 92025</p> <p> Phone: (760) 690-5900</p> <p> After Hours Phone: (760) 690-5900</p> <p> Website: N/A</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\21</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p><u>PEDIATRICS</u></p> <p>TELLECHEA-SANCHEZ, SELMIRA</p> <p>Provider ID: 424775</p> <p>Provider Gender: Female</p> <p>License Number: G83438</p> <p>NPI: 1730288747</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p><input type="checkbox"/> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Board Certified Specialty: No</p> <p>IHP of Southern Cal-PHP NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL</p> <p> 426 N DATE ST ESCONDIDO, CA 92025</p> <p> Phone: (760) 690-5900</p> <p> After Hours Phone: (760) 690-5900</p> <p> Website: N/A</p> <p>Medi-Cal Open Panel: Yes</p>	<p>Min/Max Age: 0\21</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p><u>PEDIATRICS</u></p> <p>ZAND, FARIBA</p> <p>Provider ID: 87737</p> <p>Provider Gender: Female</p> <p>NPI: 1356373674</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p><input type="checkbox"/> Provider Language(s) Spoken: Farsi, Persian, Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: MERCY GENERAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR</p> <p>Board Certified Specialty: No</p> <p>Rady Childrens Health Network FARIBA ZAND</p> <p> 240 W MISSION AVE STE A ESCONDIDO, CA 92025</p> <p> Phone: (760) 747-5400</p> <p>Fax: (760) 747-2286</p> <p> After Hours Phone: (760) 747-5400</p> <p> Website: N/A</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\19</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Hours: M-F 8:00AM-5:00PM</p>
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D2. 主治医生名录

PHYSICIANS ASSISTANT

BAISLEY, SHAWN

Provider ID: 588941

Provider Gender: Male

License Number: PA52347


NPI: 1376936120


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

BAISLEY, SHAWN

Provider ID: 588941

Provider Gender: Male

License Number: PA52347

NPI: 1376936120

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025



Phone: (619) 662-4100



After Hours Phone: (619)
662-4100



Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N



Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 588941

Provider Gender: Female

License Number: PA20490


NPI: 1619100237


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N



Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 588941

Provider Gender: Female

License Number: PA20490


NPI: 1619100237


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PODIATRIST

NEGRON, RICARDO

Provider ID: 206271

Provider Gender: Male

License Number: DPM5260

NPI: 1932548393

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

Cultural Competency: N





Hospital Affiliation: Providence
St Joseph Hospital

Board Certified Specialty: No
IHP of Southern Cal-PHP

NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY








 728 E VALLEY PKWY
ESCONDIDO, CA 92025

D2. 主治医生名录

 Phone: (760) 737-6900
 After Hours Phone: (760) 737-6900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PODIATRIST

NEGRON, RICARDO

Provider ID: 206271
Provider Gender: Male
License Number: DPM5260
NPI: 1932548393
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Providence
St Joseph Hospital
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY
 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760) 737-6900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER



FALLBROOK

CERTIFIED NURSE

PRACTITIONER



EVERETT, ELIZABETH

Provider ID: 624122
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767

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

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER



Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER



EVERETT, ELIZABETH

Provider ID: 624122
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Sign Language
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

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FALLBROOK, CA 92028

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 After Hours Phone: (760) 723-6200

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER



Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER



EVERETT, ELIZABETH

Provider ID: 624122
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767

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

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200

 Website: www.vistacommunityclinic.org

D2. 主治医生名录

nityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

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

CERTIFIED NURSE

PRACTITIONER

EVERETT, ELIZABETH

Provider ID: 624122

Provider Gender: Female

License Number: NP95025094

NPI: 1942952767

Provider English Spoken: Y

Provider Language(s)

Spoken: Sign Language


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

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

CERTIFIED NURSE

PRACTITIONER

EVERETT, ELIZABETH

Provider ID: 624122

Provider Gender: Female

License Number: NP95025094

NPI: 1942952767

Provider English Spoken: Y

Provider Language(s)

Spoken: Sign Language


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

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

CERTIFIED NURSE

PRACTITIONER

EVERETT, ELIZABETH

Provider ID: 624122

Provider Gender: Female

License Number: NP95025094

NPI: 1942952767

Provider English Spoken: Y

Provider Language(s)

Spoken: Sign Language


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
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 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200


 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

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

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 624122

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR

Board Certified Specialty: No




IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200



D2. 主治医生名录

 After Hours Phone: (760) 723-6200
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 624122
Provider Gender: Female
License Number: NP95003447
NPI: 1245695006
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC



 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE






PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 624122
Provider Gender: Female
License Number: NP95003447
NPI: 1245695006

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

Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC



 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET






Provider ID: 624122
Provider Gender: Female
License Number: NP95003447
NPI: 1245695006

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

Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC



 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 624122
Provider Gender: Female
License Number: NP95003447
NPI: 1245695006

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

Hospital Affiliation: TRI CITY MEDICAL CTR

Board Certified Specialty: No IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC


 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes

D2. 主治医生名录

Min/Max Age: 0\999

American Sign Language (ASL): NPI: 1801497284

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


KELLEHER, BRIDGET

Provider ID: 624122

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200


 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): License Number: NP95015717

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


RACKHAM, KELLY

Provider ID: 624122

Provider Gender: Male

License Number: NP95015717

NPI: 1801497284

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

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

CERTIFIED NURSE

PRACTITIONER

RACKHAM, KELLY


Provider ID: 624122

Provider Gender: Male

License Number: NP95015717

NPI: 1801497284

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST

FALLBROOK, CA 92028

 Phone: (760) 723-6200

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723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

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

CERTIFIED NURSE

PRACTITIONER


RACKHAM, KELLY

Provider ID: 624122

Provider Gender: Male

License Number: NP95015717

NPI: 1801497284

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

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723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D2. 主治医生名录

PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER




RACKHAM, KELLY

Provider ID: 624122
Provider Gender: Male
License Number: NP95015717
NPI: 1801497284

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

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

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

CERTIFIED NURSE

PRACTITIONER

RACKHAM, KELLY

Provider ID: 624122




Provider Gender: Male

License Number: NP95015717
NPI: 1801497284

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

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
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723-6200

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

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 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

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

CERTIFIED NURSE

PRACTITIONER

RACKHAM, KELLY

Provider ID: 624122

Provider Gender: Male

License Number: NP95015717

NPI: 1801497284

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

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST

FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760)
723-6200
 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

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

FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 624122


NPI: 1851300123


Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

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


FQHC

D2. 主治医生名录


VISTA COMMUNITY CLINIC,


Provider ID: 624122

NPI: 1316501562

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM


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

FQHC


VISTA COMMUNITY CLINIC,


Provider ID: 624122

NPI: 1649662719

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM


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

FQHC


VISTA COMMUNITY CLINIC,


Provider ID: 624122

NPI: 1316501562

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM


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

FQHC

VISTA COMMUNITY CLINIC,


Provider ID: 624122


NPI: 1649662719


 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 321 E ALVARADO ST

FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM


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

FQHC


VISTA COMMUNITY CLINIC,


Provider ID: 624122


NPI: 1851300123

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200


 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

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

PEDIATRICS

D2. 主治医生名录

DELRE, AMANDA

Provider ID: 238960

Provider Gender: Female

NPI: 1548499957

 Provider English Spoken: Y
 Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

Rady Childrens Health Network
AMANDA M DELRE

 1107 S MISSION RD
FALLBROOK, CA 92028

 Phone: (760) 451-0070

Fax: (760) 451-1499

 After Hours Phone: (760)
451-0070

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM


PEDIATRICS

LINARES, YENDI

Provider ID: 538068

Provider Gender: Female

NPI: 1336674886

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:


CHILDRENS HOSP OF LOS
ANGELES, SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network N

YENDI N LINARES

 1107 S MISSION RD
FALLBROOK, CA 92028

 Phone: (760) 451-0070

Fax: (760) 451-1499

 After Hours Phone: (760)
451-0070

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM


PEDIATRICS

ROBINSON, DAISY

Provider ID: 230579

Provider Gender: Female

NPI: 1659389740

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No


Rady Childrens Health Network
DAISY A ROBINSON

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

Fax: (760) 414-3892

 After Hours Phone: (760)
723-6200

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-4:00PM

IMPERIAL BEACH

FAMILY PRACTICE

JOHNSON, DANIEL

Provider ID: 179678

Provider Gender: Male

License Number: 20A9393

NPI: 1245311216

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP

IMPERIAL BEACH HEALTH

CENTER

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 Phone: (619) 429-3733

 After Hours Phone: (619)
429-3733

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-9:00PM

F 8:30AM-5:00PM

SA 8:30AM-2:00PM

D2. 主治医生名录

FAMILY PRACTICE

JOHNSON, DANIEL

Provider ID: 179678

Provider Gender: Male

License Number: 20A9393

NPI: 1245311216

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


IMPERIAL BEACH HEALTH

CENTER

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 Phone: (619) 429-3733

 After Hours Phone: (619)
429-3733

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

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-9:00PM

F 8:30AM-5:00PM

SA 8:30AM-2:00PM

FQHC

IMPERIAL BEACH HEALTH CENTER,

Provider ID: 179678


NPI: 1790718351

Provider English Spoken: Y
Cultural Competency: N


IHP of Southern Cal-PHP

IMPERIAL BEACH HEALTH CENTER

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

IMPERIAL BEACH HEALTH CENTER,

Provider ID: 179678

NPI: 1790718351


Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

IMPERIAL BEACH HEALTH

CENTER

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

RYAN, DANA

Provider ID: 179678

Provider Gender: Female

License Number: A66830

NPI: 1780609990

Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

IMPERIAL BEACH HEALTH
CENTER

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 Phone: (619) 429-3733


 After Hours Phone: (619)
429-3733

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

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

RYAN, DANA

Provider ID: 179678

Provider Gender: Female

License Number: A66830

NPI: 1780609990

Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

IMPERIAL BEACH HEALTH
CENTER

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 Phone: (619) 429-3733

D2. 主治医生名录

📞 After Hours Phone: (619) 429-3733
🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

DOKICH, SRETENKA

Provider ID: 179678
Provider Gender: Female
License Number: A51447
NPI: 1154409035
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Serbian, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No IHP of Southern Cal-PHP IMPERIAL BEACH HEALTH CENTER

📍 949 PALM AVE
IMPERIAL BEACH, CA 91932
📞 Phone: (619) 429-3733
📞 After Hours Phone: (619) 429-3733

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

DOKICH, SRETENKA

Provider ID: 179678
Provider Gender: Female
License Number: A51447
NPI: 1154409035
☑ Provider English Spoken: Y
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Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No IHP of Southern Cal-PHP IMPERIAL BEACH HEALTH CENTER

📍 949 PALM AVE
IMPERIAL BEACH, CA 91932
📞 Phone: (619) 429-3733
📞 After Hours Phone: (619) 429-3733
🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

LA JOLLA

PEDIATRICS

GAINOR, GRETCHEN

Provider ID: 537752
Provider Gender: Female
NPI: 1174504757
☑ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No Rady Childrens Health Network
GRETCHEN C GAINOR

📍 7300 GIRARD AVE STE 106
LA JOLLA, CA 92037
📞 Phone: (858) 459-4351
Fax: (858) 459-4399
📞 After Hours Phone: (858) 459-4351
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS


GANDHI, SHEETAL

Provider ID: 282029
Provider Gender: Female
NPI: 1700858859
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No Rady Childrens Health Network
SHEETAL N GANDHI

📍 4150 REGENTS PARK ROW
STE 355
LA JOLLA, CA 92037
📞 Phone: (858) 457-2043
Fax: (858) 457-2092
📞 After Hours Phone: (858) 457-2043
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):


D2. 主治医生名录


N


 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PEDIATRICS


HUNTER, WENDY

Provider ID: 377597
Provider Gender: Female
NPI: 1053515551
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
Rady Childrens Health Network
WENDY L HUNTER

 7300 GIRARD AVE STE 106
LA JOLLA, CA 92037

 *Phone: (858) 459-4351*

Fax: (858) 459-4399

 *After Hours Phone: (858) 459-4351*


 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):


N


 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM


PEDIATRICS


PARSONS, GENEVIEVE

Provider ID: 24122
Provider Gender: Female
NPI: 1699700914
 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network
GENEVIEVE N PARSONS

 7300 GIRARD AVE STE 106
LA JOLLA, CA 92037

 *Phone: (858) 459-4351*

Fax: (858) 459-4399

 *After Hours Phone: (858) 459-4351*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19


American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM


PEDIATRICS

ROBERTS, KENDALL

Provider ID: 48933
Provider Gender: Male
NPI: 1265762033
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
Rady Childrens Health Network

KENDALL R ROBERTS

 4150 REGENTS PARK ROW
STE 355
LA JOLLA, CA 92037

 *Phone: (858) 457-2043*

Fax: (858) 457-2092

 *After Hours Phone: (858) 457-2043*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):


N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM


PEDIATRICS

TUNG, VIVIAN

Provider ID: 11291
Provider Gender: Female
NPI: 1285665133
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network
VIVIAN V TUNG

 7300 GIRARD AVE STE 106
LA JOLLA, CA 92037

 *Phone: (858) 459-4351*

Fax: (858) 459-4399

 *After Hours Phone: (858) 459-4351*

 *Website: N/A*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

D2. 主治医生名录

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

LA MESA

CERTIFIED NURSE


PRACTITIONER


WARD, KATHERINE


Provider ID: 613881

Provider Gender: Female


NPI: 1477223576

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Rady Childrens Health Network
KATHERINE J WARD

 8881 FLETCHER PKWY STE 200
LA MESA, CA 91942

 *Phone: (619) 464-6434*

Fax: (619) 464-5109

 *After Hours Phone: (619) 464-6434*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-6:00PM
SA 11:30AM-3:30PM

CERTIFIED NURSE


PRACTITIONER


WARD, KATHERINE


Provider ID: 613887

Provider Gender: Female

NPI: 1477223576

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Rady Childrens Health Network
KATHERINE J WARD

 8881 FLETCHER PKWY STE 205
LA MESA, CA 91942

 *Phone: (619) 464-6434*

Fax: (619) 464-5109

 *After Hours Phone: (619) 464-6434*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-6:00PM
SA 11:30AM-3:30PM


FAMILY PRACTICE

PATEL, HEMANSHU

Provider ID: 664660


Provider Gender: Male

NPI: 1255777439

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: BARSTOW COMMUNITY HOSPITAL, DESERT VALLEY HOSPITAL, Providence St Mary Medical Center, VICTOR VALLEY GLOBAL MED CTR

Board Certified Specialty: No
Community Care IPA LLC
HEMANSHU R PATEL

 7339 EL CAJON BLVD STE I
LA MESA, CA 91942

 *Phone: (619) 698-0606*

Fax: (619) 332-5149

 *After Hours Phone: (619) 698-0606*


 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 9:00AM-5:30PM

PEDIATRICS

ALSHEIKH, HUDA

Provider ID: 451191

Provider Gender: Female

NPI: 1487746855

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Arabic*

Cultural Competency: N

Board Certified Specialty: No

Rady Childrens Health Network
HUDA Y ALSHEIKH

 8881 FLETCHER PKWY STE 205
LA MESA, CA 91942

 *Phone: (619) 464-6434*

Fax: (619) 464-5109

 *After Hours Phone: (619) 464-6434*


 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TU 7:30AM-6:00PM

W-F 7:30AM-6:30PM

SA 8:30AM-5:00PM

D2. 主治医生名录

PEDIATRICS

ALSHEIKH, HUDA

Provider ID: 435468

Provider Gender: Female

NPI: 1487746855

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: Yes

Rady Childrens Health Network

HUDA Y ALSHEIKH

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 7:30AM-6:00PM

W-F 7:30AM-6:30PM

SA 8:30AM-5:00PM

PEDIATRICS

CLAY, CORRIE

Provider ID: 536652

Provider Gender: Female

NPI: 1437207750

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT

HOSPITAL, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

Rady Childrens Health Network

CORRIE T CLAY

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 11:30AM-3:30PM

PEDIATRICS

EMPIE, KRISTEN

Provider ID: 648986

Provider Gender: Female

NPI: 1093343105

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Rady Childrens Health Network

KRISTEN L EMPIE

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 11:30AM-3:30PM

PEDIATRICS

EMPIE, KRISTEN

Provider ID: 648987

Provider Gender: Female

NPI: 1093343105

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Rady Childrens Health Network

KRISTEN L EMPIE

8881 FLETCHER PKWY STE
205

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 11:30AM-3:30PM

PEDIATRICS

GIANFORTUNE, RACHEL

Provider ID: 433091

Provider Gender: Female

NPI: 1912193301

Provider English Spoken: Y

Provider Language(s)

D2. 主治医生名录

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network
RACHEL M GIANFORTUNE

8881 FLETCHER PKWY STE 200
LA MESA, CA 91942
Phone: (619) 464-6434
Fax: (619) 464-5109

After Hours Phone: (619) 464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GIANFORTUNE, RACHEL

Provider ID: 450501

Provider Gender: Female

NPI: 1912193301

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network

RACHEL M GIANFORTUNE

8881 FLETCHER PKWY STE 205
LA MESA, CA 91942

Phone: (619) 464-6434

After Hours Phone: (619) 464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

IMUS, PAUL

Provider ID: 239590

Provider Gender: Male

NPI: 1104116680

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, GROSSMONT HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network
PAUL M IMUS

8881 FLETCHER PKWY STE 200
LA MESA, CA 91942

Phone: (619) 401-0404

Fax: (619) 401-0522

After Hours Phone: (619) 401-0404

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

MOFFATT, KYRRA

Provider ID: 275099

Provider Gender: Female

NPI: 1194922419

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS

Board Certified Specialty: No

Rady Childrens Health Network
KYRRA MOFFATT

8881 FLETCHER PKWY STE 200
LA MESA, CA 91942

Phone: (619) 401-0404

Fax: (619) 401-0522

After Hours Phone: (619) 401-0404

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

D2. 主治医生名录

PEDIATRICS

MOLINOS, NICOLE

Provider ID: 538098

Provider Gender: Female

NPI: 1538685524

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: Yes

Rady Childrens Health Network

NICOLE P MOLINOS

6942 UNIVERSITY AVE STE
A

LA MESA, CA 91942

Phone: (619) 698-2184

Fax: (619) 698-2084

After Hours Phone: (619)
698-2184

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

RONQUILLO, RINA

Provider ID: 377359

Provider Gender: Female

NPI: 1407047749

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SHARP MARY BIRCH

HOSP FOR WOMEN AND

NEWBORNS, SHARP

MEMORIAL HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network

RINA R RONQUILLO

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

SHORT, RICHARD

Provider ID: 60736

Provider Gender: Male

NPI: 1568552727

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SHARP MARY BIRCH

HOSP FOR WOMEN AND

NEWBORNS

Board Certified Specialty: Yes

Rady Childrens Health Network

RICHARD L SHORT

8881 FLETCHER PKWY STE

200

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 11:30AM-3:30PM

LAKESIDE

CHIROPRACTOR

PAGE, BIANCA

Provider ID: 353843

Provider Gender: Female

License Number: DC33688

NPI: 1649787607

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE LAKESIDE

10039 VINE ST

LAKESIDE, CA 92040

Phone: (858) 218-3000

After Hours Phone: (858)
218-3000

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

D2. 主治医生名录

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

PAGE, BIANCA

Provider ID: 353843

Provider Gender: Female

License Number: DC33688


NPI: 1649787607

Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE LAKESIDE

 10039 VINE ST

LAKESIDE, CA 92040

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

FERRAILOLO, NATALIE

Provider ID: 353843

Provider Gender: Female

License Number: A152372

NPI: 1306290143

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE LAKESIDE

 10039 VINE ST

LAKESIDE, CA 92040

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

FERRAILOLO, NATALIE

Provider ID: 353843

Provider Gender: Female

License Number: A152372

NPI: 1306290143

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE LAKESIDE

 10039 VINE ST

LAKESIDE, CA 92040

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LIU-BARBARO, DOROTHY

Provider ID: 353843

Provider Gender: Female

License Number: A115342

NPI: 1851602270

Provider English Spoken: Y


Provider Language(s)
Spoken: Chinese, Mandarin,
Spanish

Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE LAKESIDE

 10039 VINE ST

LAKESIDE, CA 92040

 Phone: (619) 440-2751

 After Hours Phone: (619)
440-2751


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LIU-BARBARO, DOROTHY

Provider ID: 353843

Provider Gender: Female

License Number: A115342

NPI: 1851602270





Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin,
Spanish

Cultural Competency: N

D2. 主治医生名录


Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE LAKESIDE

 10039 VINE ST
LAKESIDE, CA 92040
 Phone: (619) 440-2751
 After Hours Phone: (619)
440-2751
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD

HEALTHCARE LAKESIDE,







Provider ID: 353843
NPI: 1932384120
 *Provider English Spoken: Y*
Cultural Competency: N
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE LAKESIDE

 10039 VINE ST
LAKESIDE, CA 92040
 Phone: (858) 218-3000
Fax: (360) 462-2744
 After Hours Phone: (858)
218-3000
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC




NEIGHBORHOOD

HEALTHCARE LAKESIDE,

Provider ID: 353843
NPI: 1932384120
 *Provider English Spoken: Y*
Cultural Competency: N
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE LAKESIDE
 10039 VINE ST
LAKESIDE, CA 92040
 Phone: (858) 218-3000
Fax: (360) 462-2744
 After Hours Phone: (858)
218-3000
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

GENERAL PRACTICE

MANNINO, ELIZABETH

Provider ID: 353843
Provider Gender: Female
License Number: A43914
NPI: 1548290463
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Italian, Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE LAKESIDE
 10039 VINE ST

LAKESIDE, CA 92040

 Phone: (858) 218-3000
 After Hours Phone: (858)
218-3000
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

GENERAL PRACTICE

MANNINO, ELIZABETH

Provider ID: 353843
Provider Gender: Female
License Number: A43914
NPI: 1548290463
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Italian, Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE LAKESIDE
 10039 VINE ST
LAKESIDE, CA 92040
 Phone: (858) 218-3000
 After Hours Phone: (858)
218-3000
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

D2. 主治医生名录

MCFARLAND, NATHAN

Provider ID: 353843

Provider Gender: Male

License Number: A75411

NPI: 1265462196

Provider English Spoken: Y

Provider Language(s)
Spoken: Italian, Spanish


Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE LAKESIDE

 10039 VINE ST

LAKESIDE, CA 92040

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

MCFARLAND, NATHAN

Provider ID: 353843

Provider Gender: Male

License Number: A75411

NPI: 1265462196

Provider English Spoken: Y

Provider Language(s)
Spoken: Italian, Spanish


Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE LAKESIDE

 10039 VINE ST

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 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

LEMON GROVE

CERTIFIED NURSE

PRACTITIONER

ALLEN, KATHERINE

Provider ID: 419139

Provider Gender: Female

License Number: NP95009933

NPI: 1831557024

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San


Diego


LEMON GROVE FAMILY

HEALTH CENTER

 7592 BROADWAY

LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

ALLEN, KATHERINE

Provider ID: 419139

Provider Gender: Female

License Number: NP95009933

NPI: 1831557024

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San


Diego


LEMON GROVE FAMILY

HEALTH CENTER

 7592 BROADWAY

LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A


Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

ARVIZU, PALOMA

Provider ID: 419139


Provider Gender: Female

License Number: NP95008782


NPI: 1689139396


Provider English Spoken: Y

D2. 主治医生名录

 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LEMON GROVE FAMILY HEALTH CENTER



 7592 BROADWAY
LEMON GROVE, CA 91945
 *Phone: (619) 515-2550*
 *After Hours Phone: (619) 515-2550*

 *Website: N/A*
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N




 *Accessibility: CONTACT PROVIDER*
Hours: M-F 9:00AM-5:00PM


CERTIFIED NURSE PRACTITIONER

ARVIZU, PALOMA
Provider ID: 419139
Provider Gender: Female
License Number: NP95008782
NPI: 1689139396

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LEMON GROVE FAMILY HEALTH CENTER



 7592 BROADWAY
LEMON GROVE, CA 91945

 *Phone: (619) 515-2550*
 *After Hours Phone: (619) 515-2550*
 *Website: N/A*
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*
Hours: M-F 9:00AM-5:00PM


CERTIFIED NURSE PRACTITIONER

SMITH, SHARON
Provider ID: 419139
Provider Gender: Female
License Number: RN428876
NPI: 1780603597

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945
 *Phone: (619) 515-2550*
 *After Hours Phone: (619) 515-2550*



 *Website: N/A*
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT*

PROVIDER


CERTIFIED NURSE PRACTITIONER


SMITH, SHARON
Provider ID: 419139
Provider Gender: Female
License Number: NP15444
NPI: 1780603597


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

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945
 *Phone: (619) 515-2550*
 *After Hours Phone: (619) 515-2550*

 *Website: N/A*
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

SMITH, SHARON
Provider ID: 419139
Provider Gender: Female
License Number: RN428876
NPI: 1780603597

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

D2. 主治医生名录

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LEMON GROVE FAMILY HEALTH CENTER
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

SMITH, SHARON

Provider ID: 419139
Provider Gender: Female
License Number: NP15444
NPI: 1780603597
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LEMON GROVE FAMILY HEALTH CENTER
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619)

515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TOTH, JESSICA

Provider ID: 419139
Provider Gender: Female
License Number: NP95001050
NPI: 1578993788
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LEMON GROVE FAMILY HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TOTH, JESSICA

Provider ID: 419139
Provider Gender: Female
License Number: NP95001050
NPI: 1578993788
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LEMON GROVE FAMILY HEALTH CENTER
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER


CERTIFIED NURSE PRACTITIONER


WILLIAMS, TAKISHA


Provider ID: 419139
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LEMON GROVE FAMILY HEALTH CENTER

D2. 主治医生名录

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550


 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


WILLIAMS, TAKISHA

Provider ID: 419139

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE


DORN, TIA

Provider ID: 419139

Provider Gender: Female

License Number: C172318

NPI: 1285074740

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

FAMILY PRACTICE


DORN, TIA

Provider ID: 419139

Provider Gender: Female

License Number: C172318

NPI: 1285074740

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
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 Phone: (619) 515-2550

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515-2550


 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

FAMILY PRACTICE

KIM, YUHEE


Provider ID: 419139

Provider Gender: Female

License Number: A107323

NPI: 1629289400

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Korean


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 主治医生名录

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

KIM, YUHEE

Provider ID: 419139

Provider Gender: Female

License Number: A107323

NPI: 1629289400

Provider English Spoken: Y

Provider Language(s) Spoken: Korean


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 *Phone: (619) 515-2550*

 *After Hours Phone: (619) 515-2550*

 *Website: N/A*


Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FQHC

LEMON GROVE FAMILY HEALTH CENTER,

Provider ID: 419139

NPI: 1427282466

Provider English Spoken: Y


Cultural Competency: N

Family Health Centers of San

Diego

LEMON GROVE FAMILY HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 *Phone: (619) 515-2550*

Fax: (619) 825-9577

 *After Hours Phone: (619) 515-2550*

 *Website: N/A*

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 9:00AM-5:00PM

FQHC

LEMON GROVE FAMILY HEALTH CENTER,

Provider ID: 419139

NPI: 1427282466


Provider English Spoken: Y

Cultural Competency: N

Family Health Centers of San Diego


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Fax: (619) 825-9577

 *After Hours Phone: (619) 515-2550*

 *Website: N/A*

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 9:00AM-5:00PM

INTERNAL MEDICINE

GALLARES, DANIEL

Provider ID: 419139

Provider Gender: Male

License Number: A165925

NPI: 1245689488

Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 *Phone: (619) 515-2550*

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Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

GALLARES, DANIEL

Provider ID: 419139

Provider Gender: Male

License Number: A165925

NPI: 1245689488

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

D2. 主治医生名录

Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

7592 BROADWAY
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Phone: (619) 515-2550

After Hours Phone: (619) 515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

MAHDAI, SUZAN

Provider ID: 419139

Provider Gender: Female

License Number: A154838

NPI: 1598015679

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

7592 BROADWAY
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Phone: (619) 515-2550

After Hours Phone: (619) 515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

INTERNAL MEDICINE

MAHDAI, SUZAN

Provider ID: 419139

Provider Gender: Female

License Number: A154838

NPI: 1598015679

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

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Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 419139

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 419139

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego

D2. 主治医生名录

LEMON GROVE FAMILY HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 419139

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

Family Health Centers of San
Diego

LEMON GROVE FAMILY

HEALTH CENTER

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515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 419139

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

Family Health Centers of San
Diego

LEMON GROVE FAMILY

HEALTH CENTER

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After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 419139

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

Family Health Centers of San
Diego

LEMON GROVE FAMILY

HEALTH CENTER

7592 BROADWAY

LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

D2. 主治医生名录

OBSTETRICS / GYNECOLOGY


CARTER, KHALIL

Provider ID: 419139

Provider Gender: Male

License Number: A113001

NPI: 1225231582

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,
GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR


Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA


Provider ID: 419139

Provider Gender: Female

License Number: A163464

NPI: 1326531401

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No

Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA


Provider ID: 419139

Provider Gender: Female

License Number: A163464

NPI: 1326531401

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San

Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 419139

Provider Gender: Male

License Number: A108228

NPI: 1629277322

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 主治医生名录

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 419139

Provider Gender: Male

License Number: A108228


NPI: 1629277322


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

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 *Website: N/A*


Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY


DORUELO, ASHLEY


Provider ID: 419139

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No

Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

 *7592 BROADWAY
LEMON GROVE, CA 91945*

 *Phone: (619) 515-2550*

 *After Hours Phone: (619) 515-2550*

 *Website: N/A*

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY


DORUELO, ASHLEY


Provider ID: 419139

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

 *7592 BROADWAY*

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 *Phone: (619) 515-2550*

 *After Hours Phone: (619) 515-2550*

 *Website: N/A*

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

FOLCHTORRES-AGUIAR,

BEATRIZ

Provider ID: 419139

Provider Gender: Female

License Number: A148014

NPI: 1457794752

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish, Yue Chinese

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,

Sharp Grossmont Hospital,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

Family Health Centers of San


Diego


LEMON GROVE FAMILY

HEALTH CENTER


 *7592 BROADWAY*

LEMON GROVE, CA 91945

 *Phone: (619) 515-2550*

 *After Hours Phone: (619) 515-2550*

D2. 主治医生名录

 Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


FOLCHTORRES-AGUIAR, BEATRIZ

Provider ID: 419139
Provider Gender: Female
License Number: A148014
NPI: 1457794752

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Yue
Chinese

Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
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 Phone: (619) 515-2550
 After Hours Phone: (619)
515-2550

 Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL): Provider Gender: Female
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN


Provider ID: 419139
Provider Gender: Female
License Number: C174771
NPI: 1053392035

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

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
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 Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN



Provider ID: 419139


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

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 419139
Provider Gender: Female
License Number: A72005
NPI: 1649208711

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

Cultural Competency: N
Hospital Affiliation: SHARP

D2. 主治医生名录

CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 419139

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

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Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 419139

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

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

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

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Phone: (619) 515-2550
After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 419139

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

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

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT

D2. 主治医生名录

PROVIDER		
<u>OBSTETRICS / GYNECOLOGY</u>		
SAPRA, SONIA		LEMON GROVE, CA 91945
Provider ID: 419139		Phone: (619) 515-2550
Provider Gender: Female		After Hours Phone: (619) 515-2550
License Number: A164859		Website: N/A
NPI: 1952751711		Email: valeriade@fhcsd.org
<input type="checkbox"/> Provider English Spoken: Y	<input type="checkbox"/> Provider Language(s) Spoken: Hindi	Medi-Cal Open Panel: Yes
Cultural Competency: N	Cultural Competency: N	Min/Max Age: 0\150
Hospital Affiliation: SCRIPPS MERCY HOSPITAL	Hospital Affiliation: SCRIPPS MERCY HOSPITAL	American Sign Language (ASL): N
Board Certified Specialty: No	Board Certified Specialty: No	Accessibility: CONTACT PROVIDER
Family Health Centers of San Diego	Family Health Centers of San Diego	Hours: M-F 9:00AM-5:00PM
LEMON GROVE FAMILY HEALTH CENTER	LEMON GROVE FAMILY HEALTH CENTER	
<input type="checkbox"/> 7592 BROADWAY LEMON GROVE, CA 91945	<input type="checkbox"/> 7592 BROADWAY LEMON GROVE, CA 91945	
<input type="checkbox"/> Phone: (619) 515-2550	<input type="checkbox"/> Phone: (619) 515-2550	
<input type="checkbox"/> After Hours Phone: (619) 515-2550	<input type="checkbox"/> After Hours Phone: (619) 515-2550	
<input type="checkbox"/> Website: N/A	<input type="checkbox"/> Website: N/A	
Email: valeriade@fhcsd.org	Email: valeriade@fhcsd.org	
Medi-Cal Open Panel: Yes	Medi-Cal Open Panel: Yes	
Min/Max Age: 0\150	Min/Max Age: 0\150	
American Sign Language (ASL): N	American Sign Language (ASL): N	
<input type="checkbox"/> Accessibility: CONTACT PROVIDER	<input type="checkbox"/> Accessibility: CONTACT PROVIDER	
Hours: M-F 9:00AM-5:00PM	Hours: M-F 9:00AM-5:00PM	
<u>OBSTETRICS / GYNECOLOGY</u>	<u>OBSTETRICS / GYNECOLOGY</u>	<u>OBSTETRICS / GYNECOLOGY</u>
SAPRA, SONIA	STABEN, REBECCA	STABEN, REBECCA
Provider ID: 419139	Provider ID: 419139	Provider ID: 419139
Provider Gender: Female	Provider Gender: Female	Provider Gender: Female
License Number: A164859	License Number: 20A13958	License Number: 20A13958
NPI: 1952751711	NPI: 1932269198	NPI: 1932269198
<input type="checkbox"/> Provider English Spoken: Y	<input type="checkbox"/> Provider English Spoken: Y	<input type="checkbox"/> Provider English Spoken: Y
Cultural Competency: N	Cultural Competency: N	Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital	Hospital Affiliation: Sharp Grossmont Hospital	Hospital Affiliation: Sharp Grossmont Hospital
Board Certified Specialty: No	Board Certified Specialty: No	Board Certified Specialty: No
Family Health Centers of San Diego	Family Health Centers of San Diego	Family Health Centers of San Diego
LEMON GROVE FAMILY HEALTH CENTER	LEMON GROVE FAMILY HEALTH CENTER	LEMON GROVE FAMILY HEALTH CENTER
<input type="checkbox"/> 7592 BROADWAY	<input type="checkbox"/> 7592 BROADWAY	<input type="checkbox"/> 7592 BROADWAY

D2. 主治医生名录

PROVIDER
Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 419139

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP*

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Board Certified Specialty: No

*Family Health Centers of San
Diego*

LEMON GROVE FAMILY

HEALTH CENTER

7592 BROADWAY

LEMON GROVE, CA 91945

Phone: (619) 515-2500

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

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

*Accessibility: CONTACT
PROVIDER*

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

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 419139

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP*

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Board Certified Specialty: No

*Family Health Centers of San
Diego*

LEMON GROVE FAMILY

HEALTH CENTER

7592 BROADWAY

LEMON GROVE, CA 91945

Phone: (619) 515-2500

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

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

*Accessibility: CONTACT
PROVIDER*

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

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 419139

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SHARP CORONADO HOSP

AND HEALTHCARE CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

*Family Health Centers of San
Diego*

LEMON GROVE FAMILY

HEALTH CENTER

7592 BROADWAY

LEMON GROVE, CA 91945

Phone: (619) 515-2500

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

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

*Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 419139

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

D2. 主治医生名录

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

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2500
After Hours Phone: (619)
515-2500

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

JACKSON, DANA

Provider ID: 419139

Provider Gender: Female

License Number: 20A14119

NPI: 1689060063

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation:

MARINHEALTH AND

MARINHEALTH MEDICAL

CENTER, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

JACKSON, DANA

Provider ID: 419139

Provider Gender: Female

License Number: 20A14119

NPI: 1689060063

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation:

MARINHEALTH AND

MARINHEALTH MEDICAL
CENTER, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SLEIMAN, JOSEPH

Provider ID: 419139

Provider Gender: Male

License Number: A102060

NPI: 1093976748

Provider English Spoken: Y

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 主治医生名录

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS



SLEIMAN, JOSEPH

Provider ID: 419139

Provider Gender: Male

License Number: A102060

NPI: 1093976748

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, French, Spanish*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 *Phone: (619) 515-2550*

 *After Hours Phone: (619) 515-2550*

 *Website: N/A*


Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

FLEMING, DAVID

Provider ID: 419139

Provider Gender: Male

License Number: PA12416


NPI: 1932329505


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 *Phone: (619) 515-2550*

 *After Hours Phone: (619) 515-2550*

 *Website: N/A*

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

FLEMING, DAVID

Provider ID: 419139

Provider Gender: Male

License Number: PA12416


NPI: 1932329505


 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 *Phone: (619) 515-2550*

 *After Hours Phone: (619) 515-2550*

 *Website: N/A*

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

NATIONAL CITY

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 417102

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Tagalog*


Cultural Competency: N


Board Certified Specialty: No
Operation Samahan

OPERATION SAMAHAN - NATIONAL C

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 *Phone: (844) 200-2426*

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

 *Website: www.operationsamahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-6:00PM

F 8:00AM-5:00PM

D2. 主治医生名录

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 417102

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN -

NATIONAL C

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-6:00PM

F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 418302

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN

GRANGER SCHOOL BASED

 2101 GRANGER AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 418302

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN

GRANGER SCHOOL BASED

 2101 GRANGER AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

DHARKAR-SURBER, SAPNA

Provider ID: 185270

Provider Gender: Female

License Number: NP95013257

NPI: 1538707765

Provider English Spoken: Y

Provider Language(s)
Spoken: Marathi, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

Fax: (619) 434-7310

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

D2. 主治医生名录

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER


DHARKAR-SURBER, SAPNA


Provider ID: 185270

Provider Gender: Female

License Number: NP95013257

NPI: 1538707765

 *Provider English Spoken: Y*

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY


HOSPITAL

Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 *Phone: (619) 434-7308*

Fax: (619) 434-7310

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

 *Website: www.lamaestra.org*

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER


LIM, IMELDA


Provider ID: 418302

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Tagalog*

Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN

GRANGER SCHOOL BASED

 2101 GRANGER AVE
NATIONAL CITY, CA 91950

 *Phone: (844) 200-2426*


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

 *Website: www.operationsamahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 *CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER


LIM, IMELDA

Provider ID: 418302

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Tagalog*

Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN

GRANGER SCHOOL BASED

 2101 GRANGER AVE
NATIONAL CITY, CA 91950

 *Phone: (844) 200-2426*

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

 *Website: www.operationsamahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

LIM, IMELDA


Provider ID: 417102

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Tagalog*


Cultural Competency: N


Board Certified Specialty: No


Operation Samahan

OPERATION SAMAHAN - NATIONAL C

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 *Phone: (844) 200-2426*

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

 *Website: www.operationsamahan.org*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 主治医生名录

N

 *Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM*

CERTIFIED NURSE PRACTITIONER


LIM, IMELDA

Provider ID: 417102

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Tagalog*

Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN -

NATIONAL C

 *2743 HIGHLAND AVE
NATIONAL CITY, CA 91950*

 *Phone: (844) 200-2426*

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


 *Website: www.operationsa
mahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-TH 8:00AM-6:00PM

F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER


LUM, YUIN-WAH

Provider ID: 418930

Provider Gender: Female

License Number: NP95010663

NPI: 1942764477

 *Provider English Spoken: Y*

Cultural Competency: N


Board Certified Specialty: No


*Family Health Centers of San
Diego*

FAMILY HEALTH CTR SD

NATIONAL CITY

 *1000 EUCLID AVE
NATIONAL CITY, CA 91950*

 *Phone: (619) 515-2399*

 *After Hours Phone: (619)
515-2399*

 *Website: www.fhcsd.org*

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

CERTIFIED NURSE PRACTITIONER


LUM, YUIN-WAH

Provider ID: 418930

Provider Gender: Female

License Number: NP95010663

NPI: 1942764477

 *Provider English Spoken: Y*

Cultural Competency: N


Board Certified Specialty: No

*Family Health Centers of San
Diego*

FAMILY HEALTH CTR SD

NATIONAL CITY

 *1000 EUCLID AVE
NATIONAL CITY, CA 91950*

 *Phone: (619) 515-2399*

 *After Hours Phone: (619)
515-2399*

 *Website: www.fhcsd.org*


Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

CERTIFIED NURSE PRACTITIONER

NEVAREZ, IRENE

Provider ID: 185270

Provider Gender: Female

License Number: NP95009891

NPI: 1003166646

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

 *217 HIGHLAND AVE
NATIONAL CITY, CA 91950*

 *Phone: (619) 564-8765*

 *After Hours Phone: (619)
564-8765*

 *Website: www.lamaestra.or
g*

Email:

aschmaltz@lamaestra.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. 主治医生名录

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

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


NEVAREZ, IRENE

Provider ID: 185270

Provider Gender: Female

License Number: NP95009891

NPI: 1003166646

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 564-8765

 After Hours Phone: (619)
564-8765

 Website: www.lamaestra.org

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE


OCHOA, ERLINDA

Provider ID: 185270

Provider Gender: Female

License Number: NP4430

NPI: 1346437464

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER


OCHOA, ERLINDA


Provider ID: 185270

Provider Gender: Female

License Number: NP4430

NPI: 1346437464

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

REAL, MARIA


Provider ID: 185270

Provider Gender: Female

License Number: NP17328

NPI: 1548450471

 Provider English Spoken: Y

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA





Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

D2. 主治医生名录




INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 After Hours Phone: (619)
434-7308
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER

REAL, MARIA

Provider ID: 185270
Provider Gender: Female
License Number: NP17328
NPI: 1548450471
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Catalan, German,
Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER


REID, EMILY






Provider ID: 185270
Provider Gender: Female
License Number: NP95002766
NPI: 1083081467
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
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 217 HIGHLAND AVE
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Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER

REID, EMILY

Provider ID: 185270
Provider Gender: Female
License Number: NP95002766
NPI: 1083081467
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
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Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM





CERTIFIED NURSE PRACTITIONER

VERDUZCO GONZALEZ, AURORA

Provider ID: 185270
Provider Gender: Female
License Number: NP95001961
NPI: 1932452323

D2. 主治医生名录

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
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 217 HIGHLAND AVE
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Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

VERDUZCO GONZALEZ,



AURORA

Provider ID: 185270

Provider Gender: Female

License Number: NP95001961

NPI: 1932452323


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

Cultural Competency: N

Board Certified Specialty: No

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

VILLANUEVADEGUTIE,

BERENICE

Provider ID: 185270

Provider Gender: Female

License Number: NP95002188

NPI: 1952795536

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

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Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

VILLANUEVADEGUTIE,

BERENICE

Provider ID: 185270

Provider Gender: Female

License Number: NP95002188





NPI: 1952795536

 Provider English Spoken: Y
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Board Certified Specialty: No

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American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE



PRACTITIONER

WILLIAMS, BREAHA





Provider ID: 185270


D2. 主治医生名录

Provider Gender: Female
License Number: NP95001840
NPI: 1063884864

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

Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
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American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER





WILLIAMS, BREAHA


Provider ID: 185270
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864

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

Cultural Competency: N
Board Certified Specialty: No
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Medi-Cal Open Panel: Yes
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American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM





CHIROPRACTOR

HOURIHAN, KEITH


Provider ID: 185270
Provider Gender: Male
License Number: DC29314
NPI: 1306916994

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

Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
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Email:
aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: TH 8:00AM-2:00PM



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American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: TH 8:00AM-2:00PM

FAMILY PRACTICE **ALGHAMDI, ASMA**

D2. 主治医生名录

Provider ID: 227418

Provider Gender: Female

License Number: A167529


NPI: 1316310840


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
PARADISE HILLS

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

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

ALGHAMDI, ASMA

Provider ID: 227418

Provider Gender: Female

License Number: A167529


NPI: 1316310840

Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

ANDAYA, MIKHAEL

Provider ID: 418930

Provider Gender: Male

License Number: A176878

NPI: 1780189209

Provider English Spoken: Y

Provider Language(s)

Spoken: Tagalog

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego

FAMILY HEALTH CTR SD

NATIONAL CITY

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

 After Hours Phone: (619)
515-2399

 Website: www.fhcsd.org
Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ANDAYA, MIKHAEL

Provider ID: 418930

Provider Gender: Male

License Number: A176878

NPI: 1780189209

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Provider Language(s)

Spoken: Tagalog

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


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 Website: www.fhcsd.org
Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BAEZ, BEATRICE

Provider ID: 417102

Provider Gender: Female

License Number: A74777

NPI: 1245372507

Provider English Spoken: Y

Provider Language(s)





Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Operation Samahan

D2. 主治医生名录

OPERATION SAMAHAN - NATIONAL C

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426
 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

FAMILY PRACTICE

BAEZ, BEATRICE

Provider ID: 417102

Provider Gender: Female

License Number: A74777

NPI: 1245372507

Provider English Spoken: Y




Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Operation Samahan

OPERATION SAMAHAN - NATIONAL C

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426
 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

FAMILY PRACTICE

CAMPBELL, BRIANNA

Provider ID: 227418

Provider Gender: Female

License Number: A157488

NPI: 1316479892

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N




Hospital Affiliation: CHULA
VISTA COMM HOSP

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PARADISE HILLS

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CAMPBELL, BRIANNA

Provider ID: 227418
Provider Gender: Female

License Number: A157488

NPI: 1316479892

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: CHULA
VISTA COMM HOSP


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

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 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CANLAS, AVELINO

Provider ID: 417102

Provider Gender: Male

License Number: A74854

NPI: 1275682528

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL

D2. 主治医生名录

Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN -
NATIONAL C

📍 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

☎ Phone: (844) 200-2426

🕒 After Hours Phone: (844)
200-2426

🌐 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

CANLAS, AVELINO

Provider ID: 417102

Provider Gender: Male

License Number: A74854

NPI: 1275682528

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL

Board Certified Specialty: No
Operation Samahan
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NATIONAL C

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🕒 After Hours Phone: (844)
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🌐 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA

Provider ID: 227412

Provider Gender: Female

License Number: A78373

NPI: 1295746618

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
NATIONAL CITY

📍 1136 D AVE
NATIONAL CITY, CA 91950

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: [syhealth.org/clinic
s/national- city- family- clin
ic- 1](http://syhealth.org/clinic
s/national- city- family- clin
ic- 1)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA

Provider ID: 227412

Provider Gender: Female

License Number: A78373

NPI: 1295746618

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
NATIONAL CITY

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☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: [syhealth.org/clinic
s/national- city- family- clin
ic- 1](http://syhealth.org/clinic
s/national- city- family- clin
ic- 1)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CEVALLOS, JAMES

Provider ID: 227412

Provider Gender: Male

License Number: A55469

NPI: 1720181829

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

D2. 主治医生名录

VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

NATIONAL CITY

1136 D AVE
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 474-3722

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CEVALLOS, JAMES

Provider ID: 227412

Provider Gender: Male

License Number: A55469

NPI: 1720181829

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

NATIONAL CITY

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NATIONAL CITY, CA 91950

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Fax: (619) 474-3722

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

DILLON, MAYRA

Provider ID: 227412

Provider Gender: Female

License Number: A112571

NPI: 1629232715

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

NATIONAL CITY

1136 D AVE
NATIONAL CITY, CA 91950

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Fax: (619) 336-2323

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

DILLON, MAYRA

Provider ID: 227412

Provider Gender: Female

License Number: A112571

NPI: 1629232715

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

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Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LANUZA, MARK

D2. 主治医生名录

Provider ID: 418930
Provider Gender: Male
License Number: 20A18460
NPI: 1992230593
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HEALTH CTR SD
NATIONAL CITY
 1000 EUCLID AVE
NATIONAL CITY, CA 91950
 Phone: (619) 515-2399
 After Hours Phone: (619) 515-2399
 Website: www.fhcsd.org
Email: lucinaj@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER


Hours: M 8:30AM-3:30PM
TU 10:30AM-5:30PM
W 8:30AM-3:30PM
TH 10:30AM-5:30PM
F 8:30AM-3:30PM

FAMILY PRACTICE

LANUZA, MARK

Provider ID: 418930
Provider Gender: Male
License Number: 20A18460
NPI: 1992230593
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San

Diego
FAMILY HEALTH CTR SD
NATIONAL CITY
 1000 EUCLID AVE
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 Phone: (619) 515-2399
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

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



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TU 10:30AM-5:30PM
W 8:30AM-3:30PM
TH 10:30AM-5:30PM
F 8:30AM-3:30PM




FAMILY PRACTICE

LAW, KAREN

Provider ID: 227418
Provider Gender: Female
License Number: A138534
NPI: 1205253150
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: CHULA VISTA COMM HOSP
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
PARADISE HILLS

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100






 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/paradise-hills-family-clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

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License Number: A138534
NPI: 1205253150
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: CHULA VISTA COMM HOSP

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
PARADISE HILLS

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/paradise-hills-family-clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

D2. 主治医生名录

FAMILY PRACTICE


LEUTE, ERIC

Provider ID: 227418

Provider Gender: Male

License Number: A80832

NPI: 1720171507

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

PARADISE HILLS

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

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


LEUTE, ERIC

Provider ID: 227418

Provider Gender: Male

License Number: A80832

NPI: 1720171507

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

PARADISE HILLS

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

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


MEDINA, ALEXANDER

Provider ID: 361428

Provider Gender: Male

License Number: A133539

NPI: 1467714436

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH
BAY

 330 E 8TH ST
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Email: dinah.pierce@syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MEDINA, ALEXANDER


Provider ID: 361428

Provider Gender: Male

License Number: A133539

NPI: 1467714436

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH

BAY

 330 E 8TH ST
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Email:


dinah.pierce@syhealth.org

D2. 主治医生名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MOHAMEDI, NADIA

Provider ID: 227418

Provider Gender: Female

License Number: A146819

NPI: 1477947364

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

PARADISE HILLS

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

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


MOHAMEDI, NADIA

Provider ID: 227418

Provider Gender: Female

License Number: A146819

NPI: 1477947364

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

PARADISE HILLS

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

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


NAVARRO, VANESSAMARIA


Provider ID: 227418

Provider Gender: Female

License Number: A113624

NPI: 1952563421

 Provider English Spoken: Y

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH


PARADISE HILLS

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

 Phone: (619) 662-4100

 Fax: (619) 259-2807

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NAVARRO, VANESSAMARIA


Provider ID: 227418

Provider Gender: Female

License Number: A113624

NPI: 1952563421

 Provider English Spoken: Y

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PARADISE HILLS


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

 Phone: (619) 662-4100

 Fax: (619) 259-2807

D2. 主治医生名录


 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


NIKZAD, JASON

Provider ID: 361428

Provider Gender: Male

License Number: 20A12653

NPI: 1508121674

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi, Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SOUTH
BAY

 330 E 8TH ST
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org
Email:

dinah.pierce@syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


NIKZAD, JASON

Provider ID: 361428

Provider Gender: Male

License Number: 20A12653

NPI: 1508121674

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi, Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SOUTH
BAY

 330 E 8TH ST
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Email:

dinah.pierce@syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


NOLASCO, JOANNA


Provider ID: 227412

Provider Gender: Female

License Number: A138919

NPI: 1154749315

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

NATIONAL CITY

 1136 D AVE
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

NOLASCO, JOANNA

Provider ID: 227412

Provider Gender: Female

License Number: A138919

NPI: 1154749315

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

NATIONAL CITY


 1136 D AVE
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: syhealth.org/clinics/national-city-family-clinic





D2. 主治医生名录


ic-1
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

OCEGUEDA, JOSHUA


Provider ID: 227412
Provider Gender: Male
License Number: A165184
NPI: 1336643345
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
NATIONAL CITY





 1136 D AVE
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM


FAMILY PRACTICE

OCEGUEDA, JOSHUA

Provider ID: 227412
Provider Gender: Male
License Number: A165184
NPI: 1336643345
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
NATIONAL CITY



 1136 D AVE
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE





RICHARDSON, DANIELLE


Provider ID: 227418
Provider Gender: Female
License Number: A127555
NPI: 1609142892
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French,
Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH



PARADISE HILLS

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/paradise-hills-family-clinic




Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



RICHARDSON, DANIELLE

Provider ID: 227418
Provider Gender: Female
License Number: A127555
NPI: 1609142892
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French,
Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
PARADISE HILLS



 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)

D2. 主治医生名录


662-4100
 Website: syhealth.org/clinics/paradise-hills-family-clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


FAMILY PRACTICE

ROBERTS, POMAI

Provider ID: 227412
Provider Gender: Female
License Number: A103218
NPI: 1023278314
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
NATIONAL CITY



 1136 D AVE
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


ROBERTS, POMAI

Provider ID: 227412
Provider Gender: Female
License Number: A103218
NPI: 1023278314
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
NATIONAL CITY

 1136 D AVE
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1



Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


SCHUMAKER, EDWARD

Provider ID: 185270
Provider Gender: Male
License Number: 20A6433
NPI: 1184616872
 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC
 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 After Hours Phone: (619) 434-7308



 Website: www.lamaestra.org

Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):




N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SCHUMAKER, EDWARD


Provider ID: 185270
Provider Gender: Male
License Number: 20A6433
NPI: 1184616872
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 After Hours Phone: (619) 434-7308








 Website: www.lamaestra.org

D2. 主治医生名录

g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER








FAMILY PRACTICE

SNOOK, BRIAN

Provider ID: 227418
Provider Gender: Male
License Number: 20A11518
NPI: 1295977353
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
PARADISE HILLS
 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
Fax: (619) 259-2806
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinic
s/paradise-hills-family-clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER



FAMILY PRACTICE

SNOOK, BRIAN





Provider ID: 227418
Provider Gender: Male
License Number: 20A11518
NPI: 1295977353
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
PARADISE HILLS
 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
Fax: (619) 259-2806
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinic
s/paradise-hills-family-clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

STONES, RACHEL







Provider ID: 185270
Provider Gender: Female
License Number: A167184
NPI: 1720583040
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 280-4213
 After Hours Phone: (619)
280-4213
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: TH 8:00AM-2:00PM

FAMILY PRACTICE

STONES, RACHEL

Provider ID: 185270
Provider Gender: Female
License Number: A167184
NPI: 1720583040
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC
 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 280-4213
 After Hours Phone: (619)
280-4213
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org

D2. 主治医生名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Provider ID: 227418

N

 Accessibility: CONTACT PROVIDER

Hours: TH 8:00AM-2:00PM

FAMILY PRACTICE

VELASQUEZ, SHARON

Provider ID: 227418

Provider Gender: Female

License Number: A71304

NPI: 1972732584

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


PARADISE HILLS

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

 Phone: (619) 662-4100

Fax: (619) 259-2807

 After Hours Phone: (619)
662-4100


 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Provider ID: 418930

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

VELASQUEZ, SHARON

Provider Gender: Female

License Number: A71304

NPI: 1972732584

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


PARADISE HILLS

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

 Phone: (619) 662-4100

Fax: (619) 259-2807

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FQHC

FAMILY HEALTH CTR SD

NATIONAL CITY,

Provider ID: 418930

NPI: 1417409228

Provider English Spoken: Y
Cultural Competency: N


Family Health Centers of San

Diego

FAMILY HEALTH CTR SD

NATIONAL CITY

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

Fax: (619) 269-0053

 After Hours Phone: (619)
515-2399

 Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

FQHC

FAMILY HEALTH CTR SD

NATIONAL CITY,

Provider ID: 418930

NPI: 1417409228


Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San
Diego

FAMILY HEALTH CTR SD

NATIONAL CITY

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

Fax: (619) 269-0053

 After Hours Phone: (619)
515-2399

 Website: www.fhcsd.org

D2. 主治医生名录

Email: lucinaj@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-3:30PM
TU 10:30AM-5:30PM
W 8:30AM-3:30PM
TH 10:30AM-5:30PM
F 8:30AM-3:30PM

FQHC


LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185270
NPI: 1336353721

 Provider English Spoken: Y
Cultural Competency: N
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
Fax: (619) 434-7310


 After Hours Phone: (619) 434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: TH 8:00AM-2:00PM

FQHC

LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185270
NPI: 1336353721

 Provider English Spoken: Y
Cultural Competency: N

La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
Fax: (619) 434-7310

 After Hours Phone: (619) 434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: TH 8:00AM-2:00PM



FQHC

OPERATION SAMAHAN - NATIONAL C,


Provider ID: 417102
NPI: 1801907449


 Provider English Spoken: Y
Cultural Competency: N

Operation Samahan
OPERATION SAMAHAN - NATIONAL C

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

Fax: (619) 474-3919

 After Hours Phone: (844) 200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM



FQHC

OPERATION SAMAHAN - NATIONAL C,


Provider ID: 417102
NPI: 1801907449

 Provider English Spoken: Y
Cultural Competency: N

Operation Samahan
OPERATION SAMAHAN - NATIONAL C

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
Fax: (619) 474-3919

 After Hours Phone: (844) 200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM

D2. 主治医生名录

FQHC

OPERATION SAMAHAN

GRANGER SCHOOL BASED,

Provider ID: 418302

NPI: 1205134517


 Provider English Spoken: Y
Cultural Competency: N

Operation Samahan

OPERATION SAMAHAN


GRANGER SCHOOL BASED

 2101 GRANGER AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

Fax: (619) 434-8999

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

OPERATION SAMAHAN

GRANGER SCHOOL BASED,

Provider ID: 418302

NPI: 1205134517


 Provider English Spoken: Y
Cultural Competency: N

Operation Samahan

OPERATION SAMAHAN

GRANGER SCHOOL BASED


 2101 GRANGER AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

Fax: (619) 434-8999

 After Hours Phone: (844)

200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH

NATIONAL CITY,

Provider ID: 227412

NPI: 1003869363


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


NATIONAL CITY

 1136 D AVE
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 474-3722

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH

NATIONAL CITY,

Provider ID: 227412

NPI: 1003869363


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH


NATIONAL CITY

 1136 D AVE
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 474-3722

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH

PARADISE HILLS,

Provider ID: 227418

NPI: 1598907487


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH


PARADISE HILLS

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


 Phone: (619) 662-4100

Fax: (619) 259-2807

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic


D2. 主治医生名录



nic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC


SAN YSIDRO HEALTH PARADISE HILLS,

Provider ID: 227418
NPI: 1598907487


 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
PARADISE HILLS

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
Fax: (619) 259-2807

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM


FQHC


SAN YSIDRO HEALTH SOUTH BAY,


Provider ID: 361428
NPI: 1851757215

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SOUTH
BAY

 330 E 8TH ST
NATIONAL CITY, CA 91950


 Phone: (619) 662-4100
Fax: (619) 434-3514

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Email:

dinah.pierce@syhealth.org


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM


FQHC

SAN YSIDRO HEALTH SOUTH BAY,

Provider ID: 361428
NPI: 1851757215

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SOUTH
BAY

 330 E 8TH ST
NATIONAL CITY, CA 91950


 Phone: (619) 662-4100
Fax: (619) 434-3514

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Email:

dinah.pierce@syhealth.org



Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM




HEPATOLOGY

GISH, ROBERT

Provider ID: 185270
Provider Gender: Male
License Number: G45632
NPI: 1548281322


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Dutch, French,
Spanish, Vietnamese

Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org
Email:

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM

HEPATOLOGY

D2. 主治医生名录


GISH, ROBERT


Provider ID: 185270

Provider Gender: Male

License Number: G45632

NPI: 1548281322

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Dutch, French,
Spanish, Vietnamese


Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org


Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM


INTERNAL MEDICINE


BRAVERMAN, IRA

Provider ID: 10635

Provider Gender: Male

NPI: 1124039755

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL


Board Certified Specialty: Yes

Imperial Health Holdings


Medical Group-SD

IRA R BRAVERMAN

 610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950

 Phone: (619) 267-8181

Fax: (619) 479-6750

 After Hours Phone: (619)
267-8181

 Website: N/A

Email: SIEAB@AOL.COM

Medi-Cal Open Panel: Yes

Min/Max Age: 18\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM


INTERNAL MEDICINE


HEKMAT, RAZI

Provider ID: 78388

Provider Gender: Male

NPI: 1871501205

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL


Board Certified Specialty: No

Imperial Health Holdings

Medical Group-SD

RAZI D HEKMAT

 610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950

 Phone: (619) 267-8181

Fax: (619) 479-6750

 After Hours Phone: (619)

267-8181

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

INTERNAL MEDICINE

LAMANTIA, MICHELE


Provider ID: 227412

Provider Gender: Female

License Number: G71855

NPI: 1124176102

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

NATIONAL CITY

 1136 D AVE
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 361428

D2. 主治医生名录

Provider Gender: Female

License Number: G71855

NPI: 1124176102

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH
BAY

330 E 8TH ST

NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Email:

dinah.pierce@syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 227412

Provider Gender: Female

License Number: G71855

NPI: 1124176102

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

NATIONAL CITY

1136 D AVE

NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinic
s/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 361428

Provider Gender: Female

License Number: G71855

NPI: 1124176102

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH
BAY

330 E 8TH ST

NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Email:

dinah.pierce@syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

ROUEL, WADI

Provider ID: 185270

Provider Gender: Male

License Number: C55979

NPI: 1740254713

Provider English Spoken: Y

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

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, GROSSMONT

HOSPITAL

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

217 HIGHLAND AVE

NATIONAL CITY, CA 91950

Phone: (619) 434-7308

After Hours Phone: (619)
434-7308

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

INTERNAL MEDICINE

ROUEL, WADI

Provider ID: 185270

D2. 主治医生名录

Provider Gender: Male

License Number: C55979

NPI: 1740254713

☐ Provider English Spoken: Y

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

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, GROSSMONT

HOSPITAL

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

📍 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

☎ Phone: (619) 434-7308

🕒 After Hours Phone: (619)
434-7308

🌐 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

NEUROLOGY

CANTU-REYNA, GUILLERMO

Provider ID: 185270

Provider Gender: Male

License Number: A41375

NPI: 1447389101

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

📍 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

☎ Phone: (619) 798-3977

🕒 After Hours Phone: (619)
798-3977

🌐 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

NEUROLOGY

CANTU-REYNA, GUILLERMO

Provider ID: 185270

Provider Gender: Male

License Number: A41375

NPI: 1447389101

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

📍 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

☎ Phone: (619) 798-3977

🕒 After Hours Phone: (619)
798-3977

🌐 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ASLIAN, AZITA

Provider ID: 227418

Provider Gender: Female

License Number: A118227

NPI: 1851667661

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Faroese, Fataleka

Cultural Competency: N

Hospital Affiliation: Hemet

Global Medical Center, Menifee

Global Medical Center,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PARADISE HILLS








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

☎ Phone: (619) 662-4100







🕒 After Hours Phone: (619)
662-4100

🌐 Website: syhealth.org/clinic

D2. 主治医生名录


<p>s/paradise- hills- family- clinic Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p>	<p> Accessibility: CONTACT PROVIDER</p>	<p>Provider ID: 30132 Provider Gender: Male NPI: 1376625913 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Arabic Cultural Competency: N Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA Board Certified Specialty: Yes Rady Childrens Health Network MOHAMMED T BAILONY  655 EUCLID AVE STE 205 NATIONAL CITY, CA 91950  Phone: (619) 470-1945 Fax: (619) 475-5048  After Hours Phone: (619) 470-1945  Website: N/A Email: BAILONY@YAHOO.COM Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Hours: M-F 9:00AM-5:00PM</p>
<p><u>OBSTETRICS / GYNECOLOGY</u> ASLIAN, AZITA Provider ID: 227418 Provider Gender: Female License Number: A118227 NPI: 1851667661 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Faroese, Fataleka Cultural Competency: N Hospital Affiliation: Hemet Global Medical Center, Menifee Global Medical Center, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH PARADISE HILLS  2400 E 8TH ST STE A NATIONAL CITY, CA 91950  Phone: (619) 662-4100  After Hours Phone: (619) 662-4100  Website: syhealth.org/clinics/paradise- hills- family- clinic Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N</p>	<p><u>PEDIATRICS</u> BAILONY, AHMAD Provider ID: 146949 Provider Gender: Male NPI: 1790914422 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Arabic, Spanish Cultural Competency: N Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL Board Certified Specialty: Yes Rady Childrens Health Network AHMAD L BAILONY  655 EUCLID AVE STE 205 NATIONAL CITY, CA 91950  Phone: (619) 470-1945 Fax: (619) 475-5048  After Hours Phone: (619) 470-1945  Website: N/A Email: BAILONYPEDIATRICS@GMAIL.COM Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Hours: M-F 9:00AM-5:00PM</p>	<p><u>PEDIATRICS</u> BARBADILLO, TERESITA Provider ID: 84258 Provider Gender: Female NPI: 1952416695</p>
<p><u>PEDIATRICS</u> BAILONY, MOHAMMED</p>		






D2. 主治医生名录

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: PARADISE
VALLEY HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
TERESITA T BARBADILLO
 655 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
 Phone: (619) 267-8601
Fax: (619) 267-2242
 After Hours Phone: (619)
267-8601
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 9:00AM-5:00PM

PEDIATRICS





BONSU, BEMA


Provider ID: 227412
Provider Gender: Male
License Number: C55180
NPI: 1932106986
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
NATIONAL CITY

 1136 D AVE
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinic
s/national- city- family- clin
ic- 1
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS



BONSU, BEMA

Provider ID: 227412
Provider Gender: Male
License Number: C55180
NPI: 1932106986
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
NATIONAL CITY
 1136 D AVE
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinic
s/national- city- family- clin
ic- 1
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150






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

PEDIATRICS

CONE, STEPHANIE

Provider ID: 185270
Provider Gender: Female
License Number: A123929
NPI: 1437444858
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, RADY CHILDRENS
HOSPITAL SAN DIEGO
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 After Hours Phone: (619)
434-7308
 Website: www.lamaestra.or
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

D2. 主治医生名录

CONE, STEPHANIE

Provider ID: 185270

Provider Gender: Female

License Number: A123929

NPI: 1437444858

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

After Hours Phone: (619)
434-7308

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

DAY, CHRISTOPHER

Provider ID: 418930

Provider Gender: Male

License Number: A163862

NPI: 1184121253

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HEALTH CTR SD

NATIONAL CITY

1000 EUCLID AVE
NATIONAL CITY, CA 91950

Phone: (619) 515-2399

After Hours Phone: (619)
515-2399

Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

PEDIATRICS

DAY, CHRISTOPHER

Provider ID: 418930

Provider Gender: Male

License Number: A163862

NPI: 1184121253

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HEALTH CTR SD

NATIONAL CITY

1000 EUCLID AVE
NATIONAL CITY, CA 91950

Phone: (619) 515-2399

After Hours Phone: (619)
515-2399

Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

PEDIATRICS

FRESNO, BLANCA

Provider ID: 102433

Provider Gender: Female

NPI: 1346258787

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

Rady Childrens Health Network

BLANCA I FRESNO



655 EUCLID AVE STE 207
NATIONAL CITY, CA 91950

Phone: (619) 475-4575

Fax: (619) 475-4578

After Hours Phone: (619)
475-4575




D2. 主治医生名录



 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: SU-SA 8:00AM-5:00PM

PEDIATRICS

GARCIA, RAFAEL


Provider ID: 84954
Provider Gender: Male
NPI: 1053414086
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
Rady Childrens Health Network
RAFAEL A GARCIA





 610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 Phone: (619) 527-7700
Fax: (619) 527-3226
 After Hours Phone: (619)
527-7700


 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

RANA, DEBORAH


Provider ID: 227418
Provider Gender: Female
License Number: G88347
NPI: 1033191457
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, CHULA
VISTA COMM HOSP
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
PARADISE HILLS

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinic
s/paradise-hills-family-cli
nic


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

RANA, DEBORAH



Provider ID: 227418
Provider Gender: Female
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NPI: 1033191457
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Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,



SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, CHULA
VISTA COMM HOSP
Board Certified Specialty: No
IHP of Southern Cal-PHP
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nic

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

UY, CARMELITA

Provider ID: 424443
Provider Gender: Female
NPI: 1154431484
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Rady Childrens Health Network
CARMELITA UY

 2340 E 8TH ST STE E
NATIONAL CITY, CA 91950
 Phone: (619) 216-8500

D2. 主治医生名录

Fax: (619) 216-8511

☎ After Hours Phone: (619) 216-8511

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

VALENCIA, MARILES

Provider ID: 104060

Provider Gender: Female

NPI: 1275541625

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, PARADISE VALLEY

HOSPITAL, SHARP CHULA

VISTA MED CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network

MARILES F VALENCIA

📍 655 EUCLID AVE STE 207
NATIONAL CITY, CA 91950

☎ Phone: (619) 475-4575

Fax: (619) 475-4578

☎ After Hours Phone: (619) 475-4575

🌐 Website: N/A

Email:

PEDIATRICSINPARADISE@YAHOO.COM

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

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

PHYSICIANS ASSISTANT

ARMENTA, JORGE

Provider ID: 185270

Provider Gender: Male

License Number: PA13694

NPI: 1346382611

☐ Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

📍 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

☎ Phone: (619) 434-7308

☎ After Hours Phone: (619) 434-7308

🌐 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

PHYSICIANS ASSISTANT

ARMENTA, JORGE

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NPI: 1346382611

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Board Certified Specialty: No

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

PHYSICIANS ASSISTANT

BANGS, SASHA

Provider ID: 418930

Provider Gender: Female

License Number: PA55660

NPI: 1720524374

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HEALTH CTR SD

NATIONAL CITY

📍 1000 EUCLID AVE
NATIONAL CITY, CA 91950

☎ Phone: (619) 515-2399

D2. 主治医生名录

📞 After Hours Phone: (619) 515-2399

🌐 Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Cultural Competency: N

N

♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BANGS, SASHA

Provider ID: 418930

Provider Gender: Female

License Number: PA55660

NPI: 1720524374

📄 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

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NATIONAL CITY

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📞 After Hours Phone: (619) 515-2399

🌐 Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Cultural Competency: N

N

♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

MARTINEZ-MURGUIA, IRENE

Provider ID: 185270

Provider Gender: Female

License Number: PA20296

NPI: 1447492889

📄 Provider English Spoken: Y

📄 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

📍 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

📞 Phone: (619) 434-7308

📞 After Hours Phone: (619) 434-7308

🌐 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

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Provider Gender: Female

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NPI: 1447492889

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📄 Provider Language(s)
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Cultural Competency: N

Board Certified Specialty: No

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📞 After Hours Phone: (619) 434-7308

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Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 185270

Provider Gender: Female

License Number: PA21625

NPI: 1154609790

📄 Provider English Spoken: Y

📄 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

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📍 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

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📞 After Hours Phone: (619) 434-7308

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Email:

aschmaltz@lamaestra.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 主治医生名录



N





 **Accessibility: CONTACT PROVIDER**
Hours: M-F 8:00AM-5:30PM

PHYSICIANS ASSISTANT

MERCER, KELLY


Provider ID: 185270
Provider Gender: Female
License Number: PA21625
NPI: 1154609790

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
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American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**
Hours: M-F 8:00AM-5:30PM

OCEANSIDE





CERTIFIED NURSE

PRACTITIONER


BAEK, KILHYO

Provider ID: 206341
Provider Gender: Female
License Number: NP95003571
NPI: 1053776914

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Korean
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 **Accessibility: CONTACT PROVIDER**
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM




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BAEK, KILHYO


Provider ID: 206341
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Spoken: Korean
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Board Certified Specialty: No
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American Sign Language (ASL):

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Min/Max Age: 0\999

American Sign Language (ASL):
N

 **Accessibility: CONTACT**



D2. 主治医生名录

PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER




BAEK, KILHYO

Provider ID: 206341
Provider Gender: Female
License Number: NP95003571
NPI: 1053776914

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

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC


 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER




BAEK, KILHYO

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Provider Gender: Female
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NPI: 1053776914

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 Provider Language(s)
Spoken: Korean
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

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 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER




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Provider Gender: Female
License Number: NP95003571
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IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER




BINETTE, DONYA

Provider ID: 480247
Provider Gender: Female
License Number: NP95001653
NPI: 1427325166

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

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE


 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 757-5841
 After Hours Phone: (760)
757-5841

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

CERTIFIED NURSE

D2. 主治医生名录

PRACTITIONER

BINETTE, DONYA

Provider ID: 480247

Provider Gender: Female

License Number: NP95001653

NPI: 1427325166

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 757-5841

 After Hours Phone: (760)
757-5841

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

BINETTE, DONYA

Provider ID: 480247

Provider Gender: Female

License Number: NP95001653

NPI: 1427325166

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 757-5841

 After Hours Phone: (760)
757-5841

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

BINETTE, DONYA

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Provider Gender: Female

License Number: NP95001653

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Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 757-5841

 After Hours Phone: (760)
757-5841

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 402436

Provider Gender: Female

License Number: NP95007885

NPI: 1922421288

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


VISTA COMMUNITY CLINIC

HORNE STREET

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000


 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 402436

Provider Gender: Female

License Number: NP95007885

NPI: 1922421288


Provider English Spoken: Y


Cultural Competency: N

D2. 主治医生名录

*Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
HORNE STREET*

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

*Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM*

CERTIFIED NURSE

PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 402436

Provider Gender: Female


*License Number: NP95007885
NPI: 1922421288*


 *Provider English Spoken: Y
Cultural Competency: N*

*Board Certified Specialty: No
IHP of Southern Cal-PHP*

*VISTA COMMUNITY CLINIC
HORNE STREET*

 517 N HORNE ST
OCEANSIDE, CA 92054

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631-5000

 Website: www.vistacommunityclinic.org

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Min/Max Age: 0\999

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PROVIDER*

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Provider ID: 402436

Provider Gender: Female


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NPI: 1922421288*


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Cultural Competency: N*

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IHP of Southern Cal-PHP*

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Min/Max Age: 0\999

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N*

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PROVIDER*

*Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM*

CERTIFIED NURSE

PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 206341


Provider Gender: Female


 *Provider English Spoken: Y
Cultural Competency: N*

*Board Certified Specialty: No
IHP of Southern Cal-PHP*

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000


 After Hours Phone: (760)
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Min/Max Age: 0\999

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CERTIFIED NURSE

PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 206341

Provider Gender: Female


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NPI: 1922421288*


 *Provider English Spoken: Y
Cultural Competency: N*


*Board Certified Specialty: No
IHP of Southern Cal-PHP*

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

D2. 主治医生名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 206341

Provider Gender: Female

License Number: NP95007885


NPI: 1922421288


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

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 After Hours Phone: (760)
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 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

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CERTIFIED NURSE

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Board Certified Specialty: No
IHP of Southern Cal-PHP

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SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 206341

Provider Gender: Female

License Number: NP95007885


NPI: 1922421288


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 206341

Provider Gender: Female

License Number: NP95007885


NPI: 1922421288


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

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CERTIFIED NURSE

PRACTITIONER

D2. 主治医生名录

CHILAKA, SAMUEL

Provider ID: 206341

Provider Gender: Male

License Number: NP95017483


NPI: 1679140644


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

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CHILAKA, SAMUEL

Provider ID: 206341

Provider Gender: Male

License Number: NP95017483


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CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 206341
Provider Gender: Male
License Number: NP95025871
NPI: 1689094971
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
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CERTIFIED NURSE

PRACTITIONER

CORY, ALLISON

Provider ID: 206341

Provider Gender: Female

License Number: NP20497


NPI: 1194027706


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

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D2. 主治医生名录

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Min/Max Age: 0\999

American Sign Language (ASL):

N



D2. 主治医生名录

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
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CERTIFIED NURSE **PRACTITIONER**




EVERETT, ELIZABETH

Provider ID: 206341
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767

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

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC


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CERTIFIED NURSE **PRACTITIONER**

EVERETT, ELIZABETH

Provider ID: 206341
Provider Gender: Female
License Number: NP95025094




NPI: 1942952767

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D2. 主治医生名录

CERTIFIED NURSE PRACTITIONER

EVERETT, ELIZABETH

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Provider English Spoken: Y

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CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 206341

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

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Provider Gender: Female
License Number: NP95006826
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Provider English Spoken: Y
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Provider ID: 402434


Provider Gender: Female
License Number: NP95006826
NPI: 1619246907


Provider English Spoken: Y

D2. 主治医生名录

 *Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
PIER VIEW WAY*

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*

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

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

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CERTIFIED NURSE

PRACTITIONER


HALGEDAHL, YI TING

Provider ID: 402436

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

 *Provider English Spoken: Y*

 *Provider Language(s)
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Cultural Competency: N*

Board Certified Specialty: No


IHP of Southern Cal-PHP


VISTA COMMUNITY CLINIC

HORNE STREET

 517 N HORNE ST
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CERTIFIED NURSE






PRACTITIONER

HARRIS, PAMELA

Provider ID: 206341
Provider Gender: Female
License Number: NP95022679
NPI: 1407545221


 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC






D2. 主治医生名录

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CERTIFIED NURSE

PRACTITIONER

HOWELL, AMANDA

Provider ID: 206341

Provider Gender: Female

License Number: NP95020894


NPI: 1427797943


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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Provider English Spoken: Y
Cultural Competency: N

D2. 主治医生名录

Board Certified Specialty: No
IHP of Southern Cal-PHP
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 4700 N RIVER RD
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Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER


KELLEHER, BRIDGET

Provider ID: 402434

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR


Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC
PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
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 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-TU 8:00AM-5:00PM
W 8:00AM-7:00PM

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CERTIFIED NURSE

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Hospital Affiliation: TRI CITY
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D2. 主治医生名录

IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
PIER VIEW WAY

818 PIER VIEW WAY
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CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 206341

Provider Gender: Male

License Number: NP95020584
NPI: 1851747166

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

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License Number: NP95020584
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CERTIFIED NURSE PRACTITIONER **WAGNER, TASIA**

Provider ID: 206341
Provider Gender: Female
License Number: NP95001650
NPI: 1598158768
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
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WAGNER, TASIA


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Provider Gender: Female
License Number: NP95001650
NPI: 1598158768

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WAGNER, TASIA

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Provider Gender: Female
License Number: NP95001650
NPI: 1598158768

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC
 4700 N RIVER RD

OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM



CERTIFIED NURSE PRACTITIONER


WAGNER, TASIA


Provider ID: 206341
Provider Gender: Female
License Number: NP95001650
NPI: 1598158768

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

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 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

D2. 主治医生名录

CERTIFIED NURSE

PRACTITIONER

WAGNER, TASIA

Provider ID: 206341

Provider Gender: Female

License Number: NP95001650


NPI: 1598158768


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
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PROVIDER

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CERTIFIED NURSE

PRACTITIONER

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Provider ID: 206341

Provider Gender: Female

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Board Certified Specialty: No
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 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH

Provider ID: 206341

Provider Gender: Female

License Number: 20A12958

NPI: 1003172016

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL


CTR


Board Certified Specialty: No

IHP of Southern Cal-PHP

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 4700 N RIVER RD
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Min/Max Age: 0\999

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

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FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH

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Provider Gender: Female

License Number: 20A12958

NPI: 1003172016

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

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FAMILY PRACTICE

D2. 主治医生名录

ESPINOSA-SILVA, YAMINAH

Provider ID: 206341

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D2. 主治医生名录


American Sign Language (ASL): *Cultural Competency: N*
N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

FATLAND, SARAH


Provider ID: 206341
Provider Gender: Female
License Number: 20A18374
NPI: 1831354026
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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FAMILY PRACTICE


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D2. 主治医生名录

IHP of Southern Cal-PHP
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PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

KETCHEL, CLINT

Provider ID: 206341

Provider Gender: Male

License Number: A135564

NPI: 1699038125

Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, TRI CITY
MEDICAL CTR, WHITTIER

HOSPITAL MEDICAL CENTER
Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

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American Sign Language (ASL): N

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PROVIDER

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FAMILY PRACTICE

KETCHEL, CLINT

Provider ID: 206341

Provider Gender: Male

License Number: A135564

NPI: 1699038125

Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, TRI CITY
MEDICAL CTR, WHITTIER
HOSPITAL MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP

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American Sign Language (ASL):

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PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

D2. 主治医生名录

FAMILY PRACTICE

KETCHEL, CLINT

Provider ID: 206341

Provider Gender: Male

License Number: A135564

NPI: 1699038125

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, TRI CITY

MEDICAL CTR, WHITTIER

HOSPITAL MEDICAL CENTER


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Hospital Affiliation:

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, TRI CITY

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FAMILY PRACTICE

KETCHEL, CLINT

Provider ID: 206341

Provider Gender: Male

License Number: A135564

NPI: 1699038125

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, TRI CITY

MEDICAL CTR, WHITTIER

HOSPITAL MEDICAL CENTER


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IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER






Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FAMILY PRACTICE

KETCHEL, CLINT






D2. 主治医生名录

Provider ID: 206341
Provider Gender: Male
License Number: A135564
NPI: 1699038125
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac
Cultural Competency: N
Hospital Affiliation:
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, TRI CITY
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SA 9:00AM-4:00PM

FAMILY PRACTICE

KETCHEL, CLINT

Provider ID: 402434






Provider Gender: Male
License Number: A135564
NPI: 1699038125
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac
Cultural Competency: N
Hospital Affiliation:
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
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IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
PIER VIEW WAY
 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
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 Website: www.vistacommunityclinic.org
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FAMILY PRACTICE

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Hospital Affiliation:
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FAMILY PRACTICE

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Provider ID: 402434

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License Number: A135564

D2. 主治医生名录

NPI: 1699038125

☐ Provider English Spoken: Y
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Cultural Competency: N

Hospital Affiliation:

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 PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

NGUYEN, DANIELA

Provider ID: 206341

Provider Gender: Female

License Number: 20A21066

NPI: 1891069662

☐ Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No
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FAMILY PRACTICE

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D2. 主治医生名录





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Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*
 *Website: www.vistacommunityclinic.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM





FAMILY PRACTICE


NGUYEN, DANIELA

Provider ID: 206341
Provider Gender: Female
License Number: 20A21066
NPI: 1891069662

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

IHP of Southern Cal-PHP
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FAMILY PRACTICE

NGUYEN, DANIELA

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License Number: 20A21066
NPI: 1891069662

Provider English Spoken: Y
Cultural Competency: N
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FAMILY PRACTICE

NGUYEN, DANIELA

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

PANICKER, CIBU

Provider ID: 206341
Provider Gender: Male
License Number: A149340
NPI: 1235492760

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No


D2. 主治医生名录


IHP of Southern Cal-PHP

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FAMILY PRACTICE

PANICKER, CIBU

Provider ID: 206341

Provider Gender: Male

License Number: A149340

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 Provider English Spoken: Y
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Hospital Affiliation: TRI CITY
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Provider ID: 206341

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License Number: A149340

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FAMILY PRACTICE

D2. 主治医生名录


PANICKER, CIBU

Provider ID: 206341

Provider Gender: Male

License Number: A149340

NPI: 1235492760

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TRI CITY

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N

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PROVIDER

FAMILY PRACTICE


PONSFORD, DIANA

Provider ID: 402436

Provider Gender: Female

License Number: 20A17371

NPI: 1407204969

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP


VISTA COMMUNITY CLINIC

HORNE STREET

 517 N HORNE ST

OCEANSIDE, CA 92054

 Phone: (760) 631-5000

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631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

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N

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PROVIDER

Hours: M-F 8:00AM-5:00PM

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FAMILY PRACTICE


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Provider Gender: Female

License Number: 20A17371

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 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TRI CITY

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IHP of Southern Cal-PHP

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PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

VIDAL, MONICA

Provider ID: 206341

Provider Gender: Female

License Number: 20A8949

NPI: 1871791749

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

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VISTA COMMUNITY CLINIC

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
Phone: (760) 631-5000

D2. 主治医生名录

 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM



FAMILY PRACTICE






VIDAL, MONICA

Provider ID: 206341
Provider Gender: Female
License Number: 20A8949
NPI: 1871791749
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
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American Sign Language (ASL): N
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FAMILY PRACTICE


VIDAL, MONICA




Provider ID: 206341
Provider Gender: Female
License Number: 20A8949
NPI: 1871791749
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC







TRUECARE,

Provider ID: 480247
NPI: 1245246917
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
TRUECARE
 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 736-6767
Fax: (760) 736-6744

 After Hours Phone: (760) 736-6767
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM


FQHC

TRUECARE,

Provider ID: 480247
NPI: 1245246917
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
TRUECARE
 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760) 736-6767
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM





FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 206341
NPI: 1851300123
 Provider English Spoken: Y


D2. 主治医生名录






Cultural Competency: N
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
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 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 206341


NPI: 1649662719
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
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Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM


FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 206341

NPI: 1316501562
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC


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FQHC

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NPI: 1649662719
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VISTA COMMUNITY CLINIC,
Provider ID: 206341

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FQHC

VISTA COMMUNITY CLINIC,
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D2. 主治医生名录

 *Provider English Spoken: Y*
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IHP of Southern Cal-PHP
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FQHC

VISTA COMMUNITY CLINIC HORNE STREET,

Provider ID: 402436
NPI: 1609094036

 *Provider English Spoken: Y*
Cultural Competency: N
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
HORNE STREET
 517 N HORNE ST
OCEANSIDE, CA 92054
 *Phone: (760) 631-5000*
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Min/Max Age: 0\999
American Sign Language (ASL):

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FQHC

VISTA COMMUNITY CLINIC HORNE STREET,

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NPI: 1609094036

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D2. 主治医生名录

PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC PIER VIEW WAY,

Provider ID: 402434

NPI: 1629357355


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
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 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

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 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

W 8:00AM-7:00PM

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

SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC PIER VIEW WAY,

Provider ID: 402434

NPI: 1629357355


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

PIER VIEW WAY

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 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

W 8:00AM-7:00PM

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

SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC PIER VIEW WAY,

Provider ID: 402434

NPI: 1629357355


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

W 8:00AM-7:00PM

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

SA 9:00AM-4:00PM

INTERNAL MEDICINE

HASSANI, FARZANEH


Provider ID: 206341


Provider Gender: Female

D2. 主治医生名录

License Number: C54458

NPI: 1942204979

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Farsi,
Persian, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL

CTR, UC DAVIS MEDICAL CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000


 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

INTERNAL MEDICINE


HASSANI, FARZANEH


Provider ID: 206341

Provider Gender: Female

License Number: C54458

NPI: 1942204979

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Farsi,
Persian, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL

CTR, UC DAVIS MEDICAL CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

INTERNAL MEDICINE


HASSANI, FARZANEH


Provider ID: 206341

Provider Gender: Female

License Number: C54458

NPI: 1942204979

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Farsi,
Persian, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL

CTR, UC DAVIS MEDICAL CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP


VISTA COMMUNITY CLINIC

 4700 N RIVER RD

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 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

INTERNAL MEDICINE


HASSANI, FARZANEH


Provider ID: 206341

Provider Gender: Female

License Number: C54458

NPI: 1942204979

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Farsi,
Persian, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL

CTR, UC DAVIS MEDICAL CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP


VISTA COMMUNITY CLINIC

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OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

D2. 主治医生名录

American Sign Language (ASL): **INTERNAL MEDICINE**

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

INTERNAL MEDICINE


HASSANI, FARZANEH

Provider ID: 206341

Provider Gender: Female

License Number: C54458

NPI: 1942204979

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Arabic, Farsi,
Persian, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL


CTR, UC DAVIS MEDICAL CTR


Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

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

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM


HASSANI, FARZANEH


Provider ID: 206341

Provider Gender: Female

License Number: C54458

NPI: 1942204979

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Arabic, Farsi,
Persian, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL


CTR, UC DAVIS MEDICAL CTR


Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL


ENCINITAS


Board Certified Specialty: No

Rady Childrens Health Network


CHANELLE R CALHOUN

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

 Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CALHOUN, CHANELLE


Provider ID: 480247

Provider Gender: Female

License Number: G75390

NPI: 1437166709

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL




ENCINITAS


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

D2. 主治医生名录

 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 891-4667
 After Hours Phone: (760)
891-4667

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


CALHOUN, CHANELLE

Provider ID: 480247

Provider Gender: Female

License Number: G75390

NPI: 1437166709




 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 891-4667
 After Hours Phone: (760)
891-4667

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


CALHOUN, CHANELLE

Provider ID: 480247

Provider Gender: Female

License Number: G75390

NPI: 1437166709




 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 2210 MESA DR STE 300
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

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 Accessibility: CONTACT
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License Number: G75390

NPI: 1437166709




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 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP
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 Phone: (760) 891-4667
 After Hours Phone: (760)
891-4667

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

CURLEY, EDWARD


Provider ID: 480247

Provider Gender: Male

License Number: A73814

NPI: 1164434312




 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE


 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767

 Website: N/A
Medi-Cal Open Panel: Yes

D2. 主治医生名录

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS


CURLEY, EDWARD

Provider ID: 480247

Provider Gender: Male

License Number: A73814

NPI: 1164434312

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 736-6767


 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS


CURLEY, EDWARD

Provider ID: 480247

Provider Gender: Male

License Number: A73814

NPI: 1164434312

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS


CURLEY, EDWARD

Provider ID: 480247

Provider Gender: Male

License Number: A73814

NPI: 1164434312

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS

CURLEY, EDWARD

Provider ID: 240736

Provider Gender: Male

NPI: 1164434312

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No

Rady Childrens Health Network

EDWARD R CURLEY

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT

D2. 主治医生名录

PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS

DANIELS, SARAH

Provider ID: 433806

Provider Gender: Female

NPI: 1730446527


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MEMORIAL
HOSPITAL


Board Certified Specialty: No
Rady Childrens Health Network
SARAH R DANIELS

 3605 VISTA WAY STE 130
BLDG B

OCEANSIDE, CA 92056

 Phone: (760) 547-1010

 After Hours Phone: (760)
547-1010

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


GUNTA, SUJANA


Provider ID: 402434

Provider Gender: Female

License Number: A109056

NPI: 1932304342

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Hindi, Marathi,
Spanish, Telugu


Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


GUNTA, SUJANA


Provider ID: 402434

Provider Gender: Female

License Number: A109056

NPI: 1932304342

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Hindi, Marathi,
Spanish, Telugu


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
PIER VIEW WAY

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Medi-Cal Open Panel: Yes

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 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

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Provider ID: 402434

Provider Gender: Female

License Number: A109056

NPI: 1932304342

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Hindi, Marathi,
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Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
PIER VIEW WAY

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 Phone: (760) 631-5000

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D2. 主治医生名录

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


GUNTA, SUJANA


Provider ID: 402434

Provider Gender: Female

License Number: A109056

NPI: 1932304342

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Marathi,
Spanish, Telugu

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, TRI CITY MEDICAL CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

PIER VIEW WAY

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631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM


PEDIATRICS

KRAMER, MELISSA

Provider ID: 469759

Provider Gender: Female

NPI: 1467833467

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN


DIEGO

Board Certified Specialty: No

Rady Childrens Health Network


MELISSA S KRAMER

 3605 VISTA WAY BLDG B
OCEANSIDE, CA 92056

 Phone: (760) 547-1010

Fax: (760) 547-1011

 After Hours Phone: (760)
547-1010

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM


PEDIATRICS

MACINTYRE, ELIZABETH

Provider ID: 543354

Provider Gender: Female

NPI: 1336520766


 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: Yes

Rady Childrens Health Network


ELIZABETH T MACINTYRE

 3605 VISTA WAY BLDG B
STE 130

OCEANSIDE, CA 92056

 Phone: (760) 547-1010

Fax: (760) 547-1011


 After Hours Phone: (760)
547-1010

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

PEDIATRICS

MCCAMMACK, BRADLEY

Provider ID: 206341

Provider Gender: Male

License Number: A130883

NPI: 1629368857

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR

Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3731

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

D2. 主治医生名录

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

PEDIATRICS

MCCAMMACK, BRADLEY

Provider ID: 206341

Provider Gender: Male

License Number: A130883

NPI: 1629368857

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

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

📍 4700 N RIVER RD
OCEANSIDE, CA 92057

☎ Phone: (760) 631-5000

Fax: (760) 414-3731

🕒 After Hours Phone: (760)
631-5000

🌐 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

PEDIATRICS

MCCAMMACK, BRADLEY

Provider ID: 206341

Provider Gender: Male

License Number: A130883

NPI: 1629368857

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

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

📍 4700 N RIVER RD
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

PEDIATRICS

MCCAMMACK, BRADLEY

Provider ID: 206341

Provider Gender: Male

License Number: A130883

NPI: 1629368857

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

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

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PROVIDER

PEDIATRICS

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Provider ID: 206341

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Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

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631-5000

🌐 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

D2. 主治医生名录

PEDIATRICS

MCCAMMACK, BRADLEY

Provider ID: 206341

Provider Gender: Male

License Number: A130883

NPI: 1629368857

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

4700 N RIVER RD

OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3731

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

MILLER, DONALD

Provider ID: 433589

Provider Gender: Male

NPI: 1154356582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS
HOSPITAL SAN DIEGO,

PALOMAR MEDICAL CENTER,
UCSF BENIOFF CHILDREN'S

HOSPITAL OAKLAND, SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network
DONALD T MILLER

3605 VISTA WAY BLDG B
STE 130

OCEANSIDE, CA 92056

Phone: (760) 547-1010

After Hours Phone: (760)
547-1010

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

NOVOTA, GABRIELA

Provider ID: 685653

Provider Gender: Female

NPI: 1154520096

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Rady Childrens Health Network
GABRIELA B NOVOTA

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS

PARK, RONALD

Provider ID: 271889

Provider Gender: Male

NPI: 1881695914

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
Rady Childrens Health Network
RONALD E PARK

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

D2. 主治医生名录

PEDIATRICS

PERKINS, RACHEL

Provider ID: 435952

Provider Gender: Female




NPI: 1427398320


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
Rady Childrens Health Network
RACHEL E PERKINS


 3605 VISTA WAY STE 130
BLDG B
OCEANSIDE, CA 92056
 Phone: (760) 547-1010
 After Hours Phone: (760)
547-1010

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


RONAN, KEVIN

Provider ID: 206341

Provider Gender: Male

License Number: G77176

NPI: 1225017353

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL


ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

PEDIATRICS


RONAN, KEVIN

Provider ID: 206341

Provider Gender: Male

License Number: G77176

NPI: 1225017353

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL


ENCINITAS


Board Certified Specialty: No

IHP of Southern Cal-PHP

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 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

PEDIATRICS

RONAN, KEVIN


Provider ID: 206341

Provider Gender: Male

License Number: G77176

NPI: 1225017353

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP


VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000








 After Hours Phone: (760)

D2. 主治医生名录

 631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

PEDIATRICS








RONAN, KEVIN








Provider ID: 206341
Provider Gender: Male
License Number: G77176
NPI: 1225017353
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

PEDIATRICS



RONAN, KEVIN

Provider ID: 206341
Provider Gender: Male
License Number: G77176
NPI: 1225017353
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM
PEDIATRICS
RONAN, KEVIN
Provider ID: 206341
Provider Gender: Male

License Number: G77176
NPI: 1225017353
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM




PEDIATRICS


ZACHRY, ALISON

Provider ID: 480247
Provider Gender: Female
License Number: A131678
NPI: 1922402858
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN


D2. 主治医生名录

DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM




PEDIATRICS


ZACHRY, ALISON

Provider ID: 480247
Provider Gender: Female
License Number: A131678
NPI: 1922402858

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

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767

 Website: N/A
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM




PEDIATRICS


ZACHRY, ALISON

Provider ID: 480247
Provider Gender: Female
License Number: A131678
NPI: 1922402858

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

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS

ZACHRY, ALISON

Provider ID: 480247

Provider Gender: Female




License Number: A131678


NPI: 1922402858


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

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480247

Provider Gender: Male

License Number: PA22667




NPI: 1174964001

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP

D2. 主治医生名录

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 966-3306
 After Hours Phone: (760)
966-3306

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480247

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

 Provider English Spoken: Y
Cultural Competency: N




Hospital Affiliation:


GROSSMONT HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE


 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 966-3306
 After Hours Phone: (760)
966-3306

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480247

Provider Gender: Male

License Number: PA22667

NPI: 1174964001




 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 966-3306
 After Hours Phone: (760)
966-3306

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480247

Provider Gender: Male

License Number: PA22667

NPI: 1174964001




 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 966-3306
 After Hours Phone: (760)

966-3306

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 480247

Provider Gender: Female




License Number: PA53036

NPI: 1922471192

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 966-3306
 After Hours Phone: (760)
966-3306

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 480247

Provider Gender: Female





License Number: PA53036

NPI: 1922471192

 Provider English Spoken: Y
Cultural Competency: N


D2. 主治医生名录

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 966-3306
 After Hours Phone: (760)
966-3306
 Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 480247





Provider Gender: Female

License Number: PA53036

NPI: 1922471192


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 966-3306
 After Hours Phone: (760)
966-3306
 Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 480247





Provider Gender: Female

License Number: PA53036

NPI: 1922471192

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 966-3306
 After Hours Phone: (760)
966-3306
 Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

POWAY

FAMILY PRACTICE



KAUR, JATINDER

Provider ID: 481187

Provider Gender: Female

License Number: A120771

NPI: 1912141391

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Punjabi,
Urdu



Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD

HEALTHCARE GOLD FAMILY
HEALTH CENTER

 13010 POWAY RD

POWAY, CA 92064

 Phone: (858) 218-3000
 After Hours Phone: (858)
218-3000

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE



KAUR, JATINDER

Provider ID: 481187

Provider Gender: Female

License Number: A120771

NPI: 1912141391



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Punjabi,
Urdu

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD

HEALTHCARE GOLD FAMILY
HEALTH CENTER

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000
 After Hours Phone: (858)
218-3000

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

D2. 主治医生名录

FQHC
NEIGHBORHOOD
HEALTHCARE GOLD FAMILY
HEALTH CENTER,

Provider ID: 481187


NPI: 1023518768


Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY
HEALTH CENTER

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000

Fax: (360) 462-2742

 After Hours Phone: (858)
218-3000


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC
NEIGHBORHOOD
HEALTHCARE GOLD FAMILY
HEALTH CENTER,

Provider ID: 481187

NPI: 1023518768


Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY
HEALTH CENTER

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000

Fax: (360) 462-2742

 After Hours Phone: (858)
218-3000

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CURET, ZULMA

Provider ID: 481187

Provider Gender: Female

License Number: A119661

NPI: 1841561107

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE GOLD FAMILY
HEALTH CENTER

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CURET, ZULMA

Provider ID: 481187

Provider Gender: Female

License Number: A119661

NPI: 1841561107

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY
HEALTH CENTER

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

LINDBACK, SARAH

Provider ID: 161834

Provider Gender: Female


D2. 主治医生名录


NPI: 1427345487

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, RADY CHILDRENS
HOSPITAL SAN DIEGO

Board Certified Specialty: No
Rady Childrens Health Network
SARAH M LINDBACK

 15725 POMERADO RD STE
203
POWAY, CA 92064

 Phone: (858) 673-3340
Fax: (858) 673-1075

 After Hours Phone: (858)
673-3340

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

LOSTETTER, ADRIENNE

Provider ID: 261797

Provider Gender: Female


NPI: 1881607984


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MARY BIRCH
HOSP FOR WOMEN AND
NEWBORNS, PALOMAR
HEALTH

Board Certified Specialty: No
Rady Childrens Health Network

ADRIENNE L LOSTETTER

 15725 POMERADO RD STE
203
POWAY, CA 92064

 Phone: (858) 673-3340
Fax: (858) 673-1075

 After Hours Phone: (858)
673-3340

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


MOREIRA, LUCILA

Provider ID: 523761

Provider Gender: Female

NPI: 1104846567

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL
ENCINITAS, RADY CHILDRENS
HOSPITAL SAN DIEGO

Board Certified Specialty: No
Rady Childrens Health Network
LUCILA K MOREIRA

 15725 POMERADO RD STE
203
POWAY, CA 92064

 Phone: (858) 673-3340
Fax: (858) 673-1075

 After Hours Phone: (858)
673-3340

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

PEDIATRICS

MORTIMER, DORI

Provider ID: 230552


Provider Gender: Female


NPI: 1417928417

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MARY BIRCH
HOSP FOR WOMEN AND
NEWBORNS, PALOMAR
HEALTH

Board Certified Specialty: No
Rady Childrens Health Network
DORI R MORTIMER

 15725 POMERADO RD STE
203
POWAY, CA 92064

 Phone: (858) 673-3340
Fax: (858) 673-1075

 After Hours Phone: (858)
673-3340

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N







 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS



RAMGREN, AILEEN




D2. 主治医生名录

Provider ID: 397707
Provider Gender: Female
NPI: 1356785505
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
Rady Childrens Health Network
AILEEN N RAMGREN
 15725 POMERADO RD STE 203
POWAY, CA 92064
 Phone: (858) 673-3340
 After Hours Phone: (858) 673-3340
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

RENDLER, NATHAN


Provider ID: 30205
Provider Gender: Male
NPI: 1275531337
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hebrew, Spanish, Yiddish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH
Board Certified Specialty: No

Rady Childrens Health Network
NATHAN RENDLER
 15525 POMERADO RD STE 1
POWAY, CA 92064
 Phone: (858) 487-8333
Fax: (858) 487-0856
 After Hours Phone: (858) 487-8333
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM
SA 9:00AM-5:00PM

PEDIATRICS




TAI, KUANGKAI

Provider ID: 351834
Provider Gender: Male
NPI: 1396744066
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin, Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
Rady Childrens Health Network
KUANGKAI TAI
 15525 POMERADO RD STE B1
POWAY, CA 92064
 Phone: (858) 487-8333
Fax: (858) 487-0856
 After Hours Phone: (858) 484-4003
 Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM
SA 8:30AM-0:00PM

PHYSICIANS ASSISTANT

BALDWIN, DONNA

Provider ID: 481187
Provider Gender: Female
License Number: PA23310
NPI: 1649692369
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER
 13010 POWAY RD
POWAY, CA 92064
 Phone: (858) 218-3000
 After Hours Phone: (858) 218-3000
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

PHYSICIANS ASSISTANT

BALDWIN, DONNA

Provider ID: 481187
Provider Gender: Female
License Number: PA23310

D2. 主治医生名录

NPI: 1649692369

☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE GOLD FAMILY
HEALTH CENTER

📍 13010 POWAY RD
POWAY, CA 92064

☎ Phone: (858) 218-3000

🕒 After Hours Phone: (858)
218-3000

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

RAMONA

CERTIFIED NURSE

PRACTITIONER

DOAN, CHINH

Provider ID: 449438

Provider Gender: Female

License Number: NP18874

NPI: 1083845069

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

📍 220 ROTANZI ST
RAMONA, CA 92065

☎ Phone: (760) 736-6767

🕒 After Hours Phone: (760)
736-6767

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

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

DOAN, CHINH

Provider ID: 449438

Provider Gender: Female

License Number: NP18874

NPI: 1083845069

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

📍 220 ROTANZI ST
RAMONA, CA 92065

☎ Phone: (760) 736-6767

🕒 After Hours Phone: (760)
736-6767

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

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

FQHC

TRUECARE,

Provider ID: 449438

NPI: 1245246917

☐ Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
TRUECARE

📍 220 ROTANZI ST
RAMONA, CA 92065

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

🕒 After Hours Phone: (760)
736-6767

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

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

FQHC

TRUECARE,

Provider ID: 449438

NPI: 1245246917

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

TRUECARE

📍 220 ROTANZI ST
RAMONA, CA 92065

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

🕒 After Hours Phone: (760)
736-6767

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

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

D2. 主治医生名录

SA 8:00AM-0:00PM

INTERNAL MEDICINE

YUNG, DORIS

Provider ID: 449438

Provider Gender: Female

License Number: A89893

NPI: 1730386863

- Provider English Spoken: Y
- Provider Language(s)
Spoken: Chinese, Mandarin,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

- 220 ROTANZI ST
RAMONA, CA 92065
- Phone: (760) 736-6767
- After Hours Phone: (760)
736-6767
- Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
- Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

YUNG, DORIS

Provider ID: 449438

Provider Gender: Female

License Number: A89893

NPI: 1730386863

- Provider English Spoken: Y
- Provider Language(s)
Spoken: Chinese, Mandarin,

Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

- 220 ROTANZI ST
RAMONA, CA 92065
- Phone: (760) 736-6767
- After Hours Phone: (760)
736-6767
- Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
- Accessibility: CONTACT
PROVIDER

PEDIATRICS

ZACHRY, ALISON

Provider ID: 449438

Provider Gender: Female

License Number: A131678

NPI: 1922402858

- Provider English Spoken: Y
 - Provider Language(s)
Spoken: Spanish
- Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE
- 220 ROTANZI ST
RAMONA, CA 92065
 - Phone: (760) 736-6767
 - After Hours Phone: (760)

736-6767

- Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 - Accessibility: CONTACT
PROVIDER
- Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

ZACHRY, ALISON

Provider ID: 449438

Provider Gender: Female

License Number: A131678

NPI: 1922402858

- Provider English Spoken: Y
 - Provider Language(s)
Spoken: Spanish
- Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE
- 220 ROTANZI ST
RAMONA, CA 92065
 - Phone: (760) 736-6767
 - After Hours Phone: (760)
736-6767

- Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 - Accessibility: CONTACT
PROVIDER
- Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

D2. 主治医生名录

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 449438

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 220 ROTANZI ST

RAMONA, CA 92065

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 449438

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 220 ROTANZI ST

RAMONA, CA 92065

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

REIFENBERGER, JODY

Provider ID: 449438

Provider Gender: Female

License Number: PA22669

NPI: 1386741072

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 220 ROTANZI ST

RAMONA, CA 92065

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT


REIFENBERGER, JODY

Provider ID: 449438

Provider Gender: Female

License Number: PA22669

NPI: 1386741072

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 220 ROTANZI ST

RAMONA, CA 92065

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 449438

Provider Gender: Female

License Number: PA53036

NPI: 1922471192

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 220 ROTANZI ST

RAMONA, CA 92065

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

D2. 主治医生名录

PHYSICIANS ASSISTANT


RUSSO, KRISTA

Provider ID: 449438

Provider Gender: Female

License Number: PA53036

NPI: 1922471192

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 220 ROTANZI ST

RAMONA, CA 92065

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT


ZANGEN, ROCHELLE

Provider ID: 449438

Provider Gender: Female

License Number: PA51494

NPI: 1447681150

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 220 ROTANZI ST

RAMONA, CA 92065

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT


ZANGEN, ROCHELLE

Provider ID: 449438

Provider Gender: Female

License Number: PA51494

NPI: 1447681150

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 220 ROTANZI ST

RAMONA, CA 92065

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

SAN DIEGO

CARDIOVASCULAR DISEASE


BLUM, RICHARD

Provider ID: 417937

Provider Gender: Male

License Number: G53758

NPI: 1043310030

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL

Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CARDIOVASCULAR DISEASE

BLUM, RICHARD

Provider ID: 417937

Provider Gender: Male

License Number: G53758

NPI: 1043310030

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL

Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SD

HILLCREST



 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)

D2. 主治医生名录

515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CARDIOVASCULAR DISEASE

GARIBYAN, VARTAN

Provider ID: 417937
Provider Gender: Male
License Number: 20A12504
NPI: 1790084143
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS GREEN
HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SD
HILLCREST
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CARDIOVASCULAR DISEASE

GARIBYAN, VARTAN

Provider ID: 417937
Provider Gender: Male
License Number: 20A12504
NPI: 1790084143
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS GREEN
HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SD
HILLCREST
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 418535
Provider Gender: Male
License Number: NP22974
NPI: 1356684781
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN
RANCHO PENASQUITOS
 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129
 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426
 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

CERTIFIED NURSE


PRACTITIONER



AQUINO, FELINO


Provider ID: 418535
Provider Gender: Male
License Number: NP22974
NPI: 1356684781
 Provider English Spoken: Y
 Provider Language(s)

D2. 主治医生名录

Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN
RANCHO PENASQUITOS

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


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

 *Website: www.operationsa*
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

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

W 10:00AM-7:00PM

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

CERTIFIED NURSE

PRACTITIONER


AQUINO, FELINO

Provider ID: 432308

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No


Operation Samahan

OPERATION SAMAHAN - MIRA
MESA

 9855 ERMA RD STE 105
SAN DIEGO, CA 92131

 *Phone: (844) 200-2426*

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

 *Website: www.operationsa*
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

CERTIFIED NURSE

PRACTITIONER


AQUINO, FELINO


Provider ID: 432308

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No


Operation Samahan

OPERATION SAMAHAN - MIRA
MESA

 9855 ERMA RD STE 105
SAN DIEGO, CA 92131

 *Phone: (844) 200-2426*

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

 *Website: www.operationsa*
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

CERTIFIED NURSE

PRACTITIONER

ARTS, SERENA

Provider ID: 403583

Provider Gender: Female

License Number: NP10769


NPI: 1801881552


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 *Phone: (619) 233-8500*

 *After Hours Phone: (619)*
233-8500

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

CERTIFIED NURSE

PRACTITIONER

ARTS, SERENA

Provider ID: 403583

Provider Gender: Female

License Number: NP10769


NPI: 1801881552

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 *Phone: (619) 233-8500*

D2. 主治医生名录

 After Hours Phone: (619) 233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

BELEN, NEZER

Provider ID: 206363
Provider Gender: Male
License Number: NP95009292
NPI: 1386120723
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER


BELEN, NEZER

Provider ID: 206363
Provider Gender: Male
License Number: NP95009292
NPI: 1386120723
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

BELTRON, KIMBERLY


Provider ID: 403583
Provider Gender: Female
License Number: NP95020497
NPI: 1871295493
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER






 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500

 After Hours Phone: (619) 233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER

BELTRON, KIMBERLY

Provider ID: 403583
Provider Gender: Female
License Number: NP95020497
NPI: 1871295493
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619) 233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER

BESTERFELDT, LYDIA

D2. 主治医生名录


Provider ID: 482070
Provider Gender: Female
License Number: NP95013060
NPI: 1265929442


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700


 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BESTERFELDT, LYDIA


Provider ID: 482070
Provider Gender: Female
License Number: NP95013060
NPI: 1265929442


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)

810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BURNS, DELLA

Provider ID: 233597

Provider Gender: Female

License Number: NP7413


NPI: 1871577023


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619)
563-0250

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

BURNS, DELLA

Provider ID: 233597

Provider Gender: Female

License Number: NP7413


NPI: 1871577023


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619)
563-0250

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

CELESTIN-RAMSEY, AKANKE

Provider ID: 451167

Provider Gender: Female

License Number: NP8563

NPI: 1447450275


Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP


KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

D2. 主治医生名录

 After Hours Phone: (619) 662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

CELESTIN-RAMSEY, AKANKE

Provider ID: 451167

Provider Gender: Female

License Number: NP8563

NPI: 1447450275


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP

KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER


CHASE, AVA LOU

Provider ID: 206360

Provider Gender: Female

License Number: NP95000602

NPI: 1164496386

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

CHASE, AVA LOU

Provider ID: 206360

Provider Gender: Female

License Number: NP95000602

NPI: 1164496386

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 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego

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 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

DHARKAR-SURBER, SAPNA


Provider ID: 185268

Provider Gender: Female

License Number: NP95013257

NPI: 1538707765

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Marathi, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
La Maestra Family Clinic

D2. 主治医生名录

LA MAESTRA FAMILY CLINIC INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619)
255-9155
 Website: www.lamaestra.org

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER


DHARKAR-SURBER, SAPNA


Provider ID: 185268

Provider Gender: Female

License Number: NP95013257

NPI: 1538707765

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Marathi, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155
 After Hours Phone: (619)
255-9155
 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER


GALLEGOS, CYNTHIA

Provider ID: 206360

Provider Gender: Female

License Number: NP95016217

NPI: 1174105589

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


GALLEGOS, CYNTHIA

Provider ID: 206360

Provider Gender: Female

License Number: NP95016217

NPI: 1174105589

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300


 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

GARCIA, JOHNNY


Provider ID: 206363

Provider Gender: Male

License Number: NP95007000

D2. 主治医生名录

NPI: 1932622156

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


GARCIA, JOHNNY

Provider ID: 206363

Provider Gender: Male

License Number: NP95007000

NPI: 1932622156

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


GOLDFINGER, SARAH

Provider ID: 206360

Provider Gender: Female

License Number: NP95011313

NPI: 1134686744

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

GOLDFINGER, SARAH

Provider ID: 206360

Provider Gender: Female

License Number: NP95011313

NPI: 1134686744

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

HA, THU

Provider ID: 482070

Provider Gender: Female

License Number: NP95010517

NPI: 1346443983

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

D2. 主治医生名录


SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

HA, THU

Provider ID: 206046

Provider Gender: Female

License Number: NP95010517

NPI: 1346443983

Provider English Spoken: Y


Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

CERTIFIED NURSE

PRACTITIONER

HA, THU

Provider ID: 206046

Provider Gender: Female

License Number: NP95010517

NPI: 1346443983

Provider English Spoken: Y


Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

HA, THU

Provider ID: 206046

Provider Gender: Female

License Number: NP95010517

NPI: 1346443983

Provider English Spoken: Y


Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

HA, THU

Provider ID: 482070

Provider Gender: Female

License Number: NP95010517

NPI: 1346443983

Provider English Spoken: Y


Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. 主治医生名录

American Sign Language (ASL): NPI: 1659579134

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER


HA, THU

Provider ID: 206046

Provider Gender: Female

License Number: NP95010517

NPI: 1346443983

 Provider English Spoken: Y

 Provider Language(s) Spoken: Vietnamese


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858) 279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HARRINGTON, BARBARA LORRAINE

Provider ID: 185268


Provider Gender: Female


License Number: NP17008

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619) 255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER

HARRINGTON, BARBARA LORRAINE

Provider ID: 185268

Provider Gender: Female


License Number: NP17008


NPI: 1659579134


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619) 255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER

HART, BECKY

Provider ID: 403583

Provider Gender: Female

License Number: NP95025699

NPI: 1316626344


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 645-6405

 After Hours Phone: (619) 645-6405

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D2. 主治医生名录

CERTIFIED NURSE PRACTITIONER

HART, BECKY

Provider ID: 403583

Provider Gender: Female

License Number: NP95025699

NPI: 1316626344

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

1501 IMPERIAL AVE

SAN DIEGO, CA 92101

Phone: (619) 645-6405

After Hours Phone: (619)

645-6405

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

HILL, GENIELYN

Provider ID: 417101

Provider Gender: Female

License Number: NP95020046

NPI: 1710632435

Provider English Spoken: Y

Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

Operation Samahan

OPERATION SAMAHAN - MIRA

MESA

10737 CAMINO RUIZ STE

235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)

200-2426

Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE PRACTITIONER

HILL, GENIELYN

Provider ID: 417101

Provider Gender: Female

License Number: NP95020046

NPI: 1710632435

Provider English Spoken: Y

Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

Operation Samahan

OPERATION SAMAHAN - MIRA

MESA

10737 CAMINO RUIZ STE

235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)

200-2426

Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE PRACTITIONER

HILLIARD, THESALONICA

Provider ID: 417101

Provider Gender: Female

License Number: NP95010585

NPI: 1861956724

Provider English Spoken: Y

Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

Operation Samahan

OPERATION SAMAHAN - MIRA

MESA

10737 CAMINO RUIZ STE

235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)

200-2426

Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE PRACTITIONER

HILLIARD, THESALONICA

Provider ID: 417101

D2. 主治医生名录

Provider Gender: Female
License Number: NP95010585
NPI: 1861956724
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA
MESA

📍 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
☎ Phone: (844) 200-2426
📞 After Hours Phone: (844)
200-2426
🌐 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

HOANG, CHI

Provider ID: 482070
Provider Gender: Female
License Number: NP95004600
NPI: 1902350994
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700
📞 After Hours Phone: (858)
810-8700
🌐 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

HOANG, CHI

Provider ID: 482070
Provider Gender: Female
License Number: NP95004600
NPI: 1902350994
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 810-8700
📞 After Hours Phone: (858)
810-8700
🌐 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

HOGAN, ROSELYNNJOY

Provider ID: 206362

Provider Gender: Female
License Number: NP17852
NPI: 1205019510
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish, Thai
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS

📍 3544 30TH ST
SAN DIEGO, CA 92104
☎ Phone: (619) 515-2424
📞 After Hours Phone: (619)
515-2424
🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

HOGAN, ROSELYNNJOY

Provider ID: 206362
Provider Gender: Female
License Number: NP17852
NPI: 1205019510
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish, Thai
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

D2. 主治医生名录

NORTH PARK FAMILY HEALTH CENTERS N

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

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

HOGAN, ROSELYNNJOY

Provider ID: 206362

Provider Gender: Female

License Number: NP17852

NPI: 1205019510

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Thai

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

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

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

HOGAN, ROSELYNNJOY

Provider ID: 206360

Provider Gender: Female

License Number: NP17852

NPI: 1205019510

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Thai

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

HOGAN, ROSELYNNJOY

Provider ID: 206360

Provider Gender: Female

License Number: NP17852

NPI: 1205019510

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Thai

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

HOGAN, ROSELYNNJOY

Provider ID: 206362

Provider Gender: Female

License Number: NP17852

NPI: 1205019510

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Thai


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego


NORTH PARK FAMILY HEALTH CENTERS

D2. 主治医生名录

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

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

HORNEY, KRISTAN

Provider ID: 403583

Provider Gender: Female

License Number: NP95007712


NPI: 1720590904

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER

HORNEY, KRISTAN

Provider ID: 403583

Provider Gender: Female

License Number: NP95007712

NPI: 1720590904

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER



INSTONE, SUSAN

Provider ID: 233532

Provider Gender: Female




License Number: NP4858


NPI: 1710223268

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

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 After Hours Phone: (619)
280-2058

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER



INSTONE, SUSAN

Provider ID: 233532

Provider Gender: Female




License Number: NP4858

NPI: 1710223268

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

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO



Board Certified Specialty: No
IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 After Hours Phone: (619)

D2. 主治医生名录






280-2058
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE **PRACTITIONER** **INSTONE, SUSAN**

Provider ID: 482070
Provider Gender: Female
License Number: NP4858
NPI: 1710223268
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT



PROVIDER

CERTIFIED NURSE **PRACTITIONER** **INSTONE, SUSAN**





Provider ID: 482070
Provider Gender: Female
License Number: NP4858
NPI: 1710223268
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE **PRACTITIONER** **JOHNSON, SHAWNA AKIKO**

Provider ID: 233597
Provider Gender: Female
License Number: NP95002518
NPI: 1922237809
 Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC
 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
 After Hours Phone: (619)
563-0250
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


CERTIFIED NURSE **PRACTITIONER** **JOHNSON, SHAWNA AKIKO**

Provider ID: 233597
Provider Gender: Female
License Number: NP95002518
NPI: 1922237809
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC
 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
 After Hours Phone: (619)
563-0250
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes

D2. 主治医生名录

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


KEMP, KATHRINE

Provider ID: 403583

Provider Gender: Female

License Number: NP95018497

NPI: 1316615313

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER


KEMP, KATHRINE

Provider ID: 403583

Provider Gender: Female

License Number: NP95018497

NPI: 1316615313

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER


KHAN, MATTHEW

Provider ID: 417987

Provider Gender: Male

License Number: NP17838

NPI: 1942456124

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE PRACTITIONER

KHAN, MATTHEW

Provider ID: 417987

Provider Gender: Male

License Number: NP17838

NPI: 1942456124

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE PRACTITIONER

KI, TRISH


Provider ID: 206046


Provider Gender: Female

License Number: NP23847

D2. 主治医生名录

NPI: 1376840199

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

SA 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER


KI, TRISH

Provider ID: 206046

Provider Gender: Female

License Number: NP23847

NPI: 1376840199

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD

SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

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

SA 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER


KI, TRISH

Provider ID: 482070

Provider Gender: Female

License Number: NP23847

NPI: 1376840199

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE

PRACTITIONER

KI, TRISH


Provider ID: 482070

Provider Gender: Female

License Number: NP23847

NPI: 1376840199

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE

PRACTITIONER

KI, TRISH


Provider ID: 206046

Provider Gender: Female

License Number: NP23847

NPI: 1376840199


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Vietnamese


D2. 主治医生名录

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*

 *After Hours Phone: (858) 279-0925*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

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

SA 8:30AM-5:30PM

CERTIFIED NURSE **PRACTITIONER**

KI, TRISH

Provider ID: 206046

Provider Gender: Female

License Number: NP23847

NPI: 1376840199

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Vietnamese*


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*

 *After Hours Phone: (858) 279-0925*

 *Website: www.sdfamilycare*

.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

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

SA 8:30AM-5:30PM

CERTIFIED NURSE **PRACTITIONER**

LENNON, RYAN

Provider ID: 624977

Provider Gender: Female

License Number: NP95027593

NPI: 1558084855

 *Provider English Spoken: Y*


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 2204 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2355*

 *After Hours Phone: (619) 515-2355*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE **PRACTITIONER**

LENNON, RYAN

Provider ID: 624977

Provider Gender: Female

License Number: NP95027593


NPI: 1558084855


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 2204 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2355*

 *After Hours Phone: (619) 515-2355*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE **PRACTITIONER**

LIEBER, CAROL


Provider ID: 517403

Provider Gender: Female

License Number: NP20849

NPI: 1487889846


 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE


 316 25TH ST

SAN DIEGO, CA 92102

 *Phone: (619) 238-5551*

D2. 主治医生名录

 After Hours Phone: (619) 238-5551

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

LIEBER, CAROL

Provider ID: 517403

Provider Gender: Female

License Number: NP20849

NPI: 1487889846

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE

 316 25TH ST
SAN DIEGO, CA 92102

 Phone: (619) 238-5551


 After Hours Phone: (619) 238-5551

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

LIM, IMELDA

Provider ID: 417101

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844) 200-2426

 Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

W 10:00AM-7:00PM

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

CERTIFIED NURSE

PRACTITIONER

LIM, IMELDA

Provider ID: 417101

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No
Operation Samahan


OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844) 200-2426

 Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

W 10:00AM-7:00PM

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

CERTIFIED NURSE

PRACTITIONER

LU, TAMMY

Provider ID: 206360

Provider Gender: Female

License Number: NP95007253

NPI: 1457879132


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

D2. 主治医生名录

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


LU, TAMMY

Provider ID: 206360

Provider Gender: Female


License Number: NP95007253


NPI: 1457879132

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

MARTIN, RIA


Provider ID: 206363


Provider Gender: Female
License Number: NP95005321
NPI: 1437695079


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


MARTIN, RIA

Provider ID: 206363

Provider Gender: Female


License Number: NP95005321

NPI: 1437695079


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER



MARTINEZ, CAROLYN

Provider ID: 214492

Provider Gender: Female


License Number: NP22031


NPI: 1609101997


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

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NESTOR COMMUNITY
HEALTH CENTER


 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

 After Hours Phone: (619)
429-3733

 Website: www.ibclinic.org
Email: avaldez@ibclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:00PM

TU-TH 8:30AM-8:00PM

D2. 主治医生名录

F 8:30AM-5:00PM

CERTIFIED NURSE **PRACTITIONER**


MARTINEZ, CAROLYN


Provider ID: 214492

Provider Gender: Female

License Number: NP22031

NPI: 1609101997

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NESTOR COMMUNITY

HEALTH CENTER

 1016 OUTER RD

SAN DIEGO, CA 92154

 Phone: (619) 429-3733

 After Hours Phone: (619)
429-3733

 Website: www.ibclinic.org


Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:00PM

TU-TH 8:30AM-8:00PM

F 8:30AM-5:00PM

CERTIFIED NURSE **PRACTITIONER**

MENDOZA, GRETEL MARIE

Provider ID: 417101

Provider Gender: Female

License Number: NP95002233

NPI: 1245652387

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: [www.operationsa
mahan.org](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE **PRACTITIONER**


MENDOZA, GRETEL MARIE

Provider ID: 417101

Provider Gender: Female

License Number: NP95002233

NPI: 1245652387

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

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 Website: [www.operationsa
mahan.org](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE **PRACTITIONER**

MORAN, TIFFANY

Provider ID: 207382

Provider Gender: Female

License Number: NP95011037

NPI: 1730730649

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN DIEGO AMERICAN

INDIAN HEALTH CENTER

 2630 1ST AVE

SAN DIEGO, CA 92103

 Phone: (619) 234-2158

 After Hours Phone: (619)
234-2158

 Website: [WWW.SDAIHC.OR
G](http://WWW.SDAIHC.ORG)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

Indian Health Services: Y

CERTIFIED NURSE **PRACTITIONER**

MORAN, TIFFANY

Provider ID: 207382


Provider Gender: Female


D2. 主治医生名录

License Number: NP95011037
NPI: 1730730649

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO AMERICAN
INDIAN HEALTH CENTER

 2630 1ST AVE
SAN DIEGO, CA 92103

 Phone: (619) 234-2158


 After Hours Phone: (619)
234-2158

 Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

Indian Health Services: Y

CERTIFIED NURSE

PRACTITIONER


NEVAREZ, IRENE

Provider ID: 185268

Provider Gender: Female

License Number: NP95009891

NPI: 1003166646

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA


JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 564-8765

 After Hours Phone: (619)
564-8765

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER


NEVAREZ, IRENE

Provider ID: 185268

Provider Gender: Female

License Number: NP95009891

NPI: 1003166646

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA


JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 564-8765

 After Hours Phone: (619)
564-8765

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

NGUYEN, NINA

Provider ID: 417101

Provider Gender: Female

License Number: NP95020179

NPI: 1417699869


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Operation Samahan


OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426


 Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150


American Sign Language (ASL):
N

D2. 主治医生名录

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-4:30PM


CERTIFIED NURSE PRACTITIONER

NGUYEN, NINA

Provider ID: 417101
Provider Gender: Female
License Number: NP95020179
NPI: 1417699869
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No Operation Samahan
OPERATION SAMAHAN - MIRA MESA


 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
 *Phone: (844) 200-2426*
 *After Hours Phone: (844) 200-2426*
 *Website: www.operationsamahan.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150


American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE PRACTITIONER

NOCEDA, ANA

Provider ID: 482070
Provider Gender: Female
License Number: NP19505
NPI: 1386971760
 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Tagalog*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No IHP of Southern Cal-PHP SAN DIEGO FAMILY CARE



 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 810-8700*
 *After Hours Phone: (858) 810-8700*
 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER

NOCEDA, ANA

Provider ID: 482070
Provider Gender: Female
License Number: NP19505
NPI: 1386971760
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Tagalog*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No IHP of Southern Cal-PHP SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 810-8700*
 *After Hours Phone: (858) 810-8700*
 *Website: www.sdfamilycare.org*




Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER

NOCEDA, ANA

Provider ID: 233532
Provider Gender: Female
License Number: NP19505
NPI: 1386971760
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Tagalog*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC
 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

D2. 主治医生名录

 Phone: (619) 280-2058
 After Hours Phone: (619) 280-2058
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER


NOCEDA, ANA


Provider ID: 233532

Provider Gender: Female

License Number: NP19505

NPI: 1386971760

 Provider English Spoken: Y

 Provider Language(s) Spoken: Tagalog

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO


Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619) 280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER


OCAMPO, ELAINE


Provider ID: 482070

Provider Gender: Female

License Number: NP95003427

NPI: 1063856805

 Provider English Spoken: Y


 Provider Language(s) Spoken: Mandarin, Yue Chinese


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858) 810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

OCAMPO, ELAINE


Provider ID: 206046

Provider Gender: Female

License Number: NP95003427

NPI: 1063856805

 Provider English Spoken: Y


 Provider Language(s) Spoken: Mandarin, Yue Chinese


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858) 279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

OCAMPO, ELAINE


Provider ID: 206046

Provider Gender: Female

License Number: NP95003427

NPI: 1063856805

 Provider English Spoken: Y

 Provider Language(s) Spoken: Mandarin, Yue Chinese




Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111




D2. 主治医生名录





 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

OCAMPO, ELAINE



Provider ID: 482070
Provider Gender: Female
License Number: NP95003427
NPI: 1063856805
 Provider English Spoken: Y
 Provider Language(s) Spoken: Mandarin, Yue Chinese
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700
 After Hours Phone: (858) 810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER



CERTIFIED NURSE

PRACTITIONER

OCAMPO, ELAINE

Provider ID: 206046
Provider Gender: Female
License Number: NP95003427
NPI: 1063856805
 Provider English Spoken: Y
 Provider Language(s) Spoken: Mandarin, Yue Chinese



Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE


PRACTITIONER

OCAMPO, ELAINE

Provider ID: 206046
Provider Gender: Female
License Number: NP95003427
NPI: 1063856805
 Provider English Spoken: Y
 Provider Language(s) Spoken: Mandarin, Yue Chinese

Cultural Competency: N
Board Certified Specialty: No



IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

ODA, THAGHAR

Provider ID: 206363
Provider Gender: Female
License Number: NP95000205
NPI: 1063835692
 Provider English Spoken: Y
 Provider Language(s) Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego


DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

D2. 主治医生名录

American Sign Language (ASL): NPI: 1063835692

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER


ODA, THAGHAR


Provider ID: 206363

Provider Gender: Female

License Number: RN810863

NPI: 1063835692

 Provider English Spoken: Y

 Provider Language(s) Spoken: Amharic, Arabic


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1063835692

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE


PRACTITIONER


ODA, THAGHAR

Provider ID: 206363

Provider Gender: Female

License Number: NP95000205

 Provider English Spoken: Y

 Provider Language(s) Spoken: Amharic, Arabic


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego


DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE


PRACTITIONER


ODA, THAGHAR

Provider ID: 206363

Provider Gender: Female

License Number: RN810863

 Provider English Spoken: Y

 Provider Language(s) Spoken: Amharic, Arabic

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego


DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560


 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

ODA, THAGHAR


Provider ID: 206360

Provider Gender: Female

License Number: RN810863

NPI: 1063835692

 Provider English Spoken: Y


 Provider Language(s) Spoken: Amharic, Arabic


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

D2. 主治医生名录

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

Provider ID: 206360

Provider Gender: Female

License Number: NP95000205

NPI: 1063835692

Provider English Spoken: Y


Provider Language(s)
Spoken: Amharic, Arabic


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300


 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

Provider ID: 206360

Provider Gender: Female

License Number: RN810863

NPI: 1063835692

Provider English Spoken: Y


Provider Language(s)
Spoken: Amharic, Arabic


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

Provider ID: 206360

Provider Gender: Female

License Number: NP95000205

NPI: 1063835692

Provider English Spoken: Y


Provider Language(s)
Spoken: Amharic, Arabic


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

ORPILLA, IMELDA

Provider ID: 417101

Provider Gender: Female

License Number: NP95003211

NPI: 1790785988

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No
Operation Samahan


OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE

D2. 主治医生名录

PRACTITIONER

ORPILLA, IMELDA

Provider ID: 417101

Provider Gender: Female

License Number: NP95003211

NPI: 1790785988

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

ORPILLA, IMELDA

Provider ID: 418535

Provider Gender: Female

License Number: NP95003211

NPI: 1790785988

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN

RANCHO PENASQUITOS

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

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

ORPILLA, IMELDA

Provider ID: 418535

Provider Gender: Female

License Number: NP95003211

NPI: 1790785988

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN

RANCHO PENASQUITOS

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

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

OWEN, MICHAEL

Provider ID: 206362

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

F 8:00AM-5:00PM

CERTIFIED NURSE


PRACTITIONER


OWEN, MICHAEL

D2. 主治医生名录

Provider ID: 206362
Provider Gender: Female
License Number: NP95001492
NPI: 1073869145
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS

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

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

OWEN, MICHAEL


Provider ID: 206362
Provider Gender: Female
License Number: NP95001492
NPI: 1073869145

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


Board Certified Specialty: No
Family Health Centers of San

Diego
NORTH PARK FAMILY HEALTH CENTERS

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

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

OWEN, MICHAEL


Provider ID: 206363
Provider Gender: Female
License Number: NP95001492
NPI: 1073869145


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

Board Certified Specialty: No
Family Health Centers of San Diego
DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER



OWEN, MICHAEL


Provider ID: 206363
Provider Gender: Female
License Number: NP95001492
NPI: 1073869145

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

Board Certified Specialty: No
Family Health Centers of San Diego
DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

OWEN, MICHAEL

Provider ID: 206362
Provider Gender: Female

D2. 主治医生名录

License Number: NP95001492
NPI: 1073869145

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

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

**NORTH PARK FAMILY HEALTH
CENTERS**

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

PADILLA, MICHELE

Provider ID: 403583

Provider Gender: Female

License Number: NP95020636

NPI: 1356083828

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

**ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER**

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500

After Hours Phone: (619)
233-8500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

PADILLA, MICHELE

Provider ID: 403583

Provider Gender: Female

License Number: NP95020636

NPI: 1356083828

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

**ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER**

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500

After Hours Phone: (619)
233-8500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

PATEL, KELLY

Provider ID: 402851

Provider Gender: Female

License Number: NP95004735

NPI: 1033493747

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

**FAMILY HLTH CTR SAN
DIEGO-BEACH AREA**

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

PATEL, KELLY

Provider ID: 402851

Provider Gender: Female

License Number: NP95004735

NPI: 1033493747

Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


D2. 主治医生名录

Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444


 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER


PATIAG, DANIEL


Provider ID: 206046

Provider Gender: Male

License Number: NP95012511

NPI: 1073169769

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Tagalog


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE

PRACTITIONER


PATIAG, DANIEL


Provider ID: 206046

Provider Gender: Male

License Number: NP95012511

NPI: 1073169769

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Tagalog


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE

PRACTITIONER

PATIAG, DANIEL

Provider ID: 482070

Provider Gender: Male

License Number: NP95012511
NPI: 1073169769

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700


 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

PATIAG, DANIEL


Provider ID: 206046

Provider Gender: Male

License Number: NP95012511

NPI: 1073169769

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

D2. 主治医生名录

IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858)
279-0925
Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL

Provider ID: 206046
Provider Gender: Male
License Number: NP95012511
NPI: 1073169769

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

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858)
279-0925
Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): Provider ID: 207382
N

Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL

Provider ID: 482070
Provider Gender: Male
License Number: NP95012511
NPI: 1073169769

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

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858)
810-8700
Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER

PERRY, KATHERINE

Provider Gender: Female
License Number: NP95014964
NPI: 1215543426

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO AMERICAN
INDIAN HEALTH CENTER

2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
After Hours Phone: (619)
234-2158
Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
Indian Health Services: Y

CERTIFIED NURSE PRACTITIONER

PERRY, KATHERINE



Provider ID: 207382
Provider Gender: Female
License Number: NP95014964
NPI: 1215543426

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

IHP of Southern Cal-PHP
SAN DIEGO AMERICAN
INDIAN HEALTH CENTER


2630 1ST AVE
SAN DIEGO, CA 92103

D2. 主治医生名录

 Phone: (619) 234-2158
 After Hours Phone: (619)
234-2158
 Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
Indian Health Services: Y

CERTIFIED NURSE

PRACTITIONER



QUINTO, CINDY

Provider ID: 233532

Provider Gender: Female

License Number: NP16433

NPI: 1902810377


 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Lao,
Spanish



Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

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

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER



QUINTO, CINDY

Provider ID: 233532

Provider Gender: Female

License Number: NP16433

NPI: 1902810377

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Lao,
Spanish



Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

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

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER



QUINTO, CINDY

Provider ID: 482070

Provider Gender: Female

License Number: NP16433

NPI: 1902810377

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Lao,
Spanish



Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

QUINTO, CINDY

Provider ID: 482070

Provider Gender: Female

License Number: NP16433


NPI: 1902810377

 Provider English Spoken: Y

D2. 主治医生名录

 *Provider Language(s)*
Spoken: French, Lao, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
IHP of Southern Cal-PHP SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 810-8700*
 *After Hours Phone: (858) 810-8700*
 *Website: www.sdfamilycare.org*


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE


PRACTITIONER

REID, EMILY

Provider ID: 185268
Provider Gender: Female
License Number: NP95002766
NPI: 1083081467

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic LA MAESTRA FAMILY CLINIC INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 *Phone: (619) 255-9155*
 *After Hours Phone: (619) 255-9155*

 *Website: www.lamaestra.org*
g
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE



PRACTITIONER

REID, EMILY

Provider ID: 185268
Provider Gender: Female
License Number: NP95002766
NPI: 1083081467

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic LA MAESTRA FAMILY CLINIC INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 *Phone: (619) 255-9155*
 *After Hours Phone: (619) 255-9155*


 *Website: www.lamaestra.org*
g
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

PRACTITIONER



ROGERS, TANYA

Provider ID: 417987
Provider Gender: Female
License Number: NP95004443
NPI: 1558710038

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105
 *Phone: (619) 515-2426*
 *After Hours Phone: (619) 515-2426*


 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE



PRACTITIONER

ROGERS, TANYA




Provider ID: 417987
Provider Gender: Female
License Number: NP95004443
NPI: 1558710038

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105
 *Phone: (619) 515-2426*

D2. 主治医生名录

 After Hours Phone: (619) 515-2426
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER








CERTIFIED NURSE PRACTITIONER






SABIN, NANCY

Provider ID: 482070
Provider Gender: Female
License Number: NP4668
NPI: 1285732586
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858) 810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER




SABIN, NANCY

Provider ID: 482070
Provider Gender: Female
License Number: NP4668
NPI: 1285732586
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858) 810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM
CERTIFIED NURSE PRACTITIONER
SABIN, NANCY
Provider ID: 206046
Provider Gender: Female
License Number: NP4668
NPI: 1285732586
 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
TU 8:00AM-8:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-1:00PM

CERTIFIED NURSE PRACTITIONER


SABIN, NANCY

Provider ID: 206046
Provider Gender: Female
License Number: NP4668
NPI: 1285732586
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

D2. 主治医生名录

 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
TU 8:00AM-8:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-1:00PM

CERTIFIED NURSE

PRACTITIONER


SABIN, NANCY

Provider ID: 206046
Provider Gender: Female
License Number: NP4668
NPI: 1285732586
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
TU 8:00AM-8:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-1:00PM

CERTIFIED NURSE

PRACTITIONER


SABIN, NANCY

Provider ID: 206046
Provider Gender: Female
License Number: NP4668
NPI: 1285732586
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
TU 8:00AM-8:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-1:00PM

CERTIFIED NURSE

PRACTITIONER


SAMPSON, ANDRIECE

Provider ID: 207382
Provider Gender: Female
License Number: NP95026377
NPI: 1619594124

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO AMERICAN
INDIAN HEALTH CENTER

 2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
 After Hours Phone: (619) 234-2158
 Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Indian Health Services: Y

CERTIFIED NURSE

PRACTITIONER

SAMPSON, ANDRIECE

Provider ID: 207382
Provider Gender: Female
License Number: NP95026377
NPI: 1619594124

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO AMERICAN
INDIAN HEALTH CENTER

D2. 主治医生名录

 2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
 After Hours Phone: (619)
234-2158
 Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
Indian Health Services: Y

CERTIFIED NURSE

PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 206046

Provider Gender: Female

License Number: NP2390


NPI: 1619370475


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925


 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

CERTIFIED NURSE

PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 206046

Provider Gender: Female

License Number: NP2390


NPI: 1619370475


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

CERTIFIED NURSE

PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 206046

Provider Gender: Female

License Number: NP2390


NPI: 1619370475


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

CERTIFIED NURSE

PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 482070

Provider Gender: Female

License Number: NP2390

NPI: 1619370475

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

D2. 主治医生名录

 Phone: (858) 810-8700
 After Hours Phone: (858) 810-8700
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 206046

Provider Gender: Female

License Number: NP2390


NPI: 1619370475


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858) 279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER
Hours: M 8:00AM-5:00PM
TU 8:00AM-8:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-1:00PM

CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 482070

Provider Gender: Female

License Number: NP2390


NPI: 1619370475


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858) 810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE

Provider ID: 482070

Provider Gender: Female

License Number: NP7022

NPI: 1225012842

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858) 810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE

Provider ID: 482070

Provider Gender: Female

License Number: NP7022

NPI: 1225012842

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N



Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

D2. 主治医生名录

 After Hours Phone: (858) 810-8700
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER


SATTERWHITE, MAURINE

Provider ID: 206046

Provider Gender: Female

License Number: NP7022

NPI: 1225012842

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925


 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

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SA 9:00AM-1:00PM

CERTIFIED NURSE

PRACTITIONER


SATTERWHITE, MAURINE

Provider ID: 206046

Provider Gender: Female

License Number: NP7022

NPI: 1225012842

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

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CTR

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 Phone: (858) 279-0925

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

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CERTIFIED NURSE

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NPI: 1225012842

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

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CTR

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 Phone: (858) 279-0925

 After Hours Phone: (858)
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 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
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 Accessibility: CONTACT PROVIDER

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SA 9:00AM-1:00PM

CERTIFIED NURSE

PRACTITIONER

SATTERWHITE, MAURINE


Provider ID: 206046

Provider Gender: Female

License Number: NP7022

NPI: 1225012842

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


D2. 主治医生名录

IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM
TU 8:00AM-8:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-1:00PM

CERTIFIED NURSE PRACTITIONER

SAVILLE, EDITH

Provider ID: 417937

Provider Gender: Female

License Number: NP7374

NPI: 1730567678

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

SAVILLE, EDITH

Provider ID: 417937

Provider Gender: Female

License Number: NP7374


NPI: 1730567678

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

SEAMAN, MARY

Provider ID: 206363

Provider Gender: Female

License Number: NP10146


NPI: 1033116652

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SEAMAN, MARY

Provider ID: 206363

Provider Gender: Female

License Number: NP10146

NPI: 1033116652

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS

D2. 主治医生名录

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560


 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

SEBRING, JAN

Provider ID: 206360

Provider Gender: Female

License Number: RN486421


NPI: 1295750339


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

CERTIFIED NURSE

PRACTITIONER

SEBRING, JAN

Provider ID: 206360

Provider Gender: Female

License Number: RN486421


NPI: 1295750339


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

SEBRING, JAN

Provider ID: 206360

Provider Gender: Female

License Number: NP10906

NPI: 1295750339


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San

Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

SEBRING, JAN

Provider ID: 206360

Provider Gender: Female

License Number: NP10906


NPI: 1295750339


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 主治医生名录

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA

Provider ID: 417429

Provider Gender: Female

License Number: NP95006792


NPI: 1730604414


 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 *1550 BROADWAY STE 2 SAN DIEGO, CA 92101*

 *Phone: (619) 515-2525*

 *After Hours Phone: (619) 515-2525*

 *Website: www.fhcsd.org*
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

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

CERTIFIED NURSE PRACTITIONER


TAYLOR, KAYLA

Provider ID: 417429

Provider Gender: Female

License Number: NP95006792

NPI: 1730604414


 *Provider English Spoken: Y*


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 *1550 BROADWAY STE 2 SAN DIEGO, CA 92101*

 *Phone: (619) 515-2525*

 *After Hours Phone: (619) 515-2525*

 *Website: www.fhcsd.org*
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

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

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA

Provider ID: 206362

Provider Gender: Female

License Number: NP95006792


NPI: 1730604414


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 *3544 30TH ST SAN DIEGO, CA 92104*

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA

Provider ID: 206362

Provider Gender: Female

License Number: NP95006792


NPI: 1730604414


 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 *3544 30TH ST SAN DIEGO, CA 92104*

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA


Provider ID: 206362



Provider Gender: Female

License Number: NP95006792

NPI: 1730604414

D2. 主治医生名录

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS


 3544 30TH ST
SAN DIEGO, CA 92104
 *Phone: (619) 515-2424*
 *After Hours Phone: (619) 515-2424*
 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE


PRACTITIONER

TAYLOR, KAYLA

Provider ID: 206362
Provider Gender: Female
License Number: NP95006792
NPI: 1730604414

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 *Phone: (619) 515-2424*
 *After Hours Phone: (619) 515-2424*
 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes



Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*






CERTIFIED NURSE

PRACTITIONER

TODD, MIKAYLA

Provider ID: 517998
Provider Gender: Female
License Number: NP95005999
NPI: 1316478092

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
COMMUNITY HEIGHTS FAMILY MED

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*



CERTIFIED NURSE






PRACTITIONER

TODD, MIKAYLA

Provider ID: 517998
Provider Gender: Female
License Number: NP95005999

NPI: 1316478092

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
COMMUNITY HEIGHTS FAMILY MED

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

PRACTITIONER





TRAN, KELLY

Provider ID: 206360
Provider Gender: Female
License Number: NP95003689
NPI: 1255799276

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Vietnamese*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER








 1809 NATIONAL AVE
SAN DIEGO, CA 92113

D2. 主治医生名录

 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TRAN, KELLY

Provider ID: 206360
Provider Gender: Female
License Number: NP95003689
NPI: 1255799276
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER



CERTIFIED NURSE PRACTITIONER

TUEROS, VICTORIA

Provider ID: 206360
Provider Gender: Female
License Number: NP2286
NPI: 1598989261
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TUEROS, VICTORIA

Provider ID: 206360
Provider Gender: Female
License Number: NP2286
NPI: 1598989261
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N





Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

VEGA, TERESA

Provider ID: 206360
Provider Gender: Female
License Number: NP95001705
NPI: 1912304569
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

D2. 主治医生名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1386195535

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


VEGA, TERESA

Provider ID: 206360

Provider Gender: Female

License Number: NP95001705

NPI: 1912304569

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1386195535

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


VELASQUEZ, FERNANDO

Provider ID: 206360

Provider Gender: Male

License Number: NP95011254

NPI: 1386195535

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


VELASQUEZ, FERNANDO

Provider ID: 419529

Provider Gender: Male

License Number: NP95011254

NPI: 1386195535

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego


FAMILY HLTH CTR OF SD SAN


DIEGO COMMERCIAL

 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

 After Hours Phone: (619)
515-2422

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

VELASQUEZ, FERNANDO

Provider ID: 419529

Provider Gender: Male

License Number: NP95011254

NPI: 1386195535

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego


FAMILY HLTH CTR OF SD SAN
DIEGO COMMERCIAL

 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

 After Hours Phone: (619)
515-2422

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. 主治医生名录

American Sign Language (ASL): NPI: 1184224396

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER


VELASQUEZ, FERNANDO

Provider ID: 206360

Provider Gender: Male

License Number: NP95011254

NPI: 1386195535

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1184224396

N

 Accessibility: CONTACT PROVIDER


CERTIFIED NURSE PRACTITIONER

VILLALOBOS, REBECA

Provider ID: 206360

Provider Gender: Female

License Number: NP95015780

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


CERTIFIED NURSE PRACTITIONER

VILLALOBOS, REBECA

Provider ID: 206360

Provider Gender: Female

License Number: NP95015780

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER


WEICKERT, MARIA

Provider ID: 417429

Provider Gender: Female

License Number: NP95010814

NPI: 1841758984

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2 SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619) 515-2525

 Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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

D2. 主治医生名录

CERTIFIED NURSE PRACTITIONER

WEICKERT, MARIA

Provider ID: 417429

Provider Gender: Female

License Number: NP95010814

NPI: 1841758984

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619) 515-2525

Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHA

Provider ID: 185268

Provider Gender: Female

License Number: NP95001840

NPI: 1063884864

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619) 255-9155

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHA

Provider ID: 185268

Provider Gender: Female

License Number: NP95001840

NPI: 1063884864

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619)

255-9155

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 416831

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH
CENTERS

3514 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

D2. 主治医生名录

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER


WILLIAMS, TAKISHA

Provider ID: 416831

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 *3514 30TH ST
SAN DIEGO, CA 92104*

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*


 *Website: www.fhcsd.org*
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER


WILLIAMS, TAKISHA

Provider ID: 402851

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 *3705 MISSION BLVD
SAN DIEGO, CA 92109*

 *Phone: (619) 515-2444*

 *After Hours Phone: (619) 515-2444*

 *Website: www.fhcsd.org*
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER


WILLIAMS, TAKISHA

Provider ID: 402851

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego


FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 *3705 MISSION BLVD
SAN DIEGO, CA 92109*

 *Phone: (619) 515-2444*

 *After Hours Phone: (619) 515-2444*


 *Website: www.fhcsd.org*
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

WOLF, CELIA

Provider ID: 417937

Provider Gender: Female

License Number: NP95001899

NPI: 1245635564

 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 *4094 4TH AVE
SAN DIEGO, CA 92103*

 *Phone: (619) 515-2545*

 *After Hours Phone: (619) 515-2545*


 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

D2. 主治医生名录

WOLF, CELIA

Provider ID: 417937

Provider Gender: Female

License Number: NP95001899

NPI: 1245635564

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

BOSTON, LAURA

Provider ID: 206360

Provider Gender: Female

License Number: NM792

NPI: 1174553259

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

BOSTON, LAURA

Provider ID: 206360

Provider Gender: Female

License Number: NM792

NPI: 1174553259

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

GEPSHTEIN, YANA

Provider ID: 402851

Provider Gender: Female

License Number: NM1662

NPI: 1396956512

Provider English Spoken: Y

Provider Language(s)
Spoken: Hebrew

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619) 515-2444

Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

GEPSHTEIN, YANA

Provider ID: 402851


Provider Gender: Female

License Number: NM1662

NPI: 1396956512


Provider English Spoken: Y


D2. 主治医生名录


 *Provider Language(s)*
Spoken: Hebrew
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 *Phone: (619) 515-2444*

 *After Hours Phone: (619) 515-2444*


 *Website: www.fhcsd.org*
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED REGISTERED

NURSE MIDWIFE


TOLMIE, SIMONE


Provider ID: 206360

Provider Gender: Female

License Number: NM236263

NPI: 1104572007

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: Providence

Santa Rosa Memorial Hospital


Board Certified Specialty: No


Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

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

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED REGISTERED

NURSE MIDWIFE


TOLMIE, SIMONE

Provider ID: 206360

Provider Gender: Female

License Number: NM236263

NPI: 1104572007

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: Providence


Santa Rosa Memorial Hospital


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

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

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CHIROPRACTOR

ASSADIAN, MEHRAK

Provider ID: 451167

Provider Gender: Female

License Number: DC27523

NPI: 1295278281

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Turkish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


KING CHAVEZ HEALTH

CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 *Phone: (619) 662-4100*

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


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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CHIROPRACTOR

ASSADIAN, MEHRAK


Provider ID: 451167

Provider Gender: Female

License Number: DC27523

NPI: 1295278281


 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Turkish


D2. 主治医生名录

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org/clinics/king-chavez-health-center*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

CHIROPRACTOR

CABALLERO, JAMES

Provider ID: 417101

Provider Gender: Male


License Number: DC27726



NPI: 1093991549


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
Operation Samahan

OPERATION SAMAHAN - MIRA MESA

 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

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

 *Website: www.operationsamahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-4:30PM

CHIROPRACTOR

CABALLERO, JAMES

Provider ID: 417101

Provider Gender: Male


License Number: DC27726



NPI: 1093991549


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
Operation Samahan

OPERATION SAMAHAN - MIRA MESA

 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

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

 *Website: www.operationsamahan.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-4:30PM

CHIROPRACTOR


CABALLERO, JAMES

Provider ID: 418535

Provider Gender: Male

License Number: DC27726

NPI: 1093991549


 *Provider English Spoken: Y*



Cultural Competency: N
Board Certified Specialty: No


Operation Samahan

OPERATION SAMAHAN

RANCHO PENASQUITOS

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

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

 *Website: www.operationsamahan.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

CHIROPRACTOR

CABALLERO, JAMES

Provider ID: 418535

Provider Gender: Male


License Number: DC27726



NPI: 1093991549

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
Operation Samahan

OPERATION SAMAHAN RANCHO PENASQUITOS

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

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


 *Website: www.operationsamahan.org*

D2. 主治医生名录

mahan.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

W 10:00AM-7:00PM

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

CHIROPRACTOR


GILIBERTO, JOSEPH


Provider ID: 418535

Provider Gender: Male

License Number: DC15775

NPI: 1821463159

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN

RANCHO PENASQUITOS

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

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

W 10:00AM-7:00PM

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

CHIROPRACTOR


GILIBERTO, JOSEPH

Provider ID: 418535

Provider Gender: Male

License Number: DC15775

NPI: 1821463159

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN

RANCHO PENASQUITOS

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

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

W 10:00AM-7:00PM

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

CHIROPRACTOR


GILIBERTO, JOSEPH

Provider ID: 417101

Provider Gender: Male

License Number: DC15775

NPI: 1821463159

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

CHIROPRACTOR

GILIBERTO, JOSEPH

Provider ID: 417101

Provider Gender: Male

License Number: DC15775

NPI: 1821463159

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No

Operation Samahan

OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426



 After Hours Phone: (844)

D2. 主治医生名录

200-2426
 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM


CHIROPRACTOR

HALEY, STEVEN

Provider ID: 185268
Provider Gender: Male
License Number: DC25697
NPI: 1083764484
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC



 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 280-4213
 After Hours Phone: (619)
280-4213
 Website: www.lamaestra.org

g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

HALEY, STEVEN


Provider ID: 185268
Provider Gender: Male
License Number: DC25697
NPI: 1083764484

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

Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 280-4213
 After Hours Phone: (619)
280-4213
 Website: www.lamaestra.org



g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

HOURIHAN, KEITH

Provider ID: 185268
Provider Gender: Male
License Number: DC29314
NPI: 1306916994


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

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 280-4213
 After Hours Phone: (619)
280-4213
 Website: www.lamaestra.org



g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

HOURIHAN, KEITH

Provider ID: 185268
Provider Gender: Male
License Number: DC29314
NPI: 1306916994

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

Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 280-4213
 After Hours Phone: (619)
280-4213
 Website: www.lamaestra.org

g

D2. 主治医生名录

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Provider ID: 185268

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

ILCHENA, ALESANDRA

Provider ID: 185268

Provider Gender: Female

License Number: DC32800

NPI: 1871046664

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 798-3947

 After Hours Phone: (619)
798-3947

 Website: www.lamaestra.org

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Provider ID: 227409

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM


CHIROPRACTOR

ILCHENA, ALESANDRA

Provider Gender: Female

License Number: DC32800

NPI: 1871046664

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 798-3947

 After Hours Phone: (619)
798-3947

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

KAZEM, AHMAD

Provider ID: 227409

Provider Gender: Male

License Number: DC33300

NPI: 1003296096

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi, Persian


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC -
OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CHIROPRACTOR

KAZEM, AHMAD

Provider ID: 227409

Provider Gender: Male

License Number: DC33300

NPI: 1003296096

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi, Persian


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC -
OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

D2. 主治医生名录

alth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CHIROPRACTOR


LOVERN, JENNIFER

Provider ID: 418535

Provider Gender: Female

License Number: DC29074

NPI: 1235469396

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Italian,
Spanish


Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN

RANCHO PENASQUITOS

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

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

W 10:00AM-7:00PM

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

CHIROPRACTOR


LOVERN, JENNIFER


Provider ID: 418535

Provider Gender: Female

License Number: DC29074

NPI: 1235469396

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Italian,
Spanish


Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN

RANCHO PENASQUITOS

 9995 CARMEL MOUNTAIN
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SAN DIEGO, CA 92129

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

W 10:00AM-7:00PM

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

CHIROPRACTOR


OLSEN, MARTIN

Provider ID: 402851

Provider Gender: Male

License Number: DC20729

NPI: 1730247990

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CHIROPRACTOR


OLSEN, MARTIN

Provider ID: 402851

Provider Gender: Male

License Number: DC20729

NPI: 1730247990

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

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 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

D2. 主治医生名录

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR


PAGE, BIANCA

Provider ID: 417937

Provider Gender: Female


License Number: DC33688


NPI: 1649787607


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CHIROPRACTOR

PAGE, BIANCA

Provider ID: 417937

Provider Gender: Female

License Number: DC33688


NPI: 1649787607


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

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Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CHIROPRACTOR


ROJAS, RICHARD

Provider ID: 417937

Provider Gender: Male


License Number: DC31024


NPI: 1538318811


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545


 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

CHIROPRACTOR


ROJAS, RICHARD

Provider ID: 417937

Provider Gender: Male


License Number: DC31024


NPI: 1538318811


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

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515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

CHIROPRACTOR

SOSA, DAVID


Provider ID: 417937

D2. 主治医生名录

Provider Gender: Male


License Number: DC33150


NPI: 1013308675

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545


 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

CHIROPRACTOR


SOSA, DAVID

Provider ID: 417937

Provider Gender: Male


License Number: DC33150


NPI: 1013308675

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

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 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

CHIROPRACTOR


SOSA, DAVID

Provider ID: 206363

Provider Gender: Male


License Number: DC33150


NPI: 1013308675

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

SOSA, DAVID

Provider ID: 206363

Provider Gender: Male

License Number: DC33150


NPI: 1013308675


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560


 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR



TAGHIZADEH, MAJID

Provider ID: 417937

Provider Gender: Male

License Number: DC30121

NPI: 1750590600


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Persian,
Turkish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

D2. 主治医生名录

FAMILY HLTH CTR SD HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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




CHIROPRACTOR **TAGHIZADEH, MAJID**


Provider ID: 417937
Provider Gender: Male
License Number: DC30121
NPI: 1750590600

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Persian,
Turkish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD HILLCREST


 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): Cultural Competency: N
N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA
MESA


CHIROPRACTOR **TRUONG, VENNES**

Provider ID: 417101
Provider Gender: Female
License Number: DC34907
NPI: 1053919928

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA
MESA


 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426
 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)





Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-4:30PM


CHIROPRACTOR **TRUONG, VENNES**

Provider ID: 417101
Provider Gender: Female
License Number: DC34907
NPI: 1053919928


 Provider English Spoken: Y

 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426
 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)



Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-4:30PM

CLINIC OUTPATIENT **OPERATION SAMAHAN** **RANCHO PENASQUITOS,**

Provider ID: 418535
NPI: 1699216622
 Provider English Spoken: Y
Cultural Competency: N

Operation Samahan
OPERATION SAMAHAN
RANCHO PENASQUITOS


 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129
 Phone: (844) 200-2426
Fax: (858) 695-9074

 After Hours Phone: (844)
200-2426
 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

D2. 主治医生名录

American Sign Language (ASL): License Number: G16236
N

 Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM


CLINIC OUTPATIENT


OPERATION SAMAHAN


RANCHO PENASQUITOS,

Provider ID: 418535

NPI: 1699216622


 Provider English Spoken: Y
Cultural Competency: N
Operation Samahan
OPERATION SAMAHAN
RANCHO PENASQUITOS

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

 Phone: (844) 200-2426

Fax: (858) 695-9074

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

DERMATOLOGY

BURROWS, WILLIAM

Provider ID: 417937

Provider Gender: Male

NPI: 1639199292

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

DERMATOLOGY

BURROWS, WILLIAM

Provider ID: 417937

Provider Gender: Male

License Number: G16236

NPI: 1639199292


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

DERMATOLOGY

CARTER, NATASHA

Provider ID: 206363

Provider Gender: Female

License Number: A140912

NPI: 1033539184

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Board Certified Specialty: No


Family Health Centers of San
Diego


DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

D2. 主治医生名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Provider ID: 206360

N

 Accessibility: CONTACT PROVIDER

DERMATOLOGY

CARTER, NATASHA

Provider ID: 206363

Provider Gender: Female

License Number: A140912

NPI: 1033539184

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Board Certified Specialty: No

Family Health Centers of San


Diego


DIAMOND NEIGHBORHOODS


FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY


METABOLISM DIABETES

AHMAD, AAKIF

Provider Gender: Male

License Number: 20A12732

NPI: 1720308331

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS GREEN HOSPITAL

Board Certified Specialty: No

Family Health Centers of San


Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

AHMAD, AAKIF

Provider ID: 206360

Provider Gender: Male

License Number: 20A12732

NPI: 1720308331

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS GREEN HOSPITAL

Board Certified Specialty: No

Family Health Centers of San


Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

CARRILLO, MARITZA

Provider ID: 206360

Provider Gender: Female

License Number: A163183

NPI: 1649628587

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

Family Health Centers of San

Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER


D2. 主治医生名录




 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM

ENDOCRINOLOGY

METABOLISM DIABETES

CARRILLO, MARITZA

Provider ID: 206360
Provider Gender: Female
License Number: A163183
NPI: 1649628587
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER


 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
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515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM


ENDOCRINOLOGY

METABOLISM DIABETES

CHANG, AMY

Provider ID: 206360
Provider Gender: Female
License Number: A93385
NPI: 1750568911
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SADDLEBACK MEMORIAL
MED CTR, SCRIPPS GREEN
HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER


 1809 NATIONAL AVE
SAN DIEGO, CA 92113
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515-2300
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Email: dalvarado@fhcsd.org






Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

CHANG, AMY

Provider ID: 206360
Provider Gender: Female
License Number: A93385
NPI: 1750568911
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SADDLEBACK MEMORIAL
MED CTR, SCRIPPS GREEN
HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT

D2. 主治医生名录

PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

GANDHI, ANAND

Provider ID: 206360

Provider Gender: Male

License Number: A178494

NPI: 1821651779

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

Fax: (619) 515-2510

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

GANDHI, ANAND

Provider ID: 206360

Provider Gender: Male

License Number: A178494

NPI: 1821651779

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

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Fax: (619) 515-2510

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

HOSEIN, NADEEN

Provider ID: 417937

Provider Gender: Female

License Number: A113255

NPI: 1912051715

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

ENDOCRINOLOGY METABOLISM DIABETES

HOSEIN, NADEEN

Provider ID: 417937

Provider Gender: Female

License Number: A113255

NPI: 1912051715

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD HILLCREST

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Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

ENDOCRINOLOGY

D2. 主治医生名录

METABOLISM DIABETES

ISLAM, JULIE

Provider ID: 206363

Provider Gender: Female

License Number: A149552

NPI: 1750780516

Provider English Spoken: Y

Provider Language(s)
Spoken: Bengali, Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

ISLAM, JULIE

Provider ID: 206363

Provider Gender: Female

License Number: A149552

NPI: 1750780516

Provider English Spoken: Y

Provider Language(s)
Spoken: Bengali, Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

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515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

LEVINE, MATTHEW

Provider ID: 206360

Provider Gender: Male

License Number: A77126

NPI: 1801994231

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, UCSD


MEDICAL CTR

Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

LEVINE, MATTHEW

Provider ID: 206360

Provider Gender: Male

License Number: A77126

NPI: 1801994231

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, UCSD


MEDICAL CTR


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

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 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 主治医生名录

N

 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES


LORENZO, PATRICIA


Provider ID: 206360

Provider Gender: Female

License Number: A129599

NPI: 1487913315

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL


Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES


LORENZO, PATRICIA


Provider ID: 206360

Provider Gender: Female

License Number: A129599

NPI: 1487913315

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL


Board Certified Specialty: No
Family Health Centers of San Diego

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

MCCALLUM, JAMES

Provider ID: 206360

Provider Gender: Male

License Number: A55708

NPI: 1609838994

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN


DIEGO, SCRIPPS GREEN HOSPITAL


Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
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 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-6:00PM

TH 8:30AM-6:00PM

F 8:30AM-5:00PM

SA 8:30AM-5:00PM

ENDOCRINOLOGY

METABOLISM DIABETES

MCCALLUM, JAMES

Provider ID: 206360

Provider Gender: Male

License Number: A55708

NPI: 1609838994

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL

Board Certified Specialty: No

Board Certified Specialty: No

D2. 主治医生名录

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-6:00PM

TH 8:30AM-6:00PM

F 8:30AM-5:00PM

SA 8:30AM-5:00PM

ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 206360

Provider Gender: Female

License Number: A146838

NPI: 1720474141

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 206360

Provider Gender: Female

License Number: A146838

NPI: 1720474141

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

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After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

PHILIS-TSIMIKAS, ATHENA

Provider ID: 206360

Provider Gender: Female

License Number: A50477

NPI: 1922105964

Provider English Spoken: Y

Provider Language(s)
Spoken: Greek

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS GREEN

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

ENDOCRINOLOGY

METABOLISM DIABETES

D2. 主治医生名录

PHILIS-TSIMIKAS, ATHENA

Provider ID: 206360

Provider Gender: Female

License Number: A50477

NPI: 1922105964

Provider English Spoken: Y

Provider Language(s)
Spoken: Greek

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS GREEN
HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

FAMILY PRACTICE

ABDALLAH, ALI

Provider ID: 206363

Provider Gender: Male

License Number: 20A15471

NPI: 1649699968

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ABDALLAH, ALI

Provider ID: 206363

Provider Gender: Male

License Number: 20A15471

NPI: 1649699968

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST

SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 227409

Provider Gender: Male

License Number: A157505

NPI: 1588197826

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY
HOSPITAL, PARADISE VALLEY
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC -
OCEAN VIEW

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: https://www.syhe
alth.org/locations


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 主治医生名录



N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM


FAMILY PRACTICE



ALVAREZ-ESTRADA, MIGUEL

Provider ID: 227409
Provider Gender: Male
License Number: A157505
NPI: 1588197826

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC - OCEAN VIEW


 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

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

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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):


N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM


FAMILY PRACTICE


BACHARACH, REBECCA

Provider ID: 417937
Provider Gender: Female
License Number: 20A15459
NPI: 1225442643

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 *Phone: (619) 515-2545*
 *After Hours Phone: (619) 515-2545*


 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE


BACHARACH, REBECCA

Provider ID: 417937
Provider Gender: Female
License Number: 20A15459
NPI: 1225442643

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 *Phone: (619) 515-2545*
 *After Hours Phone: (619) 515-2545*
 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):


N

 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE


BAGINGITO, AUSTIN

Provider ID: 417937
Provider Gender: Male
License Number: A163977
NPI: 1942705637


 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 *Phone: (619) 515-2545*
 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):


N

 *Accessibility: CONTACT*




D2. 主治医生名录


PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE **BAGINGITO, AUSTIN**


Provider ID: 417429
Provider Gender: Male
License Number: A163977
NPI: 1942705637
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101
 Phone: (619) 515-2525
 After Hours Phone: (619)
515-2525


 Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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



FAMILY PRACTICE **BAGINGITO, AUSTIN**


Provider ID: 417429
Provider Gender: Male
License Number: A163977
NPI: 1942705637
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525
 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org
Email: janeta@fhcsd.org


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



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


FAMILY PRACTICE **BAGINGITO, AUSTIN**

Provider ID: 417937
Provider Gender: Male
License Number: A163977
NPI: 1942705637
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER


Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE **BAGINGITO, AUSTIN**


Provider ID: 206360
Provider Gender: Male
License Number: A163977
NPI: 1942705637
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER


 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE **BAGINGITO, AUSTIN**

Provider ID: 206360
Provider Gender: Male
License Number: A163977
NPI: 1942705637
 Provider English Spoken: Y

D2. 主治医生名录



Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

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Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER


FAMILY PRACTICE

BAHRAMZI, MARIA

Provider ID: 417987
Provider Gender: Female
License Number: A173486
NPI: 1588141865
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Pashto*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego



FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 515-2426
 After Hours Phone: (619) 515-2426
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150






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

FAMILY PRACTICE

BAHRAMZI, MARIA



Provider ID: 417987
Provider Gender: Female
License Number: A173486
NPI: 1588141865
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Pashto*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR IBARRA






 4874 POLK AVE
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 Phone: (619) 515-2426
 After Hours Phone: (619) 515-2426
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BAHRAMZI, MARIA



Provider ID: 206362
Provider Gender: Female
License Number: A173486
NPI: 1588141865
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Pashto*

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BAHRAMZI, MARIA

Provider ID: 206362
Provider Gender: Female
License Number: A173486
NPI: 1588141865
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Pashto*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

D2. 主治医生名录

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


BAHRAMZI, MARIA


Provider ID: 206362

Provider Gender: Female

License Number: A173486

NPI: 1588141865

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Pashto


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


BAHRAMZI, MARIA

Provider ID: 206362

Provider Gender: Female

License Number: A173486

NPI: 1588141865

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Pashto


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


BAIN, NATALIE

Provider ID: 206360

Provider Gender: Female

License Number: A183464

NPI: 1821677584

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BAIN, NATALIE

Provider ID: 206360

Provider Gender: Female

License Number: A183464

NPI: 1821677584

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300


 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BAUTISTA, LUIS

Provider ID: 517403

Provider Gender: Male

License Number: A97270

D2. 主治医生名录

NPI: 1295712206

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,

ST AGNES MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH 25TH ST

FAMILY MEDICINE

316 25TH ST

SAN DIEGO, CA 92102

Phone: (619) 238-5551

After Hours Phone: (619)
238-5551

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BAUTISTA, LUIS

Provider ID: 517403

Provider Gender: Male

License Number: A97270

NPI: 1295712206

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,

ST AGNES MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH 25TH ST

FAMILY MEDICINE

316 25TH ST

SAN DIEGO, CA 92102

Phone: (619) 238-5551

After Hours Phone: (619)
238-5551

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BISHOP, MELISSA

Provider ID: 403583

Provider Gender: Female

License Number: C137521

NPI: 1578667077

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

1501 IMPERIAL AVE

SAN DIEGO, CA 92101

Phone: (619) 645-6405

After Hours Phone: (619)
645-6405

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE

BISHOP, MELISSA

Provider ID: 403583

Provider Gender: Female

License Number: C137521

NPI: 1578667077

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

1501 IMPERIAL AVE

SAN DIEGO, CA 92101

Phone: (619) 645-6405

After Hours Phone: (619)
645-6405

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE

BODIFORD, SAMANTHA

Provider ID: 214492

Provider Gender: Female

License Number: A165398


NPI: 1730684200

Provider English Spoken: Y


D2. 主治医生名录

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NESTOR COMMUNITY
HEALTH CENTER

 1016 OUTER RD
SAN DIEGO, CA 92154
 Phone: (619) 429-3733
 After Hours Phone: (619)
429-3733


 Website: www.ibclinic.org
Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-5:00PM
TU-TH 8:30AM-8:00PM
F 8:30AM-5:00PM


FAMILY PRACTICE


BODIFORD, SAMANTHA

Provider ID: 214492
Provider Gender: Female
License Number: A165398
NPI: 1730684200
 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
NESTOR COMMUNITY
HEALTH CENTER

 1016 OUTER RD
SAN DIEGO, CA 92154
 Phone: (619) 429-3733
 After Hours Phone: (619)
429-3733



 Website: www.ibclinic.org
Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-5:00PM
TU-TH 8:30AM-8:00PM
F 8:30AM-5:00PM

FAMILY PRACTICE


BORTNER, ADAM

Provider ID: 206363
Provider Gender: Male
License Number: A164879
NPI: 1811491749

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC



 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


FAMILY PRACTICE


BORTNER, ADAM

Provider ID: 206363
Provider Gender: Male
License Number: A164879
NPI: 1811491749
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560



 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BORTNER, ADAM

Provider ID: 417937
Provider Gender: Male
License Number: A164879
NPI: 1811491749

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

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

D2. 主治医生名录

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org


Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

FAMILY PRACTICE


BORTNER, ADAM

Provider ID: 417937

Provider Gender: Male

License Number: A164879

NPI: 1811491749

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

FAMILY PRACTICE

BRADY, PATRICIA

Provider ID: 403583

Provider Gender: Female

License Number: C53121

NPI: 1952390437

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA




JOHN SALLY THORNTON


Board Certified Specialty: No

IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:00PM

TH 8:30AM-9:00PM

F 8:30AM-5:00PM

FAMILY PRACTICE

BRADY, PATRICIA

Provider ID: 403583

Provider Gender: Female

License Number: C53121

NPI: 1952390437

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA




JOHN SALLY THORNTON

Board Certified Specialty: No

IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:00PM

TH 8:30AM-9:00PM

F 8:30AM-5:00PM

FAMILY PRACTICE

BRODSKY, MARK

Provider ID: 402851

Provider Gender: Male

License Number: C53623

NPI: 1346337904

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San

Diego


FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

D2. 主治医生名录


 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM

FAMILY PRACTICE


BRODSKY, MARK

Provider ID: 402851
Provider Gender: Male
License Number: C53623
NPI: 1346337904
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA



 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM




FAMILY PRACTICE


BROWN, BRANDON

Provider ID: 206360
Provider Gender: Male
License Number: A148499
NPI: 1013399559
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER



 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM


FAMILY PRACTICE

BROWN, BRANDON

Provider ID: 206360
Provider Gender: Male
License Number: A148499
NPI: 1013399559
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego



LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

FAMILY PRACTICE

BURTON, LUCAS

Provider ID: 206362
Provider Gender: Male
License Number: 20A20786
NPI: 1376171520
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

D2. 主治医生名录

Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE **BURTON, LUCAS**

Provider ID: 206362
Provider Gender: Male
License Number: 20A20786
NPI: 1376171520

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

Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE **BURTON, LUCAS**

Provider ID: 206362
Provider Gender: Male
License Number: 20A20786
NPI: 1376171520

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

Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE **BURTON, LUCAS**

Provider ID: 206362
Provider Gender: Male
License Number: 20A20786
NPI: 1376171520

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS

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

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE **CAMPBELL, BRIANNA**


Provider ID: 451167
Provider Gender: Female
License Number: A157488
NPI: 1316479892

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


Hospital Affiliation: CHULA VISTA COMM HOSP
Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH CENTER

950 S EUCLID AVE
SAN DIEGO, CA 92114

D2. 主治医生名录

 Phone: (619) 662-4194
 After Hours Phone: (619) 662-4194
 Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE **CAMPBELL, BRIANNA**



Provider ID: 451167
Provider Gender: Female
License Number: A157488
NPI: 1316479892
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: CHULA VISTA COMM HOSP
Board Certified Specialty: No IHP of Southern Cal-PHP
KING CHAVEZ HEALTH CENTER
 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4194
 After Hours Phone: (619) 662-4194
 Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE **CAMPOS, PRISCILLA**

Provider ID: 206360
Provider Gender: Female
License Number: A152651
NPI: 1508217399
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE **CAMPOS, PRISCILLA**







Provider ID: 206360
Provider Gender: Female
License Number: A152651
NPI: 1508217399
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE **CARRIEDO-CENICEROS, MARIA**

Provider ID: 227409
Provider Gender: Female
License Number: A78373
NPI: 1295746618
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC - OCEAN VIEW
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes

D2. 主治医生名录

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


CARRIEDO-CENICEROS, MARIA

Provider ID: 227409

Provider Gender: Female

License Number: A78373

NPI: 1295746618


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC -
OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CHOU, BILL

Provider ID: 206362

Provider Gender: Male

License Number: 20A14794

NPI: 1730448101


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

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

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CHOU, BILL

Provider ID: 206362

Provider Gender: Male

License Number: 20A14794

NPI: 1730448101


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

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

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CHOU, BILL

Provider ID: 206362

Provider Gender: Male

License Number: 20A14794

NPI: 1730448101


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

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

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CHOU, BILL

Provider ID: 206362

Provider Gender: Male

License Number: 20A14794

NPI: 1730448101


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San

D2. 主治医生名录

Diego


NORTH PARK FAMILY HEALTH CENTERS

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

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

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CHOU, BILL

Provider ID: 417937

Provider Gender: Male

License Number: 20A14794

NPI: 1730448101


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE

CHOU, BILL

Provider ID: 417937

Provider Gender: Male

License Number: 20A14794

NPI: 1730448101


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE



CHUN, HYUN

Provider ID: 206360

Provider Gender: Male

License Number: A163978

NPI: 1083118988

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Korean


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CHUN, HYUN

Provider ID: 206360

Provider Gender: Male

License Number: A163978

NPI: 1083118988

 Provider English Spoken: Y
 Provider Language(s)


Spoken: Korean


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 主治医生名录

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


COLLINS, WILLIAM

Provider ID: 417937

Provider Gender: Male

License Number: 20A15413


NPI: 1417361973


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 *Phone: (619) 515-2545*

 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: SU-SA 8:00AM-9:00PM

FAMILY PRACTICE


COLLINS, WILLIAM

Provider ID: 417937

Provider Gender: Male

License Number: 20A15413


NPI: 1417361973


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 *Phone: (619) 515-2545*

 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: SU-SA 8:00AM-9:00PM

FAMILY PRACTICE


COLLINS, WILLIAM

Provider ID: 206362

Provider Gender: Male

License Number: 20A15413


NPI: 1417361973


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH

CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

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

FAMILY PRACTICE

COLLINS, WILLIAM

Provider ID: 206362

Provider Gender: Male

License Number: 20A15413

NPI: 1417361973

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Board Certified Specialty: No


Family Health Centers of San


Diego

NORTH PARK FAMILY HEALTH

CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

D2. 主治医生名录

 *Accessibility: CONTACT PROVIDER*
Hours: SU-SA 8:30AM-5:30PM

FAMILY PRACTICE


COLLINS, WILLIAM

Provider ID: 206362

Provider Gender: Male

License Number: 20A15413

NPI: 1417361973

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Board Certified Specialty: No


Family Health Centers of San


Diego

NORTH PARK FAMILY HEALTH

CENTERS

 *3544 30TH ST
SAN DIEGO, CA 92104*

 *Phone: (619) 515-2424*

 *After Hours Phone: (619)
515-2424*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

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

FAMILY PRACTICE


COLLINS, WILLIAM

Provider ID: 206362

Provider Gender: Male

License Number: 20A15413

NPI: 1417361973

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Board Certified Specialty: No


Family Health Centers of San


Diego

NORTH PARK FAMILY HEALTH

CENTERS

 *3544 30TH ST
SAN DIEGO, CA 92104*

 *Phone: (619) 515-2424*

 *After Hours Phone: (619)
515-2424*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

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

FAMILY PRACTICE


CORMAN, DANIEL


Provider ID: 402851

Provider Gender: Male

License Number: 20A13060

NPI: 1629339593

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San


Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 *3705 MISSION BLVD
SAN DIEGO, CA 92109*

 *Phone: (619) 515-2444*

 *After Hours Phone: (619)
515-2444*

 *Website: www.fhcsd.org*

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

CORMAN, DANIEL

Provider ID: 402851

Provider Gender: Male

License Number: 20A13060

NPI: 1629339593

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San


Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 *3705 MISSION BLVD
SAN DIEGO, CA 92109*

 *Phone: (619) 515-2444*

 *After Hours Phone: (619)
515-2444*

 *Website: www.fhcsd.org*

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

D2. 主治医生名录

DAPPEN, AMANDA

Provider ID: 227409

Provider Gender: Female


License Number: A153414


NPI: 1689037111


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC -
OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

DAPPEN, AMANDA

Provider ID: 227409

Provider Gender: Female


License Number: A153414


NPI: 1689037111

Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC -
OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

DAVIS, DEIRDRE

Provider ID: 451167

Provider Gender: Female

License Number: A165432

NPI: 1265921365

Provider English Spoken: Y
 Provider Language(s)


Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:00PM

FAMILY PRACTICE

DAVIS, DEIRDRE

Provider ID: 451167

Provider Gender: Female

License Number: A165432

NPI: 1265921365

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:00PM

FAMILY PRACTICE

DOSCAS, MICHELLE

Provider ID: 206360

Provider Gender: Female

License Number: A163633

NPI: 1306343421

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

D2. 主治医生名录

MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

DOSCAS, MICHELLE

Provider ID: 206360

Provider Gender: Female

License Number: A163633

NPI: 1306343421

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

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Phone: (619) 515-2300
After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

FAMBRO, CYNTHIA

Provider ID: 451167

Provider Gender: Female

License Number: A153223

NPI: 1710331707

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

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

KING CHAVEZ HEALTH
CENTER

950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE

FAMBRO, CYNTHIA

Provider ID: 451167

Provider Gender: Female

License Number: A153223

NPI: 1710331707

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

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

KING CHAVEZ HEALTH
CENTER

950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

FLORES, JOE

Provider ID: 417937

Provider Gender: Male

License Number: A171135

NPI: 1033647409

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San

D2. 主治医生名录

Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

FAMILY PRACTICE

FLORES, JOE

Provider ID: 417937

Provider Gender: Male

License Number: A171135

NPI: 1033647409

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): License Number: A112176

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

FAMILY PRACTICE

GLEASON ROHRER, GWEN

Provider ID: 233532

Provider Gender: Female

License Number: A112176

NPI: 1710140462

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Board Certified Specialty: No

IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

After Hours Phone: (619) 280-2058

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

GLEASON ROHRER, GWEN

Provider ID: 233597

Provider Gender: Female

NPI: 1710140462

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Board Certified Specialty: No

IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

4290 POLK AVE

SAN DIEGO, CA 92105

Phone: (619) 563-0250

After Hours Phone: (619) 563-0250

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

GLEASON ROHRER, GWEN

Provider ID: 233597

Provider Gender: Female

License Number: A112176

NPI: 1710140462

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Board Certified Specialty: No

IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

4290 POLK AVE

D2. 主治医生名录

SAN DIEGO, CA 92105
☎ Phone: (619) 563-0250
🕒 After Hours Phone: (619) 563-0250
🌐 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

GLEASON ROHRER, GWEN

Provider ID: 233532
Provider Gender: Female
License Number: A112176
NPI: 1710140462
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC
📍 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
☎ Phone: (619) 280-2058
🕒 After Hours Phone: (619) 280-2058
🌐 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

GRIFFITHS, KENNETH

Provider ID: 417937
Provider Gender: Male
License Number: C52451
NPI: 1760563068
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST

📍 4094 4TH AVE
SAN DIEGO, CA 92103
☎ Phone: (619) 515-2545
🕒 After Hours Phone: (619) 515-2545
🌐 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

GRIFFITHS, KENNETH

Provider ID: 417937
Provider Gender: Male
License Number: C52451
NPI: 1760563068
☑ Provider English Spoken: Y
Cultural Competency: N



Hospital Affiliation: UCSD MEDICAL CTR
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST
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Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

GUTIERREZ, TANIA



Provider ID: 417987
Provider Gender: Female
License Number: 20A19345
NPI: 1285196311
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HEALTH CTR IBARRA
📍 4874 POLK AVE
SAN DIEGO, CA 92105
☎ Phone: (619) 515-2426
🕒 After Hours Phone: (619)






D2. 主治医生名录

515-2426
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

GUTIERREZ, TANIA


Provider ID: 417987
Provider Gender: Female
License Number: 20A19345
NPI: 1285196311
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HEALTH CTR IBARRA





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515-2426
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

HAMILTON, LISA MARIE

Provider ID: 418142



Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HEALTH CTR SAN
DIEGO-OAK PARK




 5160 FEDERAL BLVD
SAN DIEGO, CA 92105
 Phone: (619) 515-2454
 After Hours Phone: (619)
515-2454
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

HAMILTON, LISA MARIE

Provider ID: 418142
Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HEALTH CTR SAN
DIEGO-OAK PARK

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105
 Phone: (619) 515-2454

 After Hours Phone: (619)
515-2454
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

HAMILTON, LISA MARIE

Provider ID: 206363
Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

D2. 主治医生名录

HAMILTON, LISA MARIE

Provider ID: 206363

Provider Gender: Female

License Number: 20A14772

NPI: 1235576059


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE


HEINRICI, ALEKA

Provider ID: 451167

Provider Gender: Female

License Number: A125329

NPI: 1780979120

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP


KING CHAVEZ HEALTH CENTER

 950 S EUCLID AVE

SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:00PM

FAMILY PRACTICE


HEINRICI, ALEKA


Provider ID: 451167

Provider Gender: Female

License Number: A125329

NPI: 1780979120

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


KING CHAVEZ HEALTH


CENTER

 950 S EUCLID AVE

SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

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

h- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:00PM

FAMILY PRACTICE

HENDRIX, JEFFERSON

Provider ID: 631494

Provider Gender: Male

License Number: A32571

NPI: 1235142738

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

PRECISION PARK

 1666 PRECISION PARK LN

SAN DIEGO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

HENDRIX, JEFFERSON

Provider ID: 631494

Provider Gender: Male

D2. 主治医生名录

License Number: A32571

NPI: 1235142738

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PRECISION PARK

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

KAUFHOLD, ANNE

Provider ID: 227409

Provider Gender: Female

License Number: A88893

NPI: 1164508073

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC -

OCEAN VIEW

3177 OCEAN VIEW BLVD

SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

KAUFHOLD, ANNE

Provider ID: 227409

Provider Gender: Female

License Number: A88893

NPI: 1164508073

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC -

OCEAN VIEW

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE

KAUFMAN, JENNIFER CHILYN

Provider ID: 417987

Provider Gender: Female

License Number: G149974

NPI: 1407818768

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HEALTH CTR IBARRA

4874 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 515-2426

After Hours Phone: (619)
515-2426

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

KAUFMAN, JENNIFER CHILYN

Provider ID: 417987

Provider Gender: Female

License Number: G149974

NPI: 1407818768

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Board Certified Specialty: No

D2. 主治医生名录

Family Health Centers of San Diego

FAMILY HEALTH CTR IBARRA

4874 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 515-2426

After Hours Phone: (619) 515-2426

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

KEFLEZIGHI, BAHGHI

Provider ID: 206363

Provider Gender: Female

License Number: A100391

NPI: 1124210844

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

Fax: (619) 263-2499

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KEFLEZIGHI, BAHGHI

Provider ID: 206363

Provider Gender: Female

License Number: A100391

NPI: 1124210844

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

Fax: (619) 263-2499

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KIDDER, BRENDAN

Provider ID: 227409

Provider Gender: Male

License Number: A112379

NPI: 1275793929

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC -
OCEAN VIEW

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KIDDER, BRENDAN

Provider ID: 227409

Provider Gender: Male

License Number: A112379

NPI: 1275793929

Provider English Spoken: Y

Provider Language(s)

D2. 主治医生名录

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC -
OCEAN VIEW

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LACH, REBECCA

Provider ID: 417937

Provider Gender: Female

License Number: A177922

NPI: 1679137780

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

LACH, REBECCA

Provider ID: 417937

Provider Gender: Female

License Number: A177922

NPI: 1679137780

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

LACH, REBECCA

Provider ID: 206362

Provider Gender: Female

License Number: A177922

NPI: 1679137780

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

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

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LACH, REBECCA

Provider ID: 206362

Provider Gender: Female

License Number: A177922

NPI: 1679137780

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish






Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH



D2. 主治医生名录

CENTERS






 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LACH, REBECCA



Provider ID: 206362
Provider Gender: Female
License Number: A177922
NPI: 1679137780
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH CENTERS






 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LACH, REBECCA



Provider ID: 206362
Provider Gender: Female
License Number: A177922
NPI: 1679137780
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH CENTERS






 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LEE, SANDRINE



Provider ID: 206362
Provider Gender: Female
License Number: 20A15068
NPI: 1073909651
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH CENTERS






 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LEE, SANDRINE

Provider ID: 206362
Provider Gender: Female
License Number: 20A15068
NPI: 1073909651
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

D2. 主治医生名录

FAMILY PRACTICE

LEE, SANDRINE

Provider ID: 206362

Provider Gender: Female

License Number: 20A15068

NPI: 1073909651

Provider English Spoken: Y

Provider Language(s)
Spoken: French


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

**NORTH PARK FAMILY HEALTH
CENTERS**

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LEE, SANDRINE

Provider ID: 206362

Provider Gender: Female

License Number: 20A15068

NPI: 1073909651

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San

Diego

**NORTH PARK FAMILY HEALTH
CENTERS**

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LINDEMAN, KURTIS

Provider ID: 403583

Provider Gender: Male

License Number: A104052

NPI: 1124155791

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

**THORNTON, UCSD MEDICAL
CTR**


Board Certified Specialty: No


IHP of Southern Cal-PHP


ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LINDEMAN, KURTIS

Provider ID: 403583

Provider Gender: Male

License Number: A104052

NPI: 1124155791

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

**THORNTON, UCSD MEDICAL
CTR**


Board Certified Specialty: No


IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LISH, JONATHAN

Provider ID: 206360

D2. 主治医生名录

Provider Gender: Male

License Number: A177373

NPI: 1811459456

☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

🕒 After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LISH, JONATHAN

Provider ID: 206360

Provider Gender: Male

License Number: A177373

NPI: 1811459456

☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

🕒 After Hours Phone: (619)

515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LOUGH, MICHELLE

Provider ID: 206363

Provider Gender: Female

License Number: A165872

NPI: 1053816496

☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

📍 4725 MARKET ST
SAN DIEGO, CA 92102

☎ Phone: (619) 515-2560

🕒 After Hours Phone: (619) 515-2560

🌐 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LOUGH, MICHELLE

Provider ID: 206363

Provider Gender: Female

License Number: A165872

NPI: 1053816496

☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

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☎ Phone: (619) 515-2560

🕒 After Hours Phone: (619) 515-2560

🌐 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LU, JULIE

Provider ID: 418142

Provider Gender: Female

License Number: 20A14804

NPI: 1619210614

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

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

📍 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

☎ Phone: (619) 515-2454

D2. 主治医生名录

☎ After Hours Phone: (619) 515-2454

🌐 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

LU, JULIE

Provider ID: 418142

Provider Gender: Female

License Number: 20A14804

NPI: 1619210614

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

📍 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

☎ Phone: (619) 515-2454

☎ After Hours Phone: (619) 515-2454

🌐 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

MANDOYAN, AUSTIN

Provider ID: 206360

Provider Gender: Female

License Number: A161682

NPI: 1841726148

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

☎ After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

FAMILY PRACTICE

MANDOYAN, AUSTIN

Provider ID: 206360

Provider Gender: Female

License Number: A161682

NPI: 1841726148

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

☎ After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

FAMILY PRACTICE

MARSTON, JACQUELINE

Provider ID: 482070

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

D2. 主治医生名录

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700


 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

FAMILY PRACTICE


MARSTON, JACQUELINE

Provider ID: 206046

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

 *Provider English Spoken: Y*


 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

FAMILY PRACTICE


MARSTON, JACQUELINE

Provider ID: 482070

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

 *Provider English Spoken: Y*


 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

FAMILY PRACTICE


MARSTON, JACQUELINE

Provider ID: 206046

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

 *Provider English Spoken: Y*


 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

FAMILY PRACTICE

MARSTON, JACQUELINE

Provider ID: 206046

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish




Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR



 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

D2. 主治医生名录

 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


MARSTON, JACQUELINE

Provider ID: 206046
Provider Gender: Female
License Number: 20A12402
NPI: 1417205055
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


MATICH, BRANKO

Provider ID: 206046
Provider Gender: Male
License Number: C174985
NPI: 1023437704
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

MATICH, BRANKO


Provider ID: 206046
Provider Gender: Male
License Number: C174985
NPI: 1023437704
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE CTR






 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

MATICH, BRANKO

Provider ID: 206046
Provider Gender: Male
License Number: C174985
NPI: 1023437704
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

MATICH, BRANKO

D2. 主治医生名录

Provider ID: 206046

Provider Gender: Male

License Number: C174985


NPI: 1023437704


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

MATICH, BRANKO

Provider ID: 482070

Provider Gender: Male

License Number: C174985


NPI: 1023437704


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

FAMILY PRACTICE

MATICH, BRANKO

Provider ID: 482070

Provider Gender: Male

License Number: C174985


NPI: 1023437704


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

FAMILY PRACTICE

MCLAUGHLIN, ERIK

Provider ID: 207382

Provider Gender: Male

License Number: C176574


NPI: 1861637217


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO AMERICAN
INDIAN HEALTH CENTER

 2630 1ST AVE
SAN DIEGO, CA 92103

 Phone: (619) 234-2158

 After Hours Phone: (619)
234-2158

 Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

Indian Health Services: Y

FAMILY PRACTICE

MCLAUGHLIN, ERIK

Provider ID: 207382

Provider Gender: Male

License Number: C176574

NPI: 1861637217

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN DIEGO AMERICAN
INDIAN HEALTH CENTER

D2. 主治医生名录

 2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
 After Hours Phone: (619)
234-2158
 Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
Indian Health Services: Y




FAMILY PRACTICE

MELGAR, MONICA


Provider ID: 402851
Provider Gender: Female
License Number: A154399
NPI: 1629432174

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444



 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM




FAMILY PRACTICE


MELGAR, MONICA


Provider ID: 402851
Provider Gender: Female
License Number: A154399
NPI: 1629432174

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM

FAMILY PRACTICE



MORALES, ALEJANDRA


Provider ID: 227409

Provider Gender: Female
License Number: A162332
NPI: 1063945657

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC -
OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

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

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


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER



FAMILY PRACTICE


MORALES, ALEJANDRA

Provider ID: 227409
Provider Gender: Female
License Number: A162332
NPI: 1063945657

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC -
OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

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

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

D2. 主治医生名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): License Number: A113624

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


NAVARRO, VANESSAMARIA


Provider ID: 631494

Provider Gender: Female

License Number: A113624

NPI: 1952563421

 Provider English Spoken: Y

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA


MED CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PRECISION PARK

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


NAVARRO, VANESSAMARIA


Provider ID: 631494

Provider Gender: Female

License Number: A113624

NPI: 1952563421

 Provider English Spoken: Y

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA


MED CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PRECISION PARK

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


NGUYEN, NGOC


Provider ID: 517998

Provider Gender: Male

License Number: A74094

NPI: 1184668105

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

COMMUNITY HEIGHTS FAMILY

MED

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, NGOC


Provider ID: 517998

Provider Gender: Male

License Number: A74094

NPI: 1184668105

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

COMMUNITY HEIGHTS FAMILY

MED

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 662-4100

D2. 主治医生名录

☎ After Hours Phone: (619) 662-4100

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NGUYEN CLEARY, THAI

Provider ID: 417937

Provider Gender: Male

License Number: A86079

NPI: 1467442624

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation:

HOLLYWOOD PRESBYTERIAN
MED CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

📍 4094 4TH AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 515-2545

☎ After Hours Phone: (619)
515-2545

🌐 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

NGUYEN CLEARY, THAI

Provider ID: 417937

Provider Gender: Male

License Number: A86079

NPI: 1467442624

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation:

HOLLYWOOD PRESBYTERIAN
MED CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

📍 4094 4TH AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 515-2545

☎ After Hours Phone: (619)
515-2545

🌐 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

NIAZI, HARRIS

Provider ID: 206360

Provider Gender: Male

License Number: A146111

NPI: 1174905871

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

☎ After Hours Phone: (619)
515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NIAZI, HARRIS

Provider ID: 206360

Provider Gender: Male

License Number: A146111

NPI: 1174905871

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

📍 1809 NATIONAL AVE

D2. 主治医生名录

SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NORRIS, JEFFREY

Provider ID: 403583
Provider Gender: Male
License Number: A136275
NPI: 1073870374
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

NORRIS, JEFFREY
Provider ID: 403583
Provider Gender: Male
License Number: A136275
NPI: 1073870374
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

NUQUI, JOSIE

Provider ID: 432308
Provider Gender: Female
License Number: A71544
NPI: 1184773673
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA
MESA

9855 ERMA RD STE 105
SAN DIEGO, CA 92131
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM
SA 8:30AM-5:00PM

FAMILY PRACTICE

NUQUI, JOSIE

Provider ID: 432308
Provider Gender: Female
License Number: A71544
NPI: 1184773673
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA
MESA

9855 ERMA RD STE 105
SAN DIEGO, CA 92131
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER


D2. 主治医生名录






PROVIDER
Hours: M-F 8:30AM-5:00PM
SA 8:30AM-5:00PM

FAMILY PRACTICE

ORTIZ, KENNETH

Provider ID: 517403
Provider Gender: Male
License Number: A156607
NPI: 1356761571


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE






 316 25TH ST
SAN DIEGO, CA 92102
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

ORTIZ, KENNETH





Provider ID: 517403
Provider Gender: Male
License Number: A156607
NPI: 1356761571



 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE

 316 25TH ST
SAN DIEGO, CA 92102
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


PAYAMI, MADDIHA

Provider ID: 417429
Provider Gender: Female
License Number: 20A14012
NPI: 1336484104
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE
 1550 BROADWAY STE 2
SAN DIEGO, CA 92101
 Phone: (619) 515-2525
 After Hours Phone: (619)

515-2525
 Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

PAYAMI, MADDIHA

Provider ID: 417429
Provider Gender: Female
License Number: 20A14012
NPI: 1336484104
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE
 1550 BROADWAY STE 2
SAN DIEGO, CA 92101
 Phone: (619) 515-2525
 After Hours Phone: (619)
515-2525
 Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

PEREZ, PERLITA

D2. 主治医生名录

Provider ID: 206363

Provider Gender: Female

License Number: A119689

NPI: 1174810972

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San
Diego


DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PEREZ, PERLITA

Provider ID: 206363

Provider Gender: Female

License Number: A119689

NPI: 1174810972

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San
Diego


DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

POSADA, SEAN

Provider ID: 206360

Provider Gender: Male

License Number: A180171

NPI: 1295100691

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE

POSADA, SEAN

Provider ID: 206360

Provider Gender: Male

License Number: A180171

NPI: 1295100691

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PROPST, TOBE

Provider ID: 403583

Provider Gender: Male

License Number: A82123

NPI: 1194814277

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

D2. 主治医生名录

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619)
233-8500

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PROPST, TOBE

Provider ID: 403583
Provider Gender: Male
License Number: A82123
NPI: 1194814277

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

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619)
233-8500

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE

RAGUVEER, VISHAKA

Provider ID: 418535
Provider Gender: Female
License Number: A172736
NPI: 1740609387

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Operation Samahan

OPERATION SAMAHAN
RANCHO PENASQUITOS

9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129
Phone: (916) 419-7292
After Hours Phone: (916)
419-7292

Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM

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

FAMILY PRACTICE

RAGUVEER, VISHAKA

Provider ID: 418535
Provider Gender: Female
License Number: A172736
NPI: 1740609387

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

Operation Samahan

OPERATION SAMAHAN

RANCHO PENASQUITOS

9995 CARMEL MOUNTAIN
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SAN DIEGO, CA 92129

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After Hours Phone: (916)
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Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM

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

FAMILY PRACTICE

RAGUVEER, VISHAKA

Provider ID: 618164
Provider Gender: Female
NPI: 1740609387

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Community Care IPA LLC

VISHAKA RAGUVEER

9995 CARMEL MOUNTAIN
RD STE 10-11B
SAN DIEGO, CA 92129

Phone: (844) 200-2426
Fax: (858) 240-6470

After Hours Phone: (844)
200-2426


Website: N/A

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

American Sign Language (ASL):

D2. 主治医生名录



N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

RAMIREZ, CRISTHIAN

Provider ID: 206360
Provider Gender: Female
License Number: 20A17478
NPI: 1407200942

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619) 515-2300*
 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):



N

 *Accessibility: CONTACT PROVIDER*
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

FAMILY PRACTICE

RAMIREZ, CRISTHIAN

Provider ID: 206360

Provider Gender: Female
License Number: 20A17478
NPI: 1407200942
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER


 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619) 515-2300*
 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N





 *Accessibility: CONTACT PROVIDER*
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

FAMILY PRACTICE

RIDGE, NEAL

Provider ID: 631494
Provider Gender: Male
License Number: 20A6920
NPI: 1053381004
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH

PRECISION PARK


 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):





N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

RIDGE, NEAL

Provider ID: 631494
Provider Gender: Male
License Number: 20A6920
NPI: 1053381004
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
PRECISION PARK

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

RITTER, STEVEN

Provider ID: 451167

D2. 主治医生名录

Provider Gender: Male
License Number: 20A7435
NPI: 1356556021
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH
CENTER

📍 950 S EUCLID AVE
SAN DIEGO, CA 92114
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619)
662-4100
🌐 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RITTER, STEVEN

Provider ID: 451167
Provider Gender: Male
License Number: 20A7435
NPI: 1356556021
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH
CENTER

📍 950 S EUCLID AVE
SAN DIEGO, CA 92114
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619)
662-4100
🌐 Website: www.syhealth.org

/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RODRIGUEZ, LOUIE

Provider ID: 206360
Provider Gender: Male
License Number: A176144
NPI: 1558823625
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
🕒 After Hours Phone: (619)
515-2300
🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RODRIGUEZ, SEAN

Provider ID: 227409

Provider Gender: Male
License Number: A120576
NPI: 1780909903
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC -
OCEAN VIEW

📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619)
662-4100
🌐 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


RODRIGUEZ, SEAN


Provider ID: 227409
Provider Gender: Male
License Number: A120576
NPI: 1780909903
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA


D2. 主治医生名录


VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC -
OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

RODRIGUEZ, LOUIE


Provider ID: 206360

Provider Gender: Male

License Number: A176144

NPI: 1558823625

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RODRIGUEZ, LOUIE


Provider ID: 417937

Provider Gender: Male

License Number: A176144

NPI: 1558823625

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545


 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RODRIGUEZ, LOUIE

Provider ID: 417937

Provider Gender: Male

License Number: A176144

NPI: 1558823625

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ROSADO, IVAN

Provider ID: 517403

Provider Gender: Male

License Number: A169434

NPI: 1316479603


 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH 25TH ST

FAMILY MEDICINE

 316 25TH ST
SAN DIEGO, CA 92102

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

D2. 主治医生名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL): IHP of Southern Cal-PHP

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


ROSADO, IVAN

Provider ID: 517403

Provider Gender: Male

License Number: A169434

NPI: 1316479603

 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH 25TH ST

FAMILY MEDICINE

 316 25TH ST

SAN DIEGO, CA 92102

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


ROSENBAUM, HERBERT

Provider ID: 631494

Provider Gender: Male

License Number: A169694

NPI: 1922532712

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PRECISION PARK

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


ROSENBAUM, HERBERT

Provider ID: 631494

Provider Gender: Male

License Number: A169694

NPI: 1922532712

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PRECISION PARK

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SCHUMAKER, EDWARD

Provider ID: 185268

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

Fax: (619) 284-4731

 After Hours Phone: (619) 255-9155

 Website: www.lamaestra.org

g
Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

FAMILY PRACTICE

SCHUMAKER, EDWARD


Provider ID: 185268

Provider Gender: Male

License Number: 20A6433

D2. 主治医生名录

NPI: 1184616872

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

Fax: (619) 284-4731

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org


Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

FAMILY PRACTICE

SCOTT, RYLEE

Provider ID: 402851

Provider Gender: Male

License Number: A162946

NPI: 1457887911

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SAN


DIEGO-BEACH AREA

 3705 MISSION BLVD

SAN DIEGO, CA 92109

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


SCOTT, RYLEE

Provider ID: 402851

Provider Gender: Male

License Number: A162946

NPI: 1457887911

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD

SAN DIEGO, CA 92109

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


SCOTT, LAGINA

Provider ID: 206360

Provider Gender: Female

License Number: A160489

NPI: 1558897009

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SCOTT, LAGINA

Provider ID: 206360

Provider Gender: Female

License Number: A160489

NPI: 1558897009

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No





Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

D2. 主治医生名录

 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER







FAMILY PRACTICE





SHEIKH, ZARA

Provider ID: 233532
Provider Gender: Female
License Number: A163512
NPI: 1952808727
 Provider English Spoken: Y
 Provider Language(s) Spoken: Urdu
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC
 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 After Hours Phone: (619) 280-2058
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

FAMILY PRACTICE

SHEIKH, ZARA

Provider ID: 233597
Provider Gender: Female
License Number: A163512
NPI: 1952808727
 Provider English Spoken: Y
 Provider Language(s) Spoken: Urdu
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC
 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
 After Hours Phone: (619) 563-0250
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM
FAMILY PRACTICE
SHEIKH, ZARA
Provider ID: 233532
Provider Gender: Female
License Number: A163512
NPI: 1952808727
 Provider English Spoken: Y
 Provider Language(s) Spoken: Urdu
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP


MID-CITY COMMUNITY CLINIC
 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 After Hours Phone: (619) 280-2058
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

FAMILY PRACTICE

SHEIKH, ZARA

Provider ID: 233597
Provider Gender: Female
License Number: A163512
NPI: 1952808727
 Provider English Spoken: Y
 Provider Language(s) Spoken: Urdu
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC
 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
 After Hours Phone: (619) 563-0250
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

D2. 主治医生名录

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

FAMILY PRACTICE


SHIRAKI, JEAN

Provider ID: 417987
Provider Gender: Female
License Number: 20A17577
NPI: 1144684382
 Provider English Spoken: Y
 Provider Language(s) Spoken: Japanese
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105
 *Phone: (619) 515-2426*
 *After Hours Phone: (619) 515-2426*
 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

SHIRAKI, JEAN

Provider ID: 417987
Provider Gender: Female
License Number: 20A17577
NPI: 1144684382
 Provider English Spoken: Y
 Provider Language(s) Spoken: Japanese

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105
 *Phone: (619) 515-2426*
 *After Hours Phone: (619) 515-2426*
 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*





FAMILY PRACTICE

SHUMILAK, KAILI

Provider ID: 418142
Provider Gender: Female
License Number: 20A12796
NPI: 1831489855
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105
 *Phone: (619) 515-2454*
 *After Hours Phone: (619) 515-2454*
 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N




 *Accessibility: CONTACT PROVIDER*


FAMILY PRACTICE

SHUMILAK, KAILI

Provider ID: 418142
Provider Gender: Female
License Number: 20A12796
NPI: 1831489855
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105
 *Phone: (619) 515-2454*
 *After Hours Phone: (619) 515-2454*

 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

SMOOT, CHARLES


Provider ID: 206360
Provider Gender: Male
License Number: A97036
NPI: 1245490358
 Provider English Spoken: Y


D2. 主治医生名录


 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

*LOGAN HEIGHTS FAMILY
HEALTH CENTER*

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*


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

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 9:00AM-5:00PM

FAMILY PRACTICE


SMOOT, CHARLES

Provider ID: 206360

Provider Gender: Male

License Number: A97036

NPI: 1245490358

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

*LOGAN HEIGHTS FAMILY
HEALTH CENTER*

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

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

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 9:00AM-5:00PM

FAMILY PRACTICE


SMOOT, CHARLES

Provider ID: 356145

Provider Gender: Male

License Number: A97036

NPI: 1245490358

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

*SHERMAN HEIGHTS FAMILY
HLTH CTRS INC*

 2391 ISLAND AVE
SAN DIEGO, CA 92102

 *Phone: (619) 515-2435*

 *After Hours Phone: (619)
515-2435*

 *Website: N/A*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE


SMOOT, CHARLES

Provider ID: 356145

Provider Gender: Male

License Number: A97036

NPI: 1245490358

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

*SHERMAN HEIGHTS FAMILY
HLTH CTRS INC*

 2391 ISLAND AVE
SAN DIEGO, CA 92102

 *Phone: (619) 515-2435*

 *After Hours Phone: (619)
515-2435*

 *Website: N/A*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE

SNYDER, CHRISTOPHER


Provider ID: 517998

Provider Gender: Male

License Number: 20A7502

NPI: 1922041235

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: PIH

Hospital - Downey, JOHN F

D2. 主治医生名录

KENNEDY MEMORIAL HOSP,
CEDARS SINAI MEDICAL
CENTER, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
EISENHOWER MEDICAL CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
COMMUNITY HEIGHTS FAMILY
MED

4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SNYDER, CHRISTOPHER

Provider ID: 517998

Provider Gender: Male

License Number: 20A7502

NPI: 1922041235

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

Hospital - Downey, JOHN F

KENNEDY MEMORIAL HOSP,
CEDARS SINAI MEDICAL
CENTER, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
EISENHOWER MEDICAL CTR,

GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
COMMUNITY HEIGHTS FAMILY
MED

4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SOPHY, ELIZABETH

Provider ID: 403583

Provider Gender: Female

License Number: A157547

NPI: 1013441203

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619)
233-8500

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE

SOPHY, ELIZABETH

Provider ID: 403583

Provider Gender: Female

License Number: A157547

NPI: 1013441203

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619)
233-8500

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE

D2. 主治医生名录

SUMMERS-DAY, COURTNEY

Provider ID: 214492

Provider Gender: Female

License Number: A112781

NPI: 1124288873

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

NESTOR COMMUNITY

HEALTH CENTER

1016 OUTER RD

SAN DIEGO, CA 92154

Phone: (619) 429-3733

After Hours Phone: (619)
429-3733

Website: www.ibclinic.org

Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SUMMERS-DAY, COURTNEY

Provider ID: 214492

Provider Gender: Female

License Number: A112781

NPI: 1124288873

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

NESTOR COMMUNITY

HEALTH CENTER

1016 OUTER RD

SAN DIEGO, CA 92154

Phone: (619) 429-3733

After Hours Phone: (619)
429-3733

Website: www.ibclinic.org

Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SWARTZ, JOHN

Provider ID: 403583

Provider Gender: Male

License Number: G72486

NPI: 1396754131

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, LOS ANGELES

COUNTY HARBOR UCLA

MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

1501 IMPERIAL AVE

SAN DIEGO, CA 92101

Phone: (619) 233-8500

After Hours Phone: (619)
233-8500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

SWARTZ, JOHN

Provider ID: 403583

Provider Gender: Male

License Number: G72486

NPI: 1396754131

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, LOS ANGELES

COUNTY HARBOR UCLA

MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

1501 IMPERIAL AVE

SAN DIEGO, CA 92101

Phone: (619) 233-8500

After Hours Phone: (619)
233-8500


Website: N/A

Medi-Cal Open Panel: Yes

D2. 主治医生名录

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


THAI, JUSTIN

Provider ID: 206360

Provider Gender: Male

License Number: A177462

NPI: 1093276198

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


THAI, JUSTIN

Provider ID: 206360

Provider Gender: Male

License Number: A177462

NPI: 1093276198

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


THAI, JUSTIN

Provider ID: 417937

Provider Gender: Male

License Number: A177462

NPI: 1093276198

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

THAI, JUSTIN

Provider ID: 417937

Provider Gender: Male

License Number: A177462

NPI: 1093276198

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

D2. 主治医生名录

PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

THOMAS, ZACHARY

Provider ID: 417987

Provider Gender: Male

License Number: A145023

NPI: 1326453119


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

THOMAS, ZACHARY

Provider ID: 417987

Provider Gender: Male

License Number: A145023

NPI: 1326453119

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR IBARRA



4874 POLK AVE

SAN DIEGO, CA 92105



Phone: (619) 515-2426



After Hours Phone: (619)
515-2426



Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TRAN, TONNIA

Provider ID: 233597

Provider Gender: Female

License Number: 20A7662

NPI: 1982746657

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4290 POLK AVE

SAN DIEGO, CA 92105



Phone: (619) 563-0250



After Hours Phone: (619)
563-0250




Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TRAN, TONNIA

Provider ID: 233597

Provider Gender: Female

License Number: 20A7662

NPI: 1982746657

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4290 POLK AVE

SAN DIEGO, CA 92105



Phone: (619) 563-0250



After Hours Phone: (619)
563-0250



Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TRAN, UYEN THAO

Provider ID: 206360

Provider Gender: Female

License Number: A76709

NPI: 1891720355

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

D2. 主治医生名录

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300
Fax: (619) 795-2756

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TRAN, UYEN THAO

Provider ID: 206360

Provider Gender: Female

License Number: A76709

NPI: 1891720355

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

Fax: (619) 795-2756

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TRUONG, NHA

Provider ID: 417937

Provider Gender: Female

License Number: 20A17836

NPI: 1760975833

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2400

After Hours Phone: (619) 515-2400

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TRUONG, NHA

Provider ID: 417937

Provider Gender: Female

License Number: 20A17836

NPI: 1760975833

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2400

After Hours Phone: (619) 515-2400

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TSUCHIYA, KIMIKO

Provider ID: 417782

Provider Gender: Female

License Number: 20A19610

NPI: 1629637285

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

DOWNTOWN FAMILY CTR AT

D2. 主治医生名录

CONNECTIONS

1250 6TH AVE STE 100
SAN DIEGO, CA 92101
Phone: (619) 515-2430
After Hours Phone: (619)
515-2430

Website: www.fhcsd.org

Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

TSUCHIYA, KIMIKO

Provider ID: 417782

Provider Gender: Female

License Number: 20A19610

NPI: 1629637285

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

DOWNTOWN FAMILY CTR AT
CONNECTIONS

1250 6TH AVE STE 100
SAN DIEGO, CA 92101

Phone: (619) 515-2430

After Hours Phone: (619)
515-2430

Website: www.fhcsd.org

Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

VALENZUELA, TRICIA

Provider ID: 206363

Provider Gender: Female

License Number: A161373

NPI: 1346776358

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

VALENZUELA, TRICIA

Provider ID: 206363

Provider Gender: Female

License Number: A161373

NPI: 1346776358

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

VILLA, MARIA

Provider ID: 107710

Provider Gender: Female

NPI: 1861541385

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No

Community Care IPA LLC

MARIA T VILLA

655 SATURN BLVD STE J
SAN DIEGO, CA 92154

Phone: (619) 575-4442

Fax: (619) 575-1297

After Hours Phone: (619)
575-4442

Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 主治医生名录


N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:00PM


FAMILY PRACTICE

WANG, REGINA

Provider ID: 403583
Provider Gender: Female
License Number: A109828
NPI: 1154554871
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: LONG BEACH MEMORIAL MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 *Phone: (619) 233-8500*
 *After Hours Phone: (619) 233-8500*


 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM



FAMILY PRACTICE

WANG, REGINA


Provider ID: 403583
Provider Gender: Female
License Number: A109828

NPI: 1154554871
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: LONG BEACH MEMORIAL MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 *Phone: (619) 233-8500*
 *After Hours Phone: (619) 233-8500*


 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE


WHITE, KATHERINE



Provider ID: 227409
Provider Gender: Female
License Number: A120447
NPI: 1801112925


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC - OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

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

 *Website: <https://www.syhealth.org/locations>*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150


American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE



WHITE, KATHERINE


Provider ID: 227409
Provider Gender: Female
License Number: A120447
NPI: 1801112925

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC - OCEAN VIEW


 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

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

 *Website: <https://www.syhealth.org/locations>*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

D2. 主治医生名录

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



WU, JENNIFER

Provider ID: 403583

Provider Gender: Female

License Number: A54702

NPI: 1215953013

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

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Board Certified Specialty: No


IHP of Southern Cal-PHP


ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE



WU, JENNIFER

Provider ID: 403583

Provider Gender: Female

License Number: A54702

NPI: 1215953013

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

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Board Certified Specialty: No


IHP of Southern Cal-PHP


ST VINCENT DE PAUL VILLAGE


FAMILY HEALTH CENTER

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE

ZAHLER, MARVIN

Provider ID: 417937

Provider Gender: Male

License Number: 20A11612

NPI: 1134380710

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL


Board Certified Specialty: No

Family Health Centers of San


Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ZAHLER, MARVIN

Provider ID: 417937

Provider Gender: Male

License Number: 20A11612

NPI: 1134380710

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL

Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org


Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D2. 主治医生名录

FAMILY PRACTICE


ZINK, IRENE

Provider ID: 227409

Provider Gender: Female

License Number: C54198

NPI: 1215959549


 Provider English Spoken: Y


 Provider Language(s)
Spoken: German


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC -
OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


ZINK, IRENE


Provider ID: 227409

Provider Gender: Female

License Number: C54198

NPI: 1215959549


 Provider English Spoken: Y


 Provider Language(s)
Spoken: German


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC -
OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC,

Provider ID: 206363

NPI: 1982747671


 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

Fax: (619) 263-2499

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

FQHC

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC,

Provider ID: 206363

NPI: 1982747671


 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS


FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

Fax: (619) 263-2499

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

FQHC

DOWNTOWN FAMILY CTR AT

CONNECTIONS,

Provider ID: 417782

NPI: 1588901045

 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San

D2. 主治医生名录

Diego

DOWNTOWN FAMILY CTR AT CONNECTIONS

1250 6TH AVE STE 100
SAN DIEGO, CA 92101

Phone: (619) 515-2430

Fax: (619) 578-2410

After Hours Phone: (619)
515-2430

Website: www.fhcsd.org

Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

DOWNTOWN FAMILY CTR AT CONNECTIONS,

Provider ID: 417782

NPI: 1588901045

Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San
Diego

DOWNTOWN FAMILY CTR AT CONNECTIONS

1250 6TH AVE STE 100
SAN DIEGO, CA 92101

Phone: (619) 515-2430

Fax: (619) 578-2410

After Hours Phone: (619)
515-2430

Website: www.fhcsd.org

Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

FAMILY HEALTH CTR IBARRA,

Provider ID: 417987

NPI: 1477953933

Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San
Diego

FAMILY HEALTH CTR IBARRA

4874 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 515-2426

Fax: (619) 255-8002

After Hours Phone: (619)
515-2426

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

FQHC

FAMILY HEALTH CTR IBARRA,

Provider ID: 417987

NPI: 1477953933

Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San
Diego

FAMILY HEALTH CTR IBARRA

4874 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 515-2426

Fax: (619) 255-8002

After Hours Phone: (619)
515-2426

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

FQHC

FAMILY HEALTH CTR OF SD-ELM ST,

Provider ID: 419167

NPI: 1316419070

Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San
Diego

FAMILY HEALTH CTR OF SD-ELM ST

140 ELM ST
SAN DIEGO, CA 92101

Phone: (619) 515-2520

Fax: (619) 231-0431

After Hours Phone: (619)
515-2520

Website: www.fhcsd.org

Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC


FAMILY HEALTH CTR OF SD-

D2. 主治医生名录

ELM ST,


Provider ID: 419167

NPI: 1316419070

 Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego


FAMILY HEALTH CTR OF SD-ELM ST

 140 ELM ST
SAN DIEGO, CA 92101

 Phone: (619) 515-2520

Fax: (619) 231-0431


 After Hours Phone: (619) 515-2520

 Website: www.fhcsd.org
Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Hours: M-F 8:00AM-5:00PM

FQHC

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,


Provider ID: 664747


NPI: 1336525906

 Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

 2114 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2406

 After Hours Phone: (619) 515-2406

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


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

FQHC

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,


Provider ID: 418142

NPI: 1336525906

 Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego


FAMILY HEALTH CTR SAN DIEGO-OAK PARK

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

 Phone: (619) 515-2454

Fax: (619) 794-2696

 After Hours Phone: (619) 515-2454

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


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

FQHC

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,


Provider ID: 664747


NPI: 1336525906


 Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

 2114 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2406

 After Hours Phone: (619) 515-2406

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

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


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

FQHC

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,


Provider ID: 418142

NPI: 1336525906

 Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego


FAMILY HEALTH CTR SAN DIEGO-OAK PARK

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

 Phone: (619) 515-2454

Fax: (619) 794-2696


 After Hours Phone: (619) 515-2454

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. 主治医生名录

American Sign Language (ASL): Family Health Centers of San Diego
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL,

Provider ID: 419529

NPI: 1235521782


 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego


FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

Fax: (619) 269-0053

 After Hours Phone: (619) 515-2422

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Family Health Centers of San Diego
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL,

Provider ID: 419529

NPI: 1235521782


 Provider English Spoken: Y
Cultural Competency: N

Diego


FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

Fax: (619) 269-0053

 After Hours Phone: (619) 515-2422

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Family Health Centers of San Diego
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE,

Provider ID: 417429


NPI: 1356750376

 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2 SAN DIEGO, CA 92101

 Phone: (619) 515-2525

Fax: (619) 501-5814

 After Hours Phone: (619) 515-2525


 Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Family Health Centers of San Diego
N

 Accessibility: CONTACT PROVIDER

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

FQHC

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE,


Provider ID: 417429


NPI: 1356750376

 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2 SAN DIEGO, CA 92101

 Phone: (619) 515-2525

Fax: (619) 501-5814

 After Hours Phone: (619) 515-2525

 Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Family Health Centers of San Diego
N

 Accessibility: CONTACT PROVIDER

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

FQHC

FAMILY HLTH CTR SAN DIEGO-BEACH AREA,

Provider ID: 402851

NPI: 1386689701

 Provider English Spoken: Y
Cultural Competency: N

D2. 主治医生名录

Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

Fax: (858) 488-1394

After Hours Phone: (619) 515-2444

Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM

F 8:30AM-5:30PM

FQHC

FAMILY HLTH CTR SAN DIEGO-BEACH AREA,

Provider ID: 402851

NPI: 1386689701

Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

Fax: (858) 488-1394

After Hours Phone: (619) 515-2444

Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM

F 8:30AM-5:30PM

FQHC

FAMILY HLTH CTR SD HILLCREST,

Provider ID: 417937

NPI: 1629456900

Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

FAMILY HLTH CTR SD HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

Fax: (619) 501-9645

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FQHC

FAMILY HLTH CTR SD HILLCREST,

Provider ID: 417937

NPI: 1629456900

Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

FAMILY HLTH CTR SD HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

Fax: (619) 501-9645

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FQHC

KING CHAVEZ HEALTH CENTER,

Provider ID: 451167

NPI: 1538262092

Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP
KING CHAVEZ HEALTH CENTER


950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

Fax: (619) 205-1952

After Hours Phone: (619) 662-4100

D2. 主治医生名录


 Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM




FQHC

KING CHAVEZ HEALTH CENTER,


Provider ID: 451167

NPI: 1538262092

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 Fax: (619) 205-1952

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM



FQHC


LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185268

NPI: 1336353721

 Provider English Spoken: Y
Cultural Competency: N
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 280-4213

 Fax: (619) 795-9849

 After Hours Phone: (619) 280-4213

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Hours: M-F 8:00AM-5:00PM



FQHC


LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185268


NPI: 1336353721

 Provider English Spoken: Y
Cultural Competency: N
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 280-4213

 Fax: (619) 795-9849

 After Hours Phone: (619) 280-4213

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

LINDA VISTA HEALTH CARE CTR,

Provider ID: 206046


NPI: 1780665877


 Provider English Spoken: Y
Cultural Competency: N


IHP of Southern Cal-PHP


LINDA VISTA HEALTH CARE CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 Fax: (858) 633-4680


 After Hours Phone: (858) 279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

D2. 主治医生名录

LINDA VISTA HEALTH CARE CTR,

Provider ID: 206046

NPI: 1609905215

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

🕒 After Hours Phone: (858)
279-0925

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

LINDA VISTA HEALTH CARE CTR,

Provider ID: 206046

NPI: 1780665877

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

🕒 After Hours Phone: (858)
279-0925

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

LINDA VISTA HEALTH CARE CTR,

Provider ID: 206046

NPI: 1609905215

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

🕒 After Hours Phone: (858)
279-0925

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

LOGAN HEIGHTS FAMILY HEALTH CENTER,

Provider ID: 206360

NPI: 1447281936

☐ Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

Fax: (619) 234-2447

🕒 After Hours Phone: (619)
515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER

FQHC

LOGAN HEIGHTS FAMILY HEALTH CENTER,

Provider ID: 206360

NPI: 1447281936

☐ Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

Fax: (619) 234-2447

🕒 After Hours Phone: (619)
515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

D2. 主治医生名录

Min/Max Age: 0\150

American Sign Language (ASL):  2204 NATIONAL AVE

N

 Accessibility: CONTACT PROVIDER

FQHC

LOGAN HEIGHTS FAMILY HEALTH CENTER,

Provider ID: 624977


NPI: 1447281936

 Provider English Spoken: Y
Cultural Competency: N


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 2204 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2355
Fax: (619) 232-7011


 After Hours Phone: (619) 515-2355

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FQHC

LOGAN HEIGHTS FAMILY HEALTH CENTER,

Provider ID: 624977

NPI: 1447281936


 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

 2204 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2355
Fax: (619) 232-7011

 After Hours Phone: (619) 515-2355

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FQHC

MID-CITY COMMUNITY CLINIC,

Provider ID: 233532


NPI: 1962483040

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105
 Phone: (619) 280-2058

Fax: (858) 633-4682

 After Hours Phone: (619) 280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

FQHC

MID-CITY COMMUNITY CLINIC,

Provider ID: 233597


NPI: 1962483040

 Provider English Spoken: Y
Cultural Competency: N


IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250
Fax: (858) 633-4681

 After Hours Phone: (619) 563-0250

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

FQHC

MID-CITY COMMUNITY CLINIC,

Provider ID: 233597


NPI: 1962483040

 Provider English Spoken: Y
Cultural Competency: N


IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250
Fax: (858) 633-4681

 After Hours Phone: (619) 563-0250

 Website: www.sdfamilycare.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. 主治医生名录

American Sign Language (ASL): NESTOR COMMUNITY

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

FQHC


MID-CITY COMMUNITY CLINIC,
Provider ID: 233532


NPI: 1962483040

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP


MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

 Phone: (619) 280-2058

Fax: (858) 633-4682

 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

FQHC

NESTOR COMMUNITY HEALTH CENTER,

Provider ID: 214492


NPI: 1215246996

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

HEALTH CENTER

 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

 Website: www.ibclinic.org

Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:00PM

TU-TH 8:30AM-8:00PM

F 8:30AM-5:00PM

FQHC

NESTOR COMMUNITY HEALTH CENTER,

Provider ID: 214492

NPI: 1215246996


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

NESTOR COMMUNITY

HEALTH CENTER

 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

 Website: www.ibclinic.org

Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:00PM

TU-TH 8:30AM-8:00PM

F 8:30AM-5:00PM

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 206362


NPI: 1700821303

 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

Fax: (619) 501-0627

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 206362

NPI: 1184169963

 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

D2. 主治医生名录

NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
Fax: (619) 501-0627
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

FQHC NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 416831
NPI: 1700821303
Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
Fax: (619) 683-7586
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 206362
NPI: 1700821303
Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
Fax: (619) 501-0627
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 416831
NPI: 1700821303
Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
Fax: (619) 683-7586

After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 206362
NPI: 1184169963
Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
Fax: (619) 501-0627
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER


FQHC

OPERATION SAMAHAN - MIRA MESA,


Provider ID: 432308

D2. 主治医生名录


NPI: 1861933897

 Provider English Spoken: Y
Cultural Competency: N
Operation Samahan
OPERATION SAMAHAN - MIRA
MESA

 9855 ERMA RD STE 105
SAN DIEGO, CA 92131

 Phone: (844) 200-2426
Fax: (858) 536-8034


 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FQHC

OPERATION SAMAHAN - MIRA MESA,

Provider ID: 417101


NPI: 1871680397


 Provider English Spoken: Y
Cultural Competency: N


Operation Samahan

OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235

 Phone: (844) 200-2426
Fax: (858) 578-4417

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

FQHC

OPERATION SAMAHAN - MIRA MESA,

Provider ID: 432308


NPI: 1861933897

 Provider English Spoken: Y
Cultural Competency: N


Operation Samahan

OPERATION SAMAHAN - MIRA
MESA

 9855 ERMA RD STE 105
SAN DIEGO, CA 92131

 Phone: (844) 200-2426
Fax: (858) 536-8034

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FQHC

OPERATION SAMAHAN - MIRA MESA,

Provider ID: 417101

NPI: 1871680397


 Provider English Spoken: Y
Cultural Competency: N

Operation Samahan


OPERATION SAMAHAN - MIRA
MESA


 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

Fax: (858) 578-4417

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

FQHC

OPERATION SAMAHAN RANCHO PENASQUITOS,

Provider ID: 418535


NPI: 1699216622

 Provider English Spoken: Y
Cultural Competency: N


Operation Samahan

OPERATION SAMAHAN

RANCHO PENASQUITOS


 9995 CARMEL MOUNTAIN
RD STE B10 AND B11

SAN DIEGO, CA 92129

 Phone: (844) 200-2426

Fax: (858) 695-9074

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D2. 主治医生名录

Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

FQHC

OPERATION SAMAHAN RANCHO PENASQUITOS,

Provider ID: 418535

NPI: 1699216622

☐ Provider English Spoken: Y
Cultural Competency: N

Operation Samahan

OPERATION SAMAHAN RANCHO PENASQUITOS

📍 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

☎ Phone: (844) 200-2426

Fax: (858) 695-9074

🕒 After Hours Phone: (844)
200-2426

🌐 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

FQHC

SAN DIEGO AMERICAN INDIAN HEALTH CENTER,

Provider ID: 207382

NPI: 1003902917

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN DIEGO AMERICAN INDIAN HEALTH CENTER

📍 2630 1ST AVE

SAN DIEGO, CA 92103

☎ Phone: (619) 234-2158

Fax: (619) 234-0206

🕒 After Hours Phone: (619)
234-2158

🌐 Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

Indian Health Services: Y

FQHC

SAN DIEGO AMERICAN INDIAN HEALTH CENTER,

Provider ID: 207382

NPI: 1003902917

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN DIEGO AMERICAN

INDIAN HEALTH CENTER

📍 2630 1ST AVE

SAN DIEGO, CA 92103

☎ Phone: (619) 234-2158

Fax: (619) 234-0206

🕒 After Hours Phone: (619)
234-2158

🌐 Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:00PM

Indian Health Services: Y

FQHC

SAN DIEGO FAMILY CARE,

Provider ID: 482070

NPI: 1457724858

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

📍 7011 LINDA VISTA RD

SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700

Fax: (858) 633-4680

🕒 After Hours Phone: (858)
810-8700

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

FQHC

SAN DIEGO FAMILY CARE,

Provider ID: 482070

NPI: 1457724858

☐ Provider English Spoken: Y
Cultural Competency: N




IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE


📍 7011 LINDA VISTA RD







SAN DIEGO, CA 92111

D2. 主治医生名录


 Phone: (858) 810-8700
 Fax: (858) 633-4680
 After Hours Phone: (858) 810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM







FQHC

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE,
Provider ID: 517403
NPI: 1598308926
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE






 316 25TH ST
SAN DIEGO, CA 92102
 Phone: (619) 238-5551
 Fax: (619) 238-3807
 After Hours Phone: (619) 238-5551
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM



FQHC

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE,
Provider ID: 517403
NPI: 1598308926
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE








 316 25TH ST
SAN DIEGO, CA 92102
 Phone: (619) 238-5551
 Fax: (619) 238-3807
 After Hours Phone: (619) 238-5551
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH CHC - OCEAN VIEW,
Provider ID: 227409
NPI: 1326225632
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC - OCEAN VIEW
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 Fax: (619) 595-0258
 After Hours Phone: (619)

662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH CHC - OCEAN VIEW,
Provider ID: 227409
NPI: 1326225632
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC - OCEAN VIEW
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 Fax: (619) 595-0258
 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED,

D2. 主治医生名录

Provider ID: 517998
NPI: 1205477841
☐ Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
COMMUNITY HEIGHTS FAMILY
MED

📍 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
☎ Phone: (619) 662-4100
Fax: (619) 824-9076
📞 After Hours Phone: (619)
662-4100
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
SAN YSIDRO HEALTH
COMMUNITY HEIGHTS FAMILY
MED,

Provider ID: 517998
NPI: 1205477841
☐ Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
COMMUNITY HEIGHTS FAMILY
MED

📍 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
☎ Phone: (619) 662-4100
Fax: (619) 824-9076
📞 After Hours Phone: (619)
662-4100

🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
SAN YSIDRO HEALTH
PRECISION PARK,

Provider ID: 631494
NPI: 1124782685
☐ Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
PRECISION PARK

📍 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
☎ Phone: (619) 662-4100
Fax: (619) 600-4870
📞 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
SAN YSIDRO HEALTH
PRECISION PARK,

Provider ID: 631494
NPI: 1124782685
☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
PRECISION PARK
📍 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
☎ Phone: (619) 662-4100
Fax: (619) 600-4870
📞 After Hours Phone: (619)
662-4100
🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
SHERMAN HEIGHTS FAMILY
HLTH CTRS INC,

Provider ID: 356145
NPI: 1174549232
☐ Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San
Diego
SHERMAN HEIGHTS FAMILY
HLTH CTRS INC

📍 2391 ISLAND AVE
SAN DIEGO, CA 92102
☎ Phone: (619) 515-2435
Fax: (619) 515-2435
📞 After Hours Phone: (619)
515-2435

🌐 Website: N/A
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

D2. 主治医生名录


 *Accessibility: CONTACT PROVIDER*

FQHC

SHERMAN HEIGHTS FAMILY HLTH CTRS INC,


Provider ID: 356145

NPI: 1174549232


 *Provider English Spoken: Y*
Cultural Competency: N
Family Health Centers of San Diego

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

 2391 ISLAND AVE
SAN DIEGO, CA 92102

 *Phone: (619) 515-2435*
Fax: (619) 515-2435

 *After Hours Phone: (619) 515-2435*

 *Website: N/A*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

FQHC

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER,


Provider ID: 403583

NPI: 1659415131

 *Provider English Spoken: Y*
Cultural Competency: N
IHP of Southern Cal-PHP


ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 *Phone: (619) 233-8500*
Fax: (619) 687-1067

 *After Hours Phone: (619) 233-8500*


 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM


FQHC

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER,

Provider ID: 403583
NPI: 1659415131


 *Provider English Spoken: Y*
Cultural Competency: N
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 *Phone: (619) 233-8500*
Fax: (619) 687-1067

 *After Hours Phone: (619) 233-8500*

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM

GASTROENTEROLOGY


FRENETTE, CATHERINE

Provider ID: 417937

Provider Gender: Female

License Number: A80461



NPI: 1417935081


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, CALIFORNIA PACIFIC MED CTR

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 *Phone: (619) 515-2545*
 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

GASTROENTEROLOGY

FRENETTE, CATHERINE

Provider ID: 417937

Provider Gender: Female

License Number: A80461

NPI: 1417935081

 *Provider English Spoken: Y*
Cultural Competency: N

D2. 主治医生名录

Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, CALIFORNIA PACIFIC MED CTR

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545
After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

GASTROENTEROLOGY

GADDIPATI, KISHORE

Provider ID: 417937

Provider Gender: Male

License Number: A111638

NPI: 1720114093

Provider English Spoken: Y

Provider Language(s)
Spoken: Faroese, Hindi,
Spanish, Telugu, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545
After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

GASTROENTEROLOGY

GADDIPATI, KISHORE

Provider ID: 417937

Provider Gender: Male

License Number: A111638

NPI: 1720114093

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Spanish, Telugu, Urdu

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MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

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HILLCREST

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Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

GASTROENTEROLOGY

HAI, FAIZI

Provider ID: 417937

Provider Gender: Male

License Number: A159324

NPI: 1639523228

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545
After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

D2. 主治医生名录

GASTROENTEROLOGY

HAI, FAIZI

Provider ID: 417937

Provider Gender: Male

License Number: A159324

NPI: 1639523228

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

GASTROENTEROLOGY

STIPHO, SALLY

Provider ID: 417937

Provider Gender: Female

License Number: A104647

NPI: 1467642215

Provider English Spoken: Y

Provider Language(s)
Spoken: French


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, KINDRED
HOSPITAL SAN DIEGO,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

GASTROENTEROLOGY

STIPHO, SALLY

Provider ID: 417937

Provider Gender: Female

License Number: A104647

NPI: 1467642215

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, KINDRED
HOSPITAL SAN DIEGO,
SCRIPPS MERCY HOSPITAL


CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

GENERAL PRACTICE

BELLO, OSAGIE

Provider ID: 417101

Provider Gender: Male

License Number: A115182

NPI: 1164726378

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL,
SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY
HOSPITAL, SCRIPPS GREEN
HOSPITAL

Board Certified Specialty: No
Operation Samahan

D2. 主治医生名录

OPERATION SAMAHAN - MIRA
MESA

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

GENERAL PRACTICE

BELLO, OSAGIE

Provider ID: 417101

Provider Gender: Male

License Number: A115182

NPI: 1164726378

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

PARADISE VALLEY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY

HOSPITAL, SCRIPPS GREEN

HOSPITAL

Board Certified Specialty: No

Operation Samahan

OPERATION SAMAHAN - MIRA
MESA

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

GENERAL PRACTICE

DOAN STEPHENS, CRYSTAL

Provider ID: 233532

Provider Gender: Female

License Number: A152267

NPI: 1730570144

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

After Hours Phone: (619)
280-2058

Website: [www.sdfamilycare
.org](http://www.sdfamilycare
.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

GENERAL PRACTICE

DOAN STEPHENS, CRYSTAL

Provider ID: 233532

Provider Gender: Female

License Number: A152267

NPI: 1730570144

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

After Hours Phone: (619)
280-2058

Website: [www.sdfamilycare
.org](http://www.sdfamilycare
.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

GENERAL PRACTICE

RECALDE, FRANCISCO

Provider ID: 13850

Provider Gender: Male

NPI: 1538309067

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No

Community Care IPA LLC

FRANCISCO J RECALDE



3811 EL CAJON BLVD
SAN DIEGO, CA 92105

Phone: (619) 284-5622

Fax: (619) 566-4655





After Hours Phone: (619)

D2. 主治医生名录



507-3050
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:00PM

GENERAL PRACTICE

RECALDE, FRANCISCO

Provider ID: 13850
Provider Gender: Male
NPI: 1538309067
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
Imperial Health Holdings
Medical Group-SD
FRANCISCO J RECALDE
 3811 EL CAJON BLVD
SAN DIEGO, CA 92105
 Phone: (619) 284-5622
Fax: (619) 566-4655

 After Hours Phone: (619)
507-3050

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 16\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:00PM


HEPATOLOGY

GISH, ROBERT

Provider ID: 185268
Provider Gender: Male
License Number: G45632
NPI: 1548281322

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Dutch, French,
Spanish, Vietnamese
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619)
255-9155
 Website: www.lamaestra.org

g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

HEPATOLOGY


GISH, ROBERT


Provider ID: 185268
Provider Gender: Male
License Number: G45632
NPI: 1548281322

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Dutch, French,
Spanish, Vietnamese
Cultural Competency: N
Board Certified Specialty: No

La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


INTERNAL MEDICINE


ALASSIL, SALLY

Provider ID: 419529
Provider Gender: Female
License Number: A122238
NPI: 1982044483

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR OF SD SAN
DIEGO COMMERCIAL

 2325 COMMERCIAL ST STE
1400
SAN DIEGO, CA 92113
 Phone: (619) 515-2422
 After Hours Phone: (619)
515-2422


 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

D2. 主治医生名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

ALASSIL, SALLY

Provider ID: 419529

Provider Gender: Female

License Number: A122238

NPI: 1982044483

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

 After Hours Phone: (619) 515-2422


 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


ALASSIL, SALLY

Provider ID: 206360

Provider Gender: Female

License Number: A122238

NPI: 1982044483

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


ALASSIL, SALLY

Provider ID: 206360

Provider Gender: Female

License Number: A122238

NPI: 1982044483

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

ALDOUS, JEANNETTE

Provider ID: 451167

Provider Gender: Female

License Number: A101017

NPI: 1073650339

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD MEDICAL CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP

KING CHAVEZ HEALTH CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

D2. 主治医生名录

PROVIDER

INTERNAL MEDICINE

ALDOUS, JEANNETTE

Provider ID: 451167

Provider Gender: Female

License Number: A101017

NPI: 1073650339

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP


KING CHAVEZ HEALTH

CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

ANDERSON, KENDELL

Provider ID: 417937

Provider Gender: Female

License Number: 20A15598

NPI: 1285028191

Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

ANDERSON, KENDELL

Provider ID: 417937

Provider Gender: Female

License Number: 20A15598

NPI: 1285028191

Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

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 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

ANDREWS, JOHN

Provider ID: 403583

Provider Gender: Male

License Number: G71080

NPI: 1003164302

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

ANDREWS, JOHN

Provider ID: 403583

Provider Gender: Male

D2. 主治医生名录

License Number: G71080
NPI: 1003164302
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

BENITEZ, MARTHA

Provider ID: 206362
Provider Gender: Female
License Number: 20A19248
NPI: 1124521901
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

BENITEZ, MARTHA

Provider ID: 206362
Provider Gender: Female
License Number: 20A19248
NPI: 1124521901
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

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Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

BENITEZ, MARTHA

Provider ID: 206362

Provider Gender: Female
License Number: 20A19248
NPI: 1124521901
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

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American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

BENITEZ, MARTHA

Provider ID: 206362
Provider Gender: Female
License Number: 20A19248
NPI: 1124521901
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

3544 30TH ST

D2. 主治医生名录

SAN DIEGO, CA 92104
☎ Phone: (619) 515-2424
🕒 After Hours Phone: (619) 515-2424
🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

BOHR, CHRISTINA

Provider ID: 417937
Provider Gender: Female
License Number: 20A17702
NPI: 1841794344
☑ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST

📍 4094 4TH AVE
SAN DIEGO, CA 92103
☎ Phone: (619) 515-2545
🕒 After Hours Phone: (619) 515-2545
🌐 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

BOHR, CHRISTINA

Provider ID: 417937
Provider Gender: Female
License Number: 20A17702
NPI: 1841794344
☑ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
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Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

BRIONES COLMAN, FELICIA

Provider ID: 417937
Provider Gender: Female
License Number: A80153
NPI: 1962517367
☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST
📍 4094 4TH AVE


SAN DIEGO, CA 92103
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

BRIONES COLMAN, FELICIA

Provider ID: 417937
Provider Gender: Female
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☑ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
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Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

D2. 主治医生名录

 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE


CHAN, ANDY

Provider ID: 417937

Provider Gender: Male

License Number: 20A20352

NPI: 1104480912

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 *4094 4TH AVE*
SAN DIEGO, CA 92103

 *Phone: (619) 515-2545*

 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

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Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE


CHAN, ANDY

Provider ID: 417937

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NPI: 1104480912

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 *Provider Language(s) Spoken: Spanish*

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Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SD

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE


CHANDRADAS, SAJIV

Provider ID: 417937

Provider Gender: Male

License Number: A122474

NPI: 1720350465

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No


Family Health Centers of San


Diego

FAMILY HLTH CTR SD

HILLCREST

 *4094 4TH AVE*
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 *Phone: (619) 515-2545*

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Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-9:00PM

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Provider ID: 417937

Provider Gender: Male

License Number: A122474

NPI: 1720350465

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS

MERCY HOSPITAL


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST


 *4094 4TH AVE*
SAN DIEGO, CA 92103

 *Phone: (619) 515-2545*

 *After Hours Phone: (619)*

D2. 主治医生名录

515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

CHEN, JAMES

Provider ID: 417937
Provider Gender: Male
License Number: A86644
NPI: 1265495691



Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CHEN, JAMES

Provider ID: 417937
Provider Gender: Male
License Number: A86644
NPI: 1265495691



Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

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 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CSAPOCZI, PETER

Provider ID: 451167



Provider Gender: Male


License Number: A96919
NPI: 1841357118

Provider English Spoken: Y
 Provider Language(s)
Spoken: Hungarian,
Spanish, Ukrainian

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

INTERNAL MEDICINE

CSAPOCZI, PETER

Provider ID: 451167

Provider Gender: Male

License Number: A96919
NPI: 1841357118

Provider English Spoken: Y
 Provider Language(s)
Spoken: Hungarian,
Spanish, Ukrainian

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH

D2. 主治医生名录

CENTER


 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:00PM

INTERNAL MEDICINE

CUMMINS, ANDREW

Provider ID: 417937

Provider Gender: Male

License Number: A102764

NPI: 1699917096

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS


Board Certified Specialty: No

Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

CUMMINS, ANDREW

Provider ID: 417937

Provider Gender: Male

License Number: A102764

NPI: 1699917096

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS


Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

CURTIS, MEGAN

Provider ID: 206360

Provider Gender: Female

License Number: A187390


NPI: 1699138115


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300


 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

CURTIS, MEGAN

Provider ID: 206360

Provider Gender: Female

License Number: A187390

NPI: 1699138115

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San

D2. 主治医生名录

Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

DAHMS, ERIC

Provider ID: 417937

Provider Gender: Male

License Number: G80316

NPI: 1306808464

Provider English Spoken: Y

Provider Language(s)
Spoken: German

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

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SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

DAHMS, ERIC

Provider ID: 417937

Provider Gender: Male

License Number: G80316

NPI: 1306808464

Provider English Spoken: Y

Provider Language(s)
Spoken: German

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

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Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

DIEP, KEVIN

Provider ID: 417937

Provider Gender: Male

License Number: 20A17657

NPI: 1083117865

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

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Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

DIEP, KEVIN

Provider ID: 417937

Provider Gender: Male

License Number: 20A17657

NPI: 1083117865

Provider English Spoken: Y



D2. 主治医生名录


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR SD
HILLCREST

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE



DIXIT, SHUBHAM

Provider ID: 417937

Provider Gender: Male


License Number: 20A21421

NPI: 1932785367


 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Hindi

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
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 *Accessibility: CONTACT*
PROVIDER
Hours: M-TH 8:00AM-9:00PM
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INTERNAL MEDICINE



DIXIT, SHUBHAM

Provider ID: 417937

Provider Gender: Male

License Number: 20A21421


NPI: 1932785367

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Hindi


Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

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Medi-Cal Open Panel: Yes
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American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE



DODGE, JOHN

Provider ID: 417937

Provider Gender: Male

License Number: G67831


NPI: 1770510489

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 *Phone: (619) 515-2545*
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Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

INTERNAL MEDICINE

DODGE, JOHN

Provider ID: 417937

Provider Gender: Male

License Number: G67831

D2. 主治医生名录

NPI: 1770510489

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
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Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

DOMINGUEZ, FERNANDO

Provider ID: 417937

Provider Gender: Male

License Number: A154708

NPI: 1972917672

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

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 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

DOMINGUEZ, FERNANDO

Provider ID: 417937

Provider Gender: Male

License Number: A154708

NPI: 1972917672

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR SD

HILLCREST

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PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

FABELLA, GABRIEL

Provider ID: 9774

Provider Gender: Male

NPI: 1124060827

Provider English Spoken: Y

Provider Language(s)
Spoken: Japanese, Spanish,
Tagalog


Cultural Competency: N

Board Certified Specialty: No

Community Care IPA LLC

GABRIEL T FABELLA

 10737 CAMINO RUIZ STE 115
SAN DIEGO, CA 92126

 Phone: (858) 695-1262

Fax: (858) 695-2132

 After Hours Phone: (858)
695-1262


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-3:00PM

INTERNAL MEDICINE

FARASAT, SADAF

Provider ID: 206360

Provider Gender: Female

License Number: A147939

NPI: 1255696407

Provider English Spoken: Y



Provider Language(s)

D2. 主治医生名录

Spoken: Hindi, Punjabi, Urdu
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, NATIVIDAD MEDICAL CENTER, PALOMAR MEDICAL CENTER
Board Certified Specialty: No Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619) 515-2300*
 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE



FARASAT, SADAF






Provider ID: 206360
Provider Gender: Female
License Number: A147939
NPI: 1255696407
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Hindi, Punjabi, Urdu*
Cultural Competency: N
Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, NATIVIDAD MEDICAL CENTER, PALOMAR MEDICAL CENTER
Board Certified Specialty: No Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619) 515-2300*
 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

GEHR, MARC

Provider ID: 417937
Provider Gender: Male
License Number: G67338
NPI: 1306800180
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No Family Health Centers of San Diego
FAMILY HLTH CTR SD

HILLCREST
 4094 4TH AVE
SAN DIEGO, CA 92103
 *Phone: (619) 515-2545*
 *After Hours Phone: (619) 515-2545*
 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*


INTERNAL MEDICINE

GEHR, MARC

Provider ID: 417937
Provider Gender: Male
License Number: G67338
NPI: 1306800180
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST
 4094 4TH AVE
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 *Phone: (619) 515-2545*
 *After Hours Phone: (619) 515-2545*
 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

D2. 主治医生名录

N

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE


GERWER, JOHANNA

Provider ID: 206360

Provider Gender: Female


License Number: A169752


NPI: 1043742588

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113


 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): IHP of Southern Cal-PHP

N

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE


GERWER, JOHANNA

Provider ID: 206360

Provider Gender: Female

License Number: A169752


NPI: 1043742588


 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San


Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE


GUTIERREZ, ANGELICA

Provider ID: 233597

Provider Gender: Female

License Number: A175116


NPI: 1982180329


 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No

IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105

 *Phone: (619) 563-0250*

 *After Hours Phone: (619) 563-0250*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

INTERNAL MEDICINE


GUTIERREZ, ANGELICA

Provider ID: 233597

Provider Gender: Female

License Number: A175116


NPI: 1982180329


 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No


IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105

 *Phone: (619) 563-0250*

 *After Hours Phone: (619) 563-0250*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

INTERNAL MEDICINE



HAN, PAUL

Provider ID: 417937

Provider Gender: Male

License Number: A116816

NPI: 1053553339

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Korean*
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

D2. 主治医生名录

VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

HAN, PAUL

Provider ID: 417937

Provider Gender: Male

License Number: A116816

NPI: 1053553339

Provider English Spoken: Y

Provider Language(s)
Spoken: Korean

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

HAZELBAKER, PAUL

Provider ID: 417782

Provider Gender: Male

License Number: 20A7147

NPI: 1831106103

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

DOWNTOWN FAMILY CTR AT
CONNECTIONS

1250 6TH AVE STE 100

SAN DIEGO, CA 92101

Phone: (619) 515-2430

After Hours Phone: (619)
515-2430

Website: www.fhcsd.org

Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

HAZELBAKER, PAUL

Provider ID: 417782

Provider Gender: Male

License Number: 20A7147

NPI: 1831106103

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

DOWNTOWN FAMILY CTR AT
CONNECTIONS

1250 6TH AVE STE 100

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Phone: (619) 515-2430

After Hours Phone: (619)
515-2430

Website: www.fhcsd.org

Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

HENDERSON, PHILIP

Provider ID: 417937

Provider Gender: Male

License Number: A140324

NPI: 1447678834


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

D2. 主治医生名录


FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

HENDERSON, PHILIP

Provider ID: 417937

Provider Gender: Male

License Number: A140324

NPI: 1447678834


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
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 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

HIGGINSON, MICHELLE

Provider ID: 417937

Provider Gender: Female

License Number: A74420

NPI: 1114955879

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE


HIGGINSON, MICHELLE

Provider ID: 417937

Provider Gender: Female

License Number: A74420



NPI: 1114955879


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD


HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
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515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE



JACKSON, GAVIN

Provider ID: 417937

Provider Gender: Male

License Number: A110647

NPI: 1609033182

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San

D2. 主治医生名录

Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

INTERNAL MEDICINE

JACKSON, GAVIN

Provider ID: 417937

Provider Gender: Male

License Number: A110647

NPI: 1609033182

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

INTERNAL MEDICINE

JAMISON, KAREN

Provider ID: 417937

Provider Gender: Female

License Number: A95356

NPI: 1285830505

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

Fax: (619) 501-9645

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

JAMISON, KAREN

Provider ID: 417937

Provider Gender: Female

License Number: A95356

NPI: 1285830505

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

Fax: (619) 501-9645

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

KARCHES, KELLI

Provider ID: 417937

Provider Gender: Female

License Number: A80931

NPI: 1891997631

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

D2. 主治医生名录

MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

KARCHES, KELLI

Provider ID: 417937

Provider Gender: Female

License Number: A80931

NPI: 1891997631

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

MEDICAL CTR

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

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Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

KHANNA, POORNIMA

Provider ID: 185268

Provider Gender: Female

License Number: A70714

NPI: 1598862583

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105

Phone: (619) 280-4213

After Hours Phone: (619)
280-4213

Website: www.lamaestra.org

g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

KHANNA, POORNIMA

Provider ID: 185268

Provider Gender: Female

License Number: A70714

NPI: 1598862583

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

4060 FAIRMOUNT AVE

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Phone: (619) 280-4213

After Hours Phone: (619)
280-4213

Website: www.lamaestra.org

g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

D2. 主治医生名录

KRIJGER, LISA

Provider ID: 403583

Provider Gender: Female

License Number: A67762



NPI: 1932278710

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

INTERNAL MEDICINE

KRIJGER, LISA

Provider ID: 403583

Provider Gender: Female

License Number: A67762



NPI: 1932278710

Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500
 After Hours Phone: (619)

233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

INTERNAL MEDICINE

LALITHAKUMARI, ARYA

Provider ID: 206362

Provider Gender: Female

License Number: A140646

NPI: 1265874010

Provider English Spoken: Y
Cultural Competency: N



Hospital Affiliation: Hemet
Global Medical Center, Menifee


Global Medical Center
Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LALITHAKUMARI, ARYA

Provider ID: 206362

Provider Gender: Female

License Number: A140646

NPI: 1265874010

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Hemet
Global Medical Center, Menifee



Global Medical Center


Board Certified Specialty: No
Family Health Centers of San

Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LALITHAKUMARI, ARYA

Provider ID: 206362

Provider Gender: Female

License Number: A140646

NPI: 1265874010

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Hemet

Global Medical Center, Menifee
Global Medical Center

Board Certified Specialty: No
Family Health Centers of San

D2. 主治医生名录

Diego

NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

LALITHAKUMARI, ARYA

Provider ID: 206362

Provider Gender: Female

License Number: A140646

NPI: 1265874010

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Hemet

Global Medical Center, Menifee

Global Medical Center

Board Certified Specialty: No

Family Health Centers of San

Diego

NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 451167

Provider Gender: Female

License Number: G71855

NPI: 1124176102

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

KING CHAVEZ HEALTH

CENTER

950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 451167

Provider Gender: Female

License Number: G71855

NPI: 1124176102

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

KING CHAVEZ HEALTH

CENTER

950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

LEE, MICHAEL

Provider ID: 206360

Provider Gender: Male

License Number: A71671

NPI: 1760406649

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS GREEN HOSPITAL

Board Certified Specialty: No

Family Health Centers of San

Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113


Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

D2. 主治医生名录

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER




INTERNAL MEDICINE

LEE, MICHAEL

Provider ID: 206360
Provider Gender: Male
License Number: A71671
NPI: 1760406649


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS GREEN HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

MARCINIAK, ROMAN



Provider ID: 206360
Provider Gender: Male
License Number: 20A17072
NPI: 1326579210


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

MARCINIAK, ROMAN


Provider ID: 206360
Provider Gender: Male
License Number: 20A17072
NPI: 1326579210

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER


 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE



NARANJO, RODRIGO


Provider ID: 482070
Provider Gender: Male
License Number: A119010
NPI: 1609095264

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

NARANJO, RODRIGO

Provider ID: 206046
Provider Gender: Male

D2. 主治医生名录

License Number: A119010

NPI: 1609095264

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE

CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925


 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

NARANJO, RODRIGO

Provider ID: 206046

Provider Gender: Male

License Number: A119010

NPI: 1609095264

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE

CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)

279-0925

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

NARANJO, RODRIGO

Provider ID: 482070

Provider Gender: Male

License Number: A119010

NPI: 1609095264

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

NARANJO, RODRIGO

Provider ID: 206046

Provider Gender: Male

License Number: A119010

NPI: 1609095264

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


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 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

NARANJO, RODRIGO

Provider ID: 206046

Provider Gender: Male

License Number: A119010

NPI: 1609095264

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE

CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

D2. 主治医生名录

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


NARAYANAN, MEENA

Provider ID: 206363

Provider Gender: Female

License Number: A113448

NPI: 1508170697

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,

Adventist Health and Rideout

Board Certified Specialty: No

Family Health Centers of San

Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC


 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)

515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


NARAYANAN, MEENA

Provider ID: 206363

Provider Gender: Female

License Number: A113448

NPI: 1508170697

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,

Adventist Health and Rideout

Board Certified Specialty: No

Family Health Centers of San


Diego


DIAMOND NEIGHBORHOODS


FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


PARIKH, MILIND


Provider ID: 206363

Provider Gender: Male

License Number: 20A13745

NPI: 1194161406

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Gujarati, Hindi,
Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp

Grossmont Hospital, Adventist
Health and Rideout


Board Certified Specialty: No

Family Health Centers of San


Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

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 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

PARIKH, MILIND


Provider ID: 206363

Provider Gender: Male

License Number: 20A13745

NPI: 1194161406

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Gujarati, Hindi,
Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp

Grossmont Hospital, Adventist

D2. 主治医生名录

Health and Rideout

Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

PREVALLET, ALEXANDER

Provider ID: 417937

Provider Gender: Male

License Number: 20A19716

NPI: 1659833556

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

PREVALLET, ALEXANDER

Provider ID: 417937

Provider Gender: Male

License Number: 20A19716

NPI: 1659833556

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

RAMERS, CHRISTIAN

Provider ID: 417937

Provider Gender: Male

License Number: A119631

NPI: 1730381385

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

RAMERS, CHRISTIAN

Provider ID: 417937

Provider Gender: Male

License Number: A119631

NPI: 1730381385

Provider English Spoken: Y

Provider Language(s)

D2. 主治医生名录

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

RESNIKOFF, PAMELA

Provider ID: 417937
Provider Gender: Female
License Number: G80358
NPI: 1841252533

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

RESNIKOFF, PAMELA

Provider ID: 417937
Provider Gender: Female
License Number: G80358
NPI: 1841252533

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

RIVERA, TANIA

Provider ID: 206363
Provider Gender: Female
License Number: A126958
NPI: 1336346972

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER, SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

RIVERA, TANIA

Provider ID: 206363
Provider Gender: Female
License Number: A126958
NPI: 1336346972



Provider English Spoken: Y
Provider Language(s)

D2. 主治医生名录

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 4725 MARKET ST
SAN DIEGO, CA 92102
 *Phone: (619) 515-2560*
 *After Hours Phone: (619) 515-2560*
 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE



ROUEL, WADI






Provider ID: 185268
Provider Gender: Male
License Number: C55979
NPI: 1740254713
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac*
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No

La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 *Phone: (619) 255-9155*
 *After Hours Phone: (619) 255-9155*
 *Website: www.lamaestra.org*
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-6:00PM SA 8:00AM-2:00PM

INTERNAL MEDICINE




ROUEL, WADI

Provider ID: 185268
Provider Gender: Male
License Number: C55979
NPI: 1740254713
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac*
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 *Phone: (619) 255-9155*
 *After Hours Phone: (619) 255-9155*
 *Website: www.lamaestra.org*
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-6:00PM SA 8:00AM-2:00PM


INTERNAL MEDICINE

SASSIC, JESSICA

Provider ID: 417937
Provider Gender: Female
License Number: A185024
NPI: 1598342529
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD HILLCREST
 4094 4TH AVE
SAN DIEGO, CA 92103
 *Phone: (619) 515-2545*
 *After Hours Phone: (619) 515-2545*
 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

D2. 主治医生名录


N

 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE


SASSIC, JESSICA

Provider ID: 417937
Provider Gender: Female
License Number: A185024
NPI: 1598342529


 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
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 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*



Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

SHAMSINEJAD BABAKI, ARASH

Provider ID: 631494
Provider Gender: Male
License Number: A81206


NPI: 1750498119

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Farsi*

Cultural Competency: N
Hospital Affiliation: ST MARYS MEDICAL CENTER SAN FRANCISCO

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
PRECISION PARK

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999



American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

SHAMSINEJAD BABAKI, ARASH




Provider ID: 631494
Provider Gender: Male
License Number: A81206
NPI: 1750498119

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Farsi*

Cultural Competency: N
Hospital Affiliation: ST MARYS MEDICAL CENTER SAN FRANCISCO

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
PRECISION PARK

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*


 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE


SHI, RUJING


Provider ID: 417937
Provider Gender: Female
License Number: 20A19399
NPI: 1710446539

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego


FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 *Phone: (619) 515-2545*
 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N


D2. 主治医生名录

 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM


INTERNAL MEDICINE


SHI, RUJING

Provider ID: 417937
Provider Gender: Female
License Number: 20A19399
NPI: 1710446539


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

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 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

SMILDE, RENEE


Provider ID: 417937
Provider Gender: Female
License Number: A70175

NPI: 1427010594
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Dutch*


Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 *4094 4TH AVE*
SAN DIEGO, CA 92103
 *Phone: (619) 515-2545*
 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE


SMILDE, RENEE

Provider ID: 417937
Provider Gender: Female
License Number: A70175
NPI: 1427010594


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Dutch*
Cultural Competency: N
Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST

 *4094 4TH AVE*
SAN DIEGO, CA 92103
 *Phone: (619) 515-2545*
 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

URIBE-BRUCE, LILIANA

Provider ID: 206360
Provider Gender: Female
License Number: C55724
NPI: 1689010324





 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER



 *1809 NATIONAL AVE*
SAN DIEGO, CA 92113

D2. 主治医生名录

 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

URIBE-BRUCE, LILIANA



Provider ID: 206360
Provider Gender: Female
License Number: C55724
NPI: 1689010324
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego





LOGAN HEIGHTS FAMILY HEALTH CENTER


 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

VALDEZ, KRYSTAL ANGELI


Provider ID: 417101
Provider Gender: Female
License Number: A156854
NPI: 1629480272
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TWIN CITIES COMMUNITY HOSPITAL, SIERRA VISTA REGIONAL MED CTR, PARADISE VALLEY HOSPITAL
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA MESA


 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150






American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

INTERNAL MEDICINE

VALDEZ, KRYSTAL ANGELI



Provider ID: 417101
Provider Gender: Female
License Number: A156854
NPI: 1629480272
 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TWIN CITIES COMMUNITY HOSPITAL, SIERRA VISTA REGIONAL MED CTR, PARADISE VALLEY HOSPITAL
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA MESA

 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

INTERNAL MEDICINE

VIDAURRAZAGA, MONICA

Provider ID: 417937
Provider Gender: Female
License Number: A169207
NPI: 1346628310
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

D2. 主治医生名录

FAMILY HLTH CTR SD HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619)
515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

VIDAURRAZAGA, MONICA

Provider ID: 417937
Provider Gender: Female
License Number: A169207
NPI: 1346628310
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619)
515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

WASTILA, LISA

Provider ID: 403583
Provider Gender: Female
License Number: A60801
NPI: 1043375231
Provider English Spoken: Y
Provider Language(s)
Spoken: German
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619)
233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

WASTILA, LISA

Provider ID: 403583
Provider Gender: Female
License Number: A60801
NPI: 1043375231
Provider English Spoken: Y
Provider Language(s)

Spoken: German
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619)
233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER


INTERNAL MEDICINE

WATTANAMANO, PORNTHEP

Provider ID: 206046
Provider Gender: Male
License Number: C186338
NPI: 1295738516
Provider English Spoken: Y
Provider Language(s)
Spoken: Thai
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR



6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858)
279-0925
Website: www.sdfamilycare

D2. 主治医生名录

.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

WATTANAMANO, PORNTHEP



Provider ID: 206046
Provider Gender: Male
License Number: C186338
NPI: 1295738516
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Thai
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare
.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

WATTANAMANO, PORNTHEP




Provider ID: 206046




Provider Gender: Male
License Number: C186338
NPI: 1295738516
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Thai
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare
.org
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Min/Max Age: 0\150
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N
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PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE





WATTANAMANO, PORNTHEP

Provider ID: 206046
Provider Gender: Male
License Number: C186338
NPI: 1295738516
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Thai
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR
 6973 LINDA VISTA RD

SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare
.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

WATTS, ELI

Provider ID: 451167
Provider Gender: Male
License Number: A79383
NPI: 1649373739
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH
CENTER
 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
/clinics/king- chavez- healt
h- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

D2. 主治医生名录

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE


WATTS, ELI

Provider ID: 451167

Provider Gender: Male

License Number: A79383

NPI: 1649373739

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL


Board Certified Specialty: No IHP of Southern Cal-PHP

KING CHAVEZ HEALTH CENTER

 *950 S EUCLID AVE
SAN DIEGO, CA 92114*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org /clinics/king-chavez-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE


YUNG, STEVEN

Provider ID: 417937

Provider Gender: Male

License Number: G80798

NPI: 1689636656

 *Provider English Spoken: Y*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA


Board Certified Specialty: No Family Health Centers of San Diego

FAMILY HLTH CTR SD HILLCREST

 *4094 4TH AVE
SAN DIEGO, CA 92103*

 *Phone: (619) 515-2545*

 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org
Email: fabianm@fhcsd.org*

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\150*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM*

INTERNAL MEDICINE

YUNG, STEVEN

Provider ID: 417937

Provider Gender: Male

License Number: G80798

NPI: 1689636656

 *Provider English Spoken: Y
Cultural Competency: N*


Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA


Board Certified Specialty: No Family Health Centers of San


Diego

FAMILY HLTH CTR SD HILLCREST

 *4094 4TH AVE
SAN DIEGO, CA 92103*


 *Phone: (619) 515-2545*

 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org
Email: fabianm@fhcsd.org*

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\150*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM*

INTERVENTIONAL CARDIOLOGY

SHETABI, KAMBIZ

Provider ID: 206363

Provider Gender: Male

License Number: A126187

NPI: 1972827806

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Farsi, Spanish*


Cultural Competency: N

Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital

Board Certified Specialty: No Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 *4725 MARKET ST
SAN DIEGO, CA 92102*

 *Phone: (619) 515-2560*

D2. 主治医生名录

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERVENTIONAL

CARDIOLOGY


SHETABI, KAMBIZ

Provider ID: 206363

Provider Gender: Male

License Number: A126187

NPI: 1972827806

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N


Hospital Affiliation: SHARP


CHULA VISTA MED CTR, Sharp
Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560


 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

NEUROLOGY


CANTU-REYNA, GUILLERMO


Provider ID: 185268

Provider Gender: Male

License Number: A41375

NPI: 1447389101

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP


CHULA VISTA MED CTR

Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

NEUROLOGY

CANTU-REYNA, GUILLERMO

Provider ID: 185268

Provider Gender: Male

License Number: A41375

NPI: 1447389101

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP


CHULA VISTA MED CTR


Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

NEUROLOGY

GRISOLIA, JAMES


Provider ID: 417937

Provider Gender: Male

License Number: G42884

NPI: 1336102359

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY

D2. 主治医生名录

HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

NEUROLOGY

GRISOLIA, JAMES

Provider ID: 417937

Provider Gender: Male

License Number: G42884

NPI: 1336102359

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

NEUROLOGY

LUHAR, RIYA

Provider ID: 417937

Provider Gender: Female

License Number: 20A19975

NPI: 1235665662

Provider English Spoken: Y

Provider Language(s)
Spoken: Gujarati, Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL

CENTER, TRI CITY MEDICAL
CTR, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

NEUROLOGY

LUHAR, RIYA

Provider ID: 417937

Provider Gender: Female

License Number: 20A19975

NPI: 1235665662

Provider English Spoken: Y

Provider Language(s)
Spoken: Gujarati, Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL

CENTER, TRI CITY MEDICAL
CTR, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545


Website: www.fhcsd.org


Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

D2. 主治医生名录

Min/Max Age: 0\150

American Sign Language (ASL):  N
Accessibility: CONTACT PROVIDER

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

NEUROLOGY


MARTIN, FREDERIC

Provider ID: 417937

Provider Gender: Male

License Number: G61965

NPI: 1265582605

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SELECT
SPECIALTY HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

NEUROLOGY


MARTIN, FREDERIC

Provider ID: 417937

Provider Gender: Male

License Number: G61965

NPI: 1265582605

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SELECT
SPECIALTY HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

NEUROLOGY

TAFRESHI, GILDA

Provider ID: 417937

Provider Gender: Female

License Number: A103111

NPI: 1891946950


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS GREEN HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

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515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

NEUROLOGY

TAFRESHI, GILDA

Provider ID: 417937

Provider Gender: Female

License Number: A103111

D2. 主治医生名录

NPI: 1891946950


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS GREEN HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER


Provider ID: 185268

Provider Gender: Female

License Number: A172929

NPI: 1679008569

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, Sharp Grossmont


Hospital, SCRIPPS MERCY


HOSPITAL


Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 280-4213

 After Hours Phone: (619)
280-4213

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


AL-MSHHDANI, AYSER


Provider ID: 185268

Provider Gender: Female

License Number: A172929

NPI: 1679008569

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, Sharp Grossmont

Hospital, SCRIPPS MERCY


HOSPITAL


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 280-4213

 After Hours Phone: (619)
280-4213

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI


Provider ID: 206362

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No

Family Health Centers of San

Diego

NORTH PARK FAMILY HEALTH

CENTERS

 3544 30TH ST

D2. 主治医生名录

SAN DIEGO, CA 92104
☎ Phone: (619) 515-2424
🕒 After Hours Phone: (619) 515-2424
🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206360
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
🕒 After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): License Number: 20A14919
NPI: 1619397031

♿ Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206360
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

📍 1809 NATIONAL AVE
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☎ Phone: (619) 515-2300
🕒 After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206363
Provider Gender: Female

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

📍 4725 MARKET ST
SAN DIEGO, CA 92102
☎ Phone: (619) 515-2560
🕒 After Hours Phone: (619) 515-2560

🌐 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206363
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,

D2. 主治医生名录

SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 402851

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206362

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH
CENTERS

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 416831

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH
CENTERS

3514 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206362

Provider Gender: Female

D2. 主治医生名录

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
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Min/Max Age: 0\150

American Sign Language (ASL):
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Accessibility: CONTACT
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OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206362

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

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Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
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NORTH PARK FAMILY HEALTH
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OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

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Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
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Diego

NORTH PARK FAMILY HEALTH
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After Hours Phone: (619)
515-2424

Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 402851

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444


After Hours Phone: (619)
515-2444

Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N


D2. 主治医生名录

 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY


BLAKE, GARY

Provider ID: 206046
Provider Gender: Male
License Number: G44807
NPI: 1497738439

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
 *After Hours Phone: (858) 279-0925*
 *Website: www.sdfamilycare.org*


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

OBSTETRICS / GYNECOLOGY

BLAKE, GARY

Provider ID: 206046
Provider Gender: Male
License Number: G44807
NPI: 1497738439

 *Provider English Spoken: Y*

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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 *Phone: (858) 279-0925*
 *After Hours Phone: (858) 279-0925*
 *Website: www.sdfamilycare.org*


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

OBSTETRICS / GYNECOLOGY


BLAKE, GARY

Provider ID: 206046
Provider Gender: Male
License Number: G44807
NPI: 1497738439

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
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 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
 *After Hours Phone: (858) 279-0925*
 *Website: www.sdfamilycare.org*


.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

OBSTETRICS / GYNECOLOGY


BLAKE, GARY

Provider ID: 206046
Provider Gender: Male
License Number: G44807
NPI: 1497738439

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
 *After Hours Phone: (858) 279-0925*
 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

D2. 主治医生名录

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206362

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP


MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS


Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 402851

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP


MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206362

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP


MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS


Board Certified Specialty: No
Family Health Centers of San
Diego

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 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 416831

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN

D2. 主治医生名录

AND NEWBORNS

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424

Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206362

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH

CENTERS

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
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Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 416831

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424

Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 402851

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA


3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444

Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

D2. 主治医生名录

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


BUECHNER, CHARLENE

Provider ID: 206363

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

Family Health Centers of San


Diego


DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2420

 After Hours Phone: (619) 515-2420

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


BUECHNER, CHARLENE

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Provider Gender: Female

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Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

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CHULA VISTA, SHARP MARY

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Board Certified Specialty: No

Family Health Centers of San


Diego


DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST

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 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


BUECHNER, CHARLENE

Provider ID: 206360

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

Family Health Centers of San


Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

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 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE


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 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

D2. 主治医生名录

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
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Board Certified Specialty: No
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1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206362
Provider Gender: Female
License Number: A68463
NPI: 1376663831

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN

AND NEWBORNS
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619)
515-2424

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206362
Provider Gender: Male
License Number: A113001
NPI: 1225231582

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS

3544 30TH ST
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Phone: (619) 515-2424

After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206360
Provider Gender: Male
License Number: A113001
NPI: 1225231582

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego


LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

D2. 主治医生名录

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


CARTER, KHALIL

Provider ID: 206360

Provider Gender: Male

License Number: A113001

NPI: 1225231582

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,
GROSSMONT HOSPITAL, TRI
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CARTER, KHALIL

Provider ID: 206363

Provider Gender: Male

License Number: A113001

NPI: 1225231582

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,
GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2420

 After Hours Phone: (619)
515-2420

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206363

Provider Gender: Male

License Number: A113001

NPI: 1225231582

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 402851

Provider Gender: Male

License Number: A113001

NPI: 1225231582

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

D2. 主治医生名录

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:00PM
TH 9:30AM-6:00PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 416831

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San

Diego

NORTH PARK FAMILY HEALTH
CENTERS

3514 30TH ST

SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206362

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
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Min/Max Age: 0\150

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OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206362

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
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Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

D2. 主治医生名录

Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 402851

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

Family Health Centers of San

Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

3705 MISSION BLVD

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Email: jenanm@fhcsd.org

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Min/Max Age: 0\18

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OBSTETRICS / GYNECOLOGY

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PROVIDER

Hours: M-TH 8:30AM-5:30PM

F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 402851

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No




Family Health Centers of San


Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

D2. 主治医生名录

 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444


 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 416831

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

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 Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

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 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 416831

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

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 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 402851

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
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 Website: www.fhcsd.org
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA



Provider ID: 206363

Provider Gender: Female

License Number: A163464


NPI: 1326531401

D2. 主治医生名录


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org



Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA

Provider ID: 206363
Provider Gender: Female
License Number: A163464
NPI: 1326531401

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San

Diego
DIAMOND NEIGHBORHOODS
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Medi-Cal Open Panel: Yes
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American Sign Language (ASL):
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PROVIDER

OBSTETRICS / GYNECOLOGY




CHAKRABARTI, PRIYA


Provider ID: 206360
Provider Gender: Female
License Number: A163464
NPI: 1326531401


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300



 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY




CHAKRABARTI, PRIYA


Provider ID: 206360
Provider Gender: Female
License Number: A163464
NPI: 1326531401

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
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 1809 NATIONAL AVE
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

D2. 主治医生名录

Provider ID: 206360

Provider Gender: Male

License Number: A108228


NPI: 1629277322


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 206360

Provider Gender: Male

License Number: A108228


NPI: 1629277322

Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 206363

Provider Gender: Male

License Number: A108228


NPI: 1629277322


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

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PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 206363

Provider Gender: Male

License Number: A108228


NPI: 1629277322


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Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS
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Min/Max Age: 0\150

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PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 402851

Provider Gender: Male

License Number: A108228


NPI: 1629277322


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego



FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444


 After Hours Phone: (619)

D2. 主治医生名录

515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS


Provider ID: 416831
Provider Gender: Male
License Number: A108228
NPI: 1629277322
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS

 3514 30TH ST
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 Phone: (619) 515-2424
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 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 402851
Provider Gender: Male

License Number: A108228
NPI: 1629277322
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
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FAMILY HLTH CTR SAN DIEGO-BEACH AREA


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N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 402851
Provider Gender: Female
License Number: A178499
NPI: 1033613732
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

D2. 主治医生名录

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 416831

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

3514 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 416831

Provider Gender: Female

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Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 402851

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
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N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 206363

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 主治医生名录

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


DORUELO, ASHLEY

Provider ID: 206363

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

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Board Certified Specialty: No


Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS

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Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


DORUELO, ASHLEY

Provider ID: 206360

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
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 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


DORUELO, ASHLEY


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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

FOLCHTORRES-AGUIAR, BEATRIZ


Provider ID: 206360

Provider Gender: Female

License Number: A148014

NPI: 1457794752

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Yue
Chinese

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,

Sharp Grossmont Hospital,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No






Family Health Centers of San

Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER



D2. 主治医生名录

 1809 NATIONAL AVE
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 Phone: (619) 515-2300
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N
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Hours: M 8:00AM-7:00PM
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SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

FOLCHTORRES-AGUIAR, BEATRIZ





Provider ID: 206360
Provider Gender: Female
License Number: A148014
NPI: 1457794752
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Yue
Chinese
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
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OBSTETRICS / GYNECOLOGY

FOLCHTORRES-AGUIAR, BEATRIZ

Provider ID: 402851
Provider Gender: Female
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NPI: 1457794752
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Yue
Chinese
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
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FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

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OBSTETRICS / GYNECOLOGY

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D2. 主治医生名录


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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

GRANT, REBEKAH

Provider ID: 206360

Provider Gender: Female

License Number: C159737

NPI: 1326243833

Provider English Spoken: Y

Provider Language(s)

Spoken: French,
Portuguese, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, Sharp

Grossmont Hospital, SCRIPPS

MERCY HOSPITAL, RIVERSIDE

COMMUNITY HOSP, HOAG

HOSPITAL IRVINE

Board Certified Specialty: No


Family Health Centers of San


Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

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 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

GRANT, REBEKAH

Provider ID: 206360

Provider Gender: Female

License Number: C159737

NPI: 1326243833

Provider English Spoken: Y

Provider Language(s)

Spoken: French,
Portuguese, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, Sharp

Grossmont Hospital, SCRIPPS

MERCY HOSPITAL, RIVERSIDE

COMMUNITY HOSP, HOAG

HOSPITAL IRVINE

Board Certified Specialty: No


Family Health Centers of San


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TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206360

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No


Family Health Centers of San


Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

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 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D2. 主治医生名录

OBSTETRICS / GYNECOLOGY


HANLEY, LAUREN

Provider ID: 416831

Provider Gender: Female

License Number: C174771

NPI: 1053392035

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


HANLEY, LAUREN

Provider ID: 206360

Provider Gender: Female

License Number: C174771

NPI: 1053392035

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

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Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


HANLEY, LAUREN

Provider ID: 206363

Provider Gender: Female

License Number: C174771

NPI: 1053392035

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560


 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206363

Provider Gender: Female

License Number: C174771

NPI: 1053392035

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 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp


Grossmont Hospital


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Family Health Centers of San
Diego

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 Website: www.fhcsd.org
Email: nancyl@fhcsd.org


Medi-Cal Open Panel: Yes

D2. 主治医生名录

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


HANLEY, LAUREN

Provider ID: 402851

Provider Gender: Female

License Number: C174771

NPI: 1053392035

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619) 515-2444


 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


HANLEY, LAUREN

Provider ID: 402851

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Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

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Hours: M-W 8:30AM-5:30PM

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OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 416831

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 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3514 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206362

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,

D2. 主治医生名录

GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

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License Number: A72005

NPI: 1649208711

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Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

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CORONADO HOSP AND
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NORTH PARK FAMILY HEALTH CENTERS

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CORONADO HOSP AND
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D2. 主治医生名录

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 402851

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Hospital Affiliation: SHARP

CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No
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FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

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CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
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CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:00PM

TH 9:30AM-6:00PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206363

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

D2. 主治医生名录

Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206363

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)
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Cultural Competency: N

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CORONADO HOSP AND
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MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS

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N

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Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206360

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206360

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D2. 主治医生名录

OBSTETRICS / GYNECOLOGY


LIPSCHITZ, LISA

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Cultural Competency: N

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CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,


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Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:30PM

F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY


LOEFFLER, ALLISON

Provider ID: 206362

Provider Gender: Female

License Number: A116680

NPI: 1700073962

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
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OBSTETRICS / GYNECOLOGY

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NPI: 1700073962

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Cultural Competency: N

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SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL,


SCRIPPS MERCY HOSPITAL
CHULA VISTA

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 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

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Spoken: Spanish

Cultural Competency: N

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GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

D2. 主治医生名录

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

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SA 8:00AM-5:00PM

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Provider English Spoken: Y

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Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST
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Email: nancyl@fhcsd.org

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Min/Max Age: 0\150

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Accessibility: CONTACT PROVIDER

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OBSTETRICS / GYNECOLOGY

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Provider ID: 206363

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
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Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 402851

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619) 515-2444

Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

D2. 主治医生名录

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY


LOEFFLER, ALLISON

Provider ID: 206362

Provider Gender: Female

License Number: A116680

NPI: 1700073962

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N


Hospital Affiliation:


*GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA*

*Board Certified Specialty: No
Family Health Centers of San
Diego*

*NORTH PARK FAMILY HEALTH
CENTERS*

 *3544 30TH ST
SAN DIEGO, CA 92104*

 *Phone: (619) 515-2424*

 *After Hours Phone: (619)
515-2424*


 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY


LOEFFLER, ALLISON

Provider ID: 402851

Provider Gender: Female

License Number: A116680

NPI: 1700073962

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N


Hospital Affiliation:


*GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA*

*Board Certified Specialty: No
Family Health Centers of San
Diego*

*FAMILY HLTH CTR SAN
DIEGO-BEACH AREA*

 *3705 MISSION BLVD
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Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON


Provider ID: 206362

Provider Gender: Female

License Number: A116680

NPI: 1700073962

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL,


*SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA*

*Board Certified Specialty: No
Family Health Centers of San
Diego*

*NORTH PARK FAMILY HEALTH
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 *3544 30TH ST
SAN DIEGO, CA 92104*

 *Phone: (619) 515-2424*

 *After Hours Phone: (619)
515-2424*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 416831

Provider Gender: Female

License Number: A116680

NPI: 1700073962

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N


Hospital Affiliation:


*GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA*

*Board Certified Specialty: No
Family Health Centers of San
Diego*

*NORTH PARK FAMILY HEALTH
CENTERS*

D2. 主治医生名录

 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 416831

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N



Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206362

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N



Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

PHAN, TIFFANI

Provider ID: 417101

Provider Gender: Female

License Number: A161105

NPI: 1134515695

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA



Board Certified Specialty: No


Operation Samahan

OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126


 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

PHAN, TIFFANI

Provider ID: 417101

Provider Gender: Female

License Number: A161105

NPI: 1134515695


Provider English Spoken: Y

Provider Language(s)



D2. 主治医生名录

Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA MESA


 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
 *Phone: (844) 200-2426*
 *After Hours Phone: (844) 200-2426*
 *Website: www.operationsamahan.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*



OBSTETRICS / GYNECOLOGY **SAPRA, SONIA**

Provider ID: 402851
Provider Gender: Female
License Number: A164859
NPI: 1952751711
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Hindi*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San

Diego
FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 3705 MISSION BLVD
SAN DIEGO, CA 92109
 *Phone: (619) 515-2444*
 *After Hours Phone: (619) 515-2444*
 *Website: www.fhcsd.org*
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150


American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY **SAPRA, SONIA**



Provider ID: 416831
Provider Gender: Female
License Number: A164859
NPI: 1952751711
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Hindi*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS






 3514 30TH ST
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
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OBSTETRICS / GYNECOLOGY **SAPRA, SONIA**

Provider ID: 402851
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Board Certified Specialty: No
Family Health Centers of San Diego

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D2. 主治医生名录

Hours: M-W 8:30AM-5:30PM
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OBSTETRICS / GYNECOLOGY


SAPRA, SONIA

Provider ID: 206363
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 Provider English Spoken: Y
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Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS
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Board Certified Specialty: No
Family Health Centers of San
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DIAMOND NEIGHBORHOODS
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OBSTETRICS / GYNECOLOGY


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OBSTETRICS / GYNECOLOGY

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MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
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LOGAN HEIGHTS FAMILY



HEALTH CENTER

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HEALTH CENTER

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Min/Max Age: 0\150
American Sign Language (ASL):

D2. 主治医生名录

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


SAPRA, SONIA


Provider ID: 416831

Provider Gender: Female

License Number: A164859

NPI: 1952751711

 Provider English Spoken: Y

 Provider Language(s) Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL


Board Certified Specialty: No


Family Health Centers of San

Diego

NORTH PARK FAMILY HEALTH CENTERS

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 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org


Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206360

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp


Grossmont Hospital


Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206360

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp


Grossmont Hospital


Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206363

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp


Grossmont Hospital


Board Certified Specialty: No

Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D2. 主治医生名录

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206363

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego


DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 402851

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 416831

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp


Grossmont Hospital


Board Certified Specialty: No

Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 416831

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp


Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San


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NORTH PARK FAMILY HEALTH
CENTERS

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Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

D2. 主治医生名录

STABEN, REBECCA

Provider ID: 402851

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp


Grossmont Hospital


Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 3705 MISSION BLVD
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 Phone: (619) 515-2444

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 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


TRUJILLO, JENNIFER

Provider ID: 451167

Provider Gender: Female

License Number: 20A8204

NPI: 1053407593

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP


KING CHAVEZ HEALTH

CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


TRUJILLO, JENNIFER

Provider ID: 451167

Provider Gender: Female

License Number: 20A8204

NPI: 1053407593

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP


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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


WINESBURG, JENNIFER

Provider ID: 206360

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Board Certified Specialty: No


Family Health Centers of San


Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

D2. 主治医生名录

Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY




WINESBURG, JENNIFER

Provider ID: 206360
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
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515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY




WINESBURG, JENNIFER


Provider ID: 402851
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER



Provider ID: 402851
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
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 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 402851
Provider Gender: Male
License Number: G78814
NPI: 1699790634

D2. 主治医生名录

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

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Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206362

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 416831

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

3514 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206362

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH

D2. 主治医生名录

CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


ZIEG, ALAN

Provider ID: 206362

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


ZIEG, ALAN

Provider ID: 416831

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 402851

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

D2. 主治医生名录


ZIEG, ALAN


Provider ID: 206360

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


ZIEG, ALAN

Provider ID: 206363

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


ZIEG, ALAN


Provider ID: 206360

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

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Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN


Provider ID: 206362

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,

D2. 主治医生名录

SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206363

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY

NAJAFI, DAVID

Provider ID: 206360

Provider Gender: Male

License Number: A68124

NPI: 1396715991

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Persian,
Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-6:00PM

TH 8:30AM-6:00PM

F 8:30AM-5:00PM

SA 8:30AM-5:00PM

OPHTHALMOLOGY

NAJAFI, DAVID

Provider ID: 206360

Provider Gender: Male

License Number: A68124

NPI: 1396715991

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Persian,
Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
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Phone: (619) 515-2300

After Hours Phone: (619)

D2. 主治医生名录

515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TU 8:30AM-6:00PM
TH 8:30AM-6:00PM
F 8:30AM-5:00PM
SA 8:30AM-5:00PM

OPHTHALMOLOGY

SHAW, BLAKE

Provider ID: 206360
Provider Gender: Male
License Number: G61394
NPI: 1649206541
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Hours: M 8:30AM-7:30PM
TU-F 8:30AM-5:30PM

OPHTHALMOLOGY

SHAW, BLAKE

Provider ID: 206360
Provider Gender: Male
License Number: G61394
NPI: 1649206541
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-7:30PM
TU-F 8:30AM-5:30PM
OPHTHALMOLOGY
SHAW, BLAKE
Provider ID: 206363
Provider Gender: Male
License Number: G61394
NPI: 1649206541



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OPHTHALMOLOGY

SHAW, BLAKE






Provider ID: 206363
Provider Gender: Male
License Number: G61394
NPI: 1649206541
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)

D2. 主治医生名录

515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER






OPHTHALMOLOGY

ZABLIT, KARIM

Provider ID: 403583
Provider Gender: Male
License Number: A42127
NPI: 1083700538
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619) 233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:45PM

OPHTHALMOLOGY

ZABLIT, KARIM






Provider ID: 403583
Provider Gender: Male
License Number: A42127
NPI: 1083700538
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619) 233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:45PM

OTOLARYNGOLOGY

CRAWFORD, KAYVA





Provider ID: 206360
Provider Gender: Female
License Number: A165819
NPI: 1396241824
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San

Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


OTOLARYNGOLOGY

CRAWFORD, KAYVA

Provider ID: 206360
Provider Gender: Female
License Number: A165819
NPI: 1396241824
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

D2. 主治医生名录

N

 Accessibility: CONTACT PROVIDER

OTOLARYNGOLOGY

DAVIS, MORGAN

Provider ID: 206360

Provider Gender: Female

License Number: A181809

NPI: 1891359154

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300


 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OTOLARYNGOLOGY

DAVIS, MORGAN

Provider ID: 206360

Provider Gender: Female

License Number: A181809

NPI: 1891359154

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OTOLARYNGOLOGY

YOUSEF, ANDREW

Provider ID: 206360

Provider Gender: Male

License Number: A186426

NPI: 1275152662

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OTOLARYNGOLOGY

YOUSEF, ANDREW

Provider ID: 206360

Provider Gender: Male

License Number: A186426

NPI: 1275152662

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

ABELL, GEOFFREY

Provider ID: 27341

Provider Gender: Male

NPI: 1245256130

Provider English Spoken: Y

Cultural Competency: N

D2. 主治医生名录

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PARADISE VALLEY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network
GEOFFREY A ABELL

292 EUCLID AVE STE 220
SAN DIEGO, CA 92114

Phone: (619) 262-8624

Fax: (619) 262-6639

After Hours Phone: (619)
262-8624

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ABRAMSON, RACHEL

Provider ID: 185268

Provider Gender: Female

License Number: A104918

NPI: 1588707178

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS GREEN
HOSPITAL, SHARP CHULA

VISTA MED CTR

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 280-4213

After Hours Phone: (619)
280-4213

Website: www.lamaestra.or
g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

PEDIATRICS

ABRAMSON, RACHEL

Provider ID: 185268

Provider Gender: Female

License Number: A104918

NPI: 1588707178

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS GREEN
HOSPITAL, SHARP CHULA
VISTA MED CTR

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC

INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 280-4213

After Hours Phone: (619)
280-4213

Website: www.lamaestra.or
g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PEDIATRICS

ADJAN, ROULA

Provider ID: 185268

Provider Gender: Female

License Number: A81682

NPI: 1992847263

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, French,
Spanish

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

Fax: (619) 749-5480

After Hours Phone: (619)
255-9155

Website: www.lamaestra.or
g

D2. 主治医生名录

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

ADJAN, ROULA

Provider ID: 185268

Provider Gender: Female

License Number: A81682

NPI: 1992847263

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, French,
Spanish


Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

Fax: (619) 749-5480

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

ADLOUNI, LOUBABA

Provider ID: 230441

Provider Gender: Female

NPI: 1669443685

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, PALOMAR HEALTH,

PALOMAR MEDICAL CENTER


Board Certified Specialty: No

Rady Childrens Health Network

LOUBABA A ADLOUNI

 16918 DOVE CANYON RD
STE 200

SAN DIEGO, CA 92127

 Phone: (858) 924-1960

Fax: (858) 924-1964

 After Hours Phone: (858)
924-1960

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ALBINO, NICHOLAS

Provider ID: 416831

Provider Gender: Male

License Number: A179851

NPI: 1740843499

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM

PEDIATRICS

ALBINO, NICHOLAS

Provider ID: 416831

Provider Gender: Male

License Number: A179851

NPI: 1740843499

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO





Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH

D2. 主治医生名录






CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-5:00PM

PEDIATRICS

ANDREE, GREGOR

Provider ID: 233532
Provider Gender: Male
License Number: A72833
NPI: 1467436063
 Provider English Spoken: Y
 Provider Language(s)
Spoken: German, Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 After Hours Phone: (619)
280-2058
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER

PEDIATRICS



ANDREE, GREGOR

Provider ID: 233532
Provider Gender: Male
License Number: A72833
NPI: 1467436063
 Provider English Spoken: Y
 Provider Language(s)
Spoken: German, Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC



 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 After Hours Phone: (619)
280-2058
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

ANDREE, GREGOR



Provider ID: 482070
Provider Gender: Male
License Number: A72833
NPI: 1467436063
 Provider English Spoken: Y
 Provider Language(s)
Spoken: German, Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PEDIATRICS

ANDREE, GREGOR

Provider ID: 482070
Provider Gender: Male
License Number: A72833
NPI: 1467436063
 Provider English Spoken: Y
 Provider Language(s)
Spoken: German, Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

D2. 主治医生名录

N

 *Accessibility: CONTACT PROVIDER*

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PEDIATRICS

ARCHAMBAULT, CHRISTIAN

Provider ID: 5589

Provider Gender: Male

NPI: 1992776918

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY

HOSPITAL, PALOMAR HEALTH,

SHARP MARY BIRCH HOSP

FOR WOMEN AND

NEWBORNS, CHILDRENS

HOSPITAL OF ORANGE

COUNTY, PARADISE VALLEY


HOSPITAL, PARADISE VALLEY

HOSPITAL


Board Certified Specialty: No

Rady Childrens Health Network

CHRISTIAN F ARCHAMBAULT


 16918 DOVE CANYON RD
STE 200

SAN DIEGO, CA 92127

 *Phone: (858) 924-1960*

Fax: (858) 924-1964

 *After Hours Phone: (858)
924-1960*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

AWDYKOVYCH, MARTA

Provider ID: 206360

Provider Gender: Female

License Number: A44027

NPI: 1447265137

Provider English Spoken: Y

Provider Language(s) Spoken: Chinese, French, Spanish, Ukrainian

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619)
515-2300*

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

AWDYKOVYCH, MARTA

Provider ID: 206360

Provider Gender: Female

License Number: A44027

NPI: 1447265137

Provider English Spoken: Y

Provider Language(s) Spoken: Chinese, French, Spanish, Ukrainian

Cultural Competency: N

Hospital Affiliation: SHARP


MEMORIAL HOSPITAL


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619)
515-2300*

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

AYSON, NICOLE

Provider ID: 417429

Provider Gender: Female

License Number: A128091

NPI: 1013278704

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN


DIEGO


D2. 主治医生名录


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619) 515-2525


 Website: www.fhcsd.org
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

AYSON, NICOLE

Provider ID: 417429

Provider Gender: Female

License Number: A128091

NPI: 1013278704


 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619) 515-2525

 Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

AZIMI, AYSUN

Provider ID: 317194

Provider Gender: Female

NPI: 1710246160

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP CHULA VISTA

MED CTR, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, CLOVIS COMMUNITY HOSPITAL,

CLOVIS COMMUNITY HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network
AYSUN AZIMI

 292 EUCLID AVE STE 220
SAN DIEGO, CA 92114

 Phone: (619) 262-8624

Fax: (619) 262-6639

 After Hours Phone: (619) 262-8624

 Website: *N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

BONSU, BEMA

Provider ID: 227409

Provider Gender: Male


License Number: C55180


NPI: 1932106986


 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC - OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

D2. 主治医生名录

BONSU, BEMA

Provider ID: 227409

Provider Gender: Male

License Number: C55180

NPI: 1932106986

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC -
OCEAN VIEW

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

CABARLO, JEHRIB

Provider ID: 206360

Provider Gender: Male

License Number: 20A8516

NPI: 1770661340

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

CABARLO, JEHRIB

Provider ID: 206360

Provider Gender: Male

License Number: 20A8516

NPI: 1770661340

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

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Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

CARSON, STEPHEN

Provider ID: 6735

Provider Gender: Male

NPI: 1780719872

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

VISTA, SHARP MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: Yes

Rady Childrens Health Network

STEPHEN H CARSON

550 WASHINGTON ST STE
300

SAN DIEGO, CA 92103

Phone: (619) 297-5437

Fax: (619) 297-4567

After Hours Phone: (619)
297-5437

Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):



D2. 主治医生名录

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-8:30PM
F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PEDIATRICS

CASTELNOVI, CLAUDIA

Provider ID: 185268
Provider Gender: Female
License Number: A111170
NPI: 1417279324
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: French, Italian, Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 *4060 FAIRMOUNT AVE SAN DIEGO, CA 92105*
 *Phone: (619) 255-9155*
 *After Hours Phone: (619) 255-9155*
 *Website: www.lamaestra.org*
g
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

CASTELNOVI, CLAUDIA

Provider ID: 185268
Provider Gender: Female
License Number: A111170
NPI: 1417279324
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: French, Italian, Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 *4060 FAIRMOUNT AVE SAN DIEGO, CA 92105*
 *Phone: (619) 255-9155*
 *After Hours Phone: (619) 255-9155*
 *Website: www.lamaestra.org*
g

Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

CHEN, JENNIFER

Provider ID: 206363
Provider Gender: Female
License Number: A141057

NPI: 1255785150

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No Family Health Centers of San Diego
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 *4725 MARKET ST SAN DIEGO, CA 92102*
 *Phone: (619) 515-2560*
 *After Hours Phone: (619) 515-2560*
 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

CHEN, JENNIFER

Provider ID: 206363
Provider Gender: Female
License Number: A141057
NPI: 1255785150
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No Family Health Centers of San Diego
DIAMOND NEIGHBORHOODS







D2. 主治医生名录

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER



PEDIATRICS






CHEN, EILEEN

Provider ID: 606456
Provider Gender: Female
NPI: 1932660966
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Rady Childrens Health Network
EILEEN CHEN
 7910 FROST ST STE 400
SAN DIEGO, CA 92123
 Phone: (858) 495-0500
Fax: (858) 560-4279
 After Hours Phone: (858)
495-0500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CONE, STEPHANIE

Provider ID: 185268
Provider Gender: Female
License Number: A123929
NPI: 1437444858
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, RADY CHILDRENS
HOSPITAL SAN DIEGO
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC



 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 255-9154
 After Hours Phone: (619)
255-9154
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER






Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PEDIATRICS

CONE, STEPHANIE



Provider ID: 185268
Provider Gender: Female
License Number: A123929
NPI: 1437444858

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, RADY CHILDRENS
HOSPITAL SAN DIEGO
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 255-9154
 After Hours Phone: (619)
255-9154
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PEDIATRICS

CORDES, WILLIAM

Provider ID: 206360
Provider Gender: Male
License Number: 20A15743
NPI: 1174942544
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

D2. 主治医生名录

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

PEDIATRICS

CORDES, WILLIAM

Provider ID: 206360

Provider Gender: Male

License Number: 20A15743

NPI: 1174942544

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
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Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

PEDIATRICS

DIXON, SARAH

Provider ID: 482070

Provider Gender: Female

License Number: A137415

NPI: 1467751131

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858)
810-8700

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PEDIATRICS

DIXON, SARAH

Provider ID: 482070

Provider Gender: Female

License Number: A137415

NPI: 1467751131

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858)
810-8700

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PEDIATRICS

FISHMAN, ELENA

D2. 主治医生名录

Provider ID: 524340

Provider Gender: Female

NPI: 1740249432

Provider English Spoken: Y

Provider Language(s)
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MEMORIAL

HOSPITAL


Board Certified Specialty: No


Rady Childrens Health Network

ELENA FISHMAN

 11943 EL CAMINO REAL STE
210

SAN DIEGO, CA 92130

 Phone: (858) 793-1011

 After Hours Phone: (858)
793-1011

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

FORTUNE, ERIN

Provider ID: 416831

Provider Gender: Male

License Number: A95577

NPI: 1801088422

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL


Board Certified Specialty: No

Family Health Centers of San


Diego


NORTH PARK FAMILY HEALTH

CENTERS

 3514 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

FORTUNE, ERIN

Provider ID: 206360

Provider Gender: Male

License Number: A95577

NPI: 1801088422

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No


Family Health Centers of San


Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

FORTUNE, ERIN

Provider ID: 206360

Provider Gender: Male

License Number: A95577

NPI: 1801088422

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No


Family Health Centers of San


Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. 主治医生名录

American Sign Language (ASL): Provider Gender: Female
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 9:00AM-5:00PM

PEDIATRICS


FORTUNE, ERIN

Provider ID: 416831

Provider Gender: Male

License Number: A95577

NPI: 1801088422

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,
GROSSMONT HOSPITAL


Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424


 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

FRIEDMAN, JAIME

Provider ID: 230500


NPI: 1144297961


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR HEALTH

Board Certified Specialty: No

Rady Childrens Health Network
JAIME B FRIEDMAN

 16918 DOVE CANYON RD
STE 200
SAN DIEGO, CA 92127

 Phone: (858) 924-1960

Fax: (858) 924-1964

 After Hours Phone: (858)
924-1960

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GOGGIN, SAMANTHA

Provider ID: 185268

Provider Gender: Female

License Number: A163693


NPI: 1023506367

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9154

 After Hours Phone: (619)
255-9154

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GOGGIN, SAMANTHA

Provider ID: 185268

Provider Gender: Female

License Number: A163693


NPI: 1023506367


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9154

 After Hours Phone: (619)
255-9154

 Website: www.lamaestra.org


Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D2. 主治医生名录

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GRAY, SARAH

Provider ID: 206360

Provider Gender: Female

License Number: A151631

NPI: 1508210311


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-7:00PM

TU-TH 8:30AM-6:00PM

F 8:30AM-5:30PM

SA 8:30AM-5:00PM

PEDIATRICS

GRAY, SARAH

Provider ID: 206360

Provider Gender: Female

License Number: A151631

NPI: 1508210311


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-7:00PM

TU-TH 8:30AM-6:00PM

F 8:30AM-5:30PM

SA 8:30AM-5:00PM

PEDIATRICS

GUPTA, VARSHA


Provider ID: 206360

Provider Gender: Female

License Number: A164889

NPI: 1891283214

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

GUPTA, VARSHA


Provider ID: 206360

Provider Gender: Female

License Number: A164889

NPI: 1891283214

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N



Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

D2. 主治医生名录


 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

PEDIATRICS


HENDERSON, TREVOR

Provider ID: 58111
Provider Gender: Male
NPI: 1356449425
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, RADY
CHILDRENS HOSPITAL SAN
DIEGO, ALVARADO HOSPITAL
LLC
Board Certified Specialty: No
Rady Childrens Health Network
TREVOR H HENDERSON

 6699 ALVARADO RD STE
2200
SAN DIEGO, CA 92120


 Phone: (619) 265-3400
Fax: (619) 265-3407

 After Hours Phone: (619)
265-3400

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):


N


 Accessibility: CONTACT
PROVIDER


Hours: M-F 8:00AM-5:00PM

PEDIATRICS


HIBBS, NICOLE

Provider ID: 143979
Provider Gender: Female
NPI: 1164627832
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA
Board Certified Specialty: No
Rady Childrens Health Network
NICOLE M HIBBS

 550 WASHINGTON ST STE
300
SAN DIEGO, CA 92103

 Phone: (619) 297-5437
Fax: (619) 297-4567

 After Hours Phone: (619)
297-5437

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-8:30PM
F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PEDIATRICS


HOANG, VY

Provider ID: 161902
Provider Gender: Female
NPI: 1649575135


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
Rady Childrens Health Network
VY U HOANG

 6699 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (619) 265-3400
Fax: (619) 265-3407

 After Hours Phone: (619)
265-3400

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

HORMOZDYARAN, SANAYA

Provider ID: 612398
Provider Gender: Female
NPI: 1750887634

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: Yes
Rady Childrens Health Network

D2. 主治医生名录

SANAYA HORMOZDYARAN

2790 TRUXTUN RD STE
120A

SAN DIEGO, CA 92106

Phone: (619) 222-1253

Fax: (619) 222-1276

After Hours Phone: (619)
222-1253

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

JORDAN, JAMIE

Provider ID: 237831

Provider Gender: Female

NPI: 1275762833

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Board Certified Specialty: No
Rady Childrens Health Network

JAMIE M JORDAN

12036 SCRIPPS
HIGHLANDS DR STE 102
SAN DIEGO, CA 92131

Phone: (858) 566-4444

Fax: (858) 566-3321

After Hours Phone: (858)
566-4444

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): **PEDIATRICS**

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

JUAREZ, PATRICIA

Provider ID: 317641

Provider Gender: Female

NPI: 1205807229

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
RADY CHILDRENS HOSPITAL
SAN DIEGO, SHARP
MEMORIAL HOSPITAL, UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND

Board Certified Specialty: No

Rady Childrens Health Network

PATRICIA P JUAREZ

7910 FROST ST STE 400
SAN DIEGO, CA 92123

Phone: (858) 495-0500

Fax: (858) 560-4279

After Hours Phone: (858)
495-0500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

KARMAKAR, KANKA

Provider ID: 417101

Provider Gender: Female

License Number: C54941

NPI: 1972536654

Provider English Spoken: Y

Provider Language(s)
Spoken: Bengali, Hindi,
Polish, Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No

Operation Samahan

OPERATION SAMAHAN - MIRA
MESA

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

PEDIATRICS

KARMAKAR, KANKA

Provider ID: 417101

Provider Gender: Female

License Number: C54941

NPI: 1972536654

Provider English Spoken: Y


Provider Language(s)

D2. 主治医生名录

Spoken: Bengali, Hindi, Polish, Spanish, Tagalog
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA MESA



 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
 *Phone: (844) 200-2426*
 *After Hours Phone: (844) 200-2426*
 *Website: www.operationsamahan.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150






American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

PEDIATRICS


KESANAPALLI, DEEPTHI






Provider ID: 235069
Provider Gender: Female
NPI: 1487948584
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Telugu*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified Specialty: No
Rady Childrens Health Network

DEEPTHI KESANAPALLI
 7910 FROST ST STE 335
SAN DIEGO, CA 92123
 *Phone: (858) 576-8010*
Fax: (858) 576-7391
 *After Hours Phone: (858) 576-8010*
 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:30AM-6:00PM
F 8:30AM-0:00PM

PEDIATRICS

LAWRIE, ALISA



Provider ID: 660912
Provider Gender: Female
NPI: 1407847908
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
ALISA J LAWRIE






 550 WASHINGTON ST STE 300
SAN DIEGO, CA 92103
 *Phone: (619) 297-4567*
 *After Hours Phone: (619) 297-4567*
 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-8:00PM
F 8:00AM-5:00PM

PEDIATRICS

LE, NGUYEN

Provider ID: 44952
Provider Gender: Male
NPI: 1548308109
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish, Vietnamese*
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
NGUYEN L LE


 5507 EL CAJON BLVD STE B
SAN DIEGO, CA 92115
 *Phone: (619) 582-8814*
Fax: (619) 582-8813
 *After Hours Phone: (619) 582-8814*
 *Website: N/A*
Email: LANCLEMD@HOTMAIL.COM
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT*



D2. 主治医生名录

PROVIDER
Hours: M-F 9:00AM-5:00PM

PEDIATRICS

LOPER, KAREN

Provider ID: 490610
Provider Gender: Female
NPI: 1619908936
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Board Certified Specialty: No
Rady Childrens Health Network
KAREN S LOPER

 *550 WASHINGTON ST STE 300*
SAN DIEGO, CA 92103
 *Phone: (619) 297-5437*
Fax: (619) 297-4567


 *After Hours Phone: (619) 297-5437*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19


American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


LUJAN, ARLEEN


Provider ID: 206360
Provider Gender: Female
License Number: A61687
NPI: 1760412431
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 *1809 NATIONAL AVE*
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

LUJAN, ARLEEN

Provider ID: 206360

Provider Gender: Female

License Number: A61687

NPI: 1760412431


 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 *1809 NATIONAL AVE*
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*


 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS


MADANY, GEORGE

Provider ID: 318924

Provider Gender: Male

NPI: 1811968837

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Arabic, French, Spanish*


Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL CHULA VISTA

Board Certified Specialty: No

Rady Childrens Health Network
GEORGE H MADANY

 *7910 FROST ST STE 400*
SAN DIEGO, CA 92123

 *Phone: (858) 495-0500*
Fax: (858) 560-4279

 *After Hours Phone: (858) 495-0500*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*

D2. 主治医生名录

PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MAHENDRAN, SRIVIDYA

Provider ID: 482070

Provider Gender: Female

License Number: A92173

NPI: 1487843454

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 *Phone: (858) 810-8700*

 *After Hours Phone: (858)
810-8700*


 *Website: www.sdfamilycare
.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

PEDIATRICS

MAHENDRAN, SRIVIDYA

Provider ID: 482070

Provider Gender: Female

License Number: A92173

NPI: 1487843454

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 *Phone: (858) 810-8700*

 *After Hours Phone: (858)
810-8700*

 *Website: www.sdfamilycare
.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

PEDIATRICS

MANRIQUEZ-CASTILLO,

ERENDIRA

Provider ID: 185268

Provider Gender: Female

License Number: A75533

NPI: 1356397418

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

*Hospital Affiliation: VALLEY
CHILDRENS HOSPITAL, RADY*


*CHILDRENS HOSPITAL SAN
DIEGO*


Board Certified Specialty: No

La Maestra Family Clinic

*LA MAESTRA FAMILY CLINIC
INC*

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 *Phone: (619) 255-9155*

 *After Hours Phone: (619)
255-9155*

 *Website: www.lamaestra.or
g*

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

PEDIATRICS

MANRIQUEZ-CASTILLO,

ERENDIRA

Provider ID: 185268

Provider Gender: Female

License Number: A75533

NPI: 1356397418

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

*Hospital Affiliation: VALLEY
CHILDRENS HOSPITAL, RADY*


*CHILDRENS HOSPITAL SAN
DIEGO*


Board Certified Specialty: No

La Maestra Family Clinic

*LA MAESTRA FAMILY CLINIC
INC*

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 *Phone: (619) 255-9155*

 *After Hours Phone: (619)
255-9155*

 *Website: www.lamaestra.or
g*

Email:

aschmaltz@lamaestra.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. 主治医生名录

American Sign Language (ASL): NPI: 1760916589

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM


PEDIATRICS

MARTINEZ-ANDREE, INGRID

Provider ID: 319049

Provider Gender: Female

NPI: 1205807203

 Provider English Spoken: Y


Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network


INGRID L MARTINEZ-ANDREE

 7910 FROST ST STE 400
SAN DIEGO, CA 92123

 Phone: (858) 495-0500

Fax: (858) 560-4279

 After Hours Phone: (858) 495-0500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM


PEDIATRICS

NGUYEN, JANICE

Provider ID: 416831

Provider Gender: Female

License Number: A157335

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM

PEDIATRICS


NGUYEN, JANICE

Provider ID: 416831

Provider Gender: Female

License Number: A157335

NPI: 1760916589


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3514 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM


PEDIATRICS

PARK, TARI

Provider ID: 237711

Provider Gender: Female

NPI: 1285669085

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Korean


Cultural Competency: N


Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No

Rady Childrens Health Network
TARI Y PARK

 12036 SCRIPPS
HIGHLANDS DR STE 102
SAN DIEGO, CA 92131

 Phone: (858) 566-4444

Fax: (858) 566-3321

 After Hours Phone: (858) 566-4444

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

D2. 主治医生名录

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

PARKER, SHERINE

Provider ID: 206360

Provider Gender: Female

License Number: G81658

NPI: 1477626513

Provider English Spoken: Y

*Provider Language(s)
Spoken: Arabic, Spanish*

Cultural Competency: N


Hospital Affiliation: GLENDALE


*ADVENTIST MED CTR,
GLENDALE MEMORIAL HOSP
AND HEALTH CTR, TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL*


*Board Certified Specialty: No
Family Health Centers of San
Diego*

*LOGAN HEIGHTS FAMILY
HEALTH CENTER*

 *1809 NATIONAL AVE
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*

 *After Hours Phone: (619)
515-2300*


 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M 8:30AM-7:00PM

TU-TH 8:30AM-6:00PM

F 8:30AM-5:30PM

SA 8:30AM-5:00PM

PEDIATRICS

PARKER, SHERINE

Provider ID: 206360

Provider Gender: Female

License Number: G81658

NPI: 1477626513

Provider English Spoken: Y

*Provider Language(s)
Spoken: Arabic, Spanish*

Cultural Competency: N


Hospital Affiliation: GLENDALE


*ADVENTIST MED CTR,
GLENDALE MEMORIAL HOSP
AND HEALTH CTR, TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL*


*Board Certified Specialty: No
Family Health Centers of San
Diego*

*LOGAN HEIGHTS FAMILY
HEALTH CENTER*

 *1809 NATIONAL AVE
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*

 *After Hours Phone: (619)
515-2300*

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT*

PROVIDER

Hours: M 8:30AM-7:00PM

TU-TH 8:30AM-6:00PM

F 8:30AM-5:30PM

SA 8:30AM-5:00PM

PEDIATRICS

PAVLOVICH, WENDY

Provider ID: 416831

Provider Gender: Female

License Number: A126181

NPI: 1740467299


Provider English Spoken: Y
Cultural Competency: N


*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL*


*Board Certified Specialty: No
Family Health Centers of San
Diego*

*NORTH PARK FAMILY HEALTH
CENTERS*

 *3514 30TH ST
SAN DIEGO, CA 92104*

 *Phone: (619) 515-2424*

 *After Hours Phone: (619)
515-2424*

 *Website: www.fhcsd.org*
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

PAVLOVICH, WENDY

Provider ID: 416831

Provider Gender: Female

License Number: A126181

D2. 主治医生名录

NPI: 1740467299


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424


 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


PEDIATRICS


POWELL, STEPHANIE

Provider ID: 319033

Provider Gender: Female

NPI: 1720059744

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Board Certified Specialty: No

Rady Childrens Health Network
STEPHANIE J POWELL

 7910 FROST ST STE 400
SAN DIEGO, CA 92123

 Phone: (858) 495-0500

Fax: (858) 560-4279

 After Hours Phone: (858)
495-0500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


PRESKILL, CATALINA


Provider ID: 403583

Provider Gender: Female

License Number: G29879

NPI: 1598088759

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

PEDIATRICS

PRESKILL, CATALINA

Provider ID: 403583

Provider Gender: Female

License Number: G29879

NPI: 1598088759

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500


 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

PEDIATRICS

RODRIGUEZ, JAVIER


Provider ID: 185268

Provider Gender: Male

License Number: A82639

NPI: 1013059385

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

D2. 主治医生名录

LA MAESTRA FAMILY CLINIC INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619)
255-9155
 Website: www.lamaestra.org


Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

RODRIGUEZ, JAVIER

Provider ID: 185268

Provider Gender: Male

License Number: A82639

NPI: 1013059385

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

RODRIGUEZ, ALDO

Provider ID: 451167

Provider Gender: Male

License Number: A134995

NPI: 1508209651

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP

KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

PEDIATRICS

RODRIGUEZ, ALDO

Provider ID: 451167

Provider Gender: Male

License Number: A134995

NPI: 1508209651

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP

KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

PEDIATRICS

RUBENSTEIN, STUART

Provider ID: 521305

Provider Gender: Male

NPI: 1689633844

Provider English Spoken: Y

Cultural Competency: N




Hospital Affiliation: SCRIPPS


D2. 主治医生名录

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS
HOSPITAL SAN DIEGO,
SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network
STUART I RUBENSTEIN

 11943 EL CAMINO REAL STE
210
SAN DIEGO, CA 92130
 Phone: (858) 793-1011
 After Hours Phone: (858)
793-1011

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS


SAMPATH, SRIVIDYA

Provider ID: 416831

Provider Gender: Female

License Number: A132576

NPI: 1275892754

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH

CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS


SAMPATH, SRIVIDYA

Provider ID: 416831

Provider Gender: Female

License Number: A132576

NPI: 1275892754

 Provider English Spoken: Y



 Provider Language(s)
Spoken: French


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
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 3514 30TH ST
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515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

SEBSO, JODI

Provider ID: 206360

Provider Gender: Female

License Number: A103099

NPI: 1538484316

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

SEBSO, JODI

Provider ID: 206360

D2. 主治医生名录

Provider Gender: Female
License Number: A103099
NPI: 1538484316
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 9:00AM-5:00PM

PEDIATRICS




SEBSO, JODI


Provider ID: 416831
Provider Gender: Female
License Number: A103099
NPI: 1538484316
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
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Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS






SEBSO, JODI

Provider ID: 416831
Provider Gender: Female
License Number: A103099
NPI: 1538484316
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
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515-2424

 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

SELLERS, JAIME

Provider ID: 206360
Provider Gender: Female
License Number: A159494
NPI: 1720512015
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

D2. 主治医生名录

SELLERS, JAIME

Provider ID: 206360

Provider Gender: Female

License Number: A159494

NPI: 1720512015

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Sharp


Grossmont Hospital, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

SHENOY, ASHVIN

Provider ID: 232392

Provider Gender: Male

NPI: 1619262664


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SHARP
MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network
ASHVIN B SHENOY

 292 EUCLID AVE STE 220
SAN DIEGO, CA 92114

 Phone: (619) 262-8624

Fax: (619) 262-6639

 After Hours Phone: (619)
262-8624

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


SHETH, HASMUKH


Provider ID: 451167

Provider Gender: Male

License Number: A45942

NPI: 1396812236

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Gujarati, Hindi,
Urdu


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH

CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

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662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

SHETH, HASMUKH


Provider ID: 451167

Provider Gender: Male

License Number: A45942

NPI: 1396812236

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Gujarati, Hindi,
Urdu


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH
CENTER

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 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

D2. 主治医生名录

h- center
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

SHIAU, NANCY

Provider ID: 40852

Provider Gender: Female

NPI: 1750352779

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: SHARP

*MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MARY BIRCH
HOSP FOR WOMEN AND
NEWBORNS*

Board Certified Specialty: No
Rady Childrens Health Network
NANCY H SHIAU

 *6699 ALVARADO RD STE
2200*

SAN DIEGO, CA 92120

 *Phone: (619) 265-3400*

Fax: (619) 265-3407


 *After Hours Phone: (619)
265-3400*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


SPITZER, MARSHA

Provider ID: 402851

Provider Gender: Female

License Number: A76785

NPI: 1851323315

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


Hospital Affiliation: SCRIPPS


*MERCY HOSPITAL,
GROSSMONT HOSPITAL*


Board Certified Specialty: No
*Family Health Centers of San
Diego*

*FAMILY HLTH CTR SAN
DIEGO-BEACH AREA*

 *3705 MISSION BLVD
SAN DIEGO, CA 92109*

 *Phone: (619) 515-2444*

 *After Hours Phone: (619)
515-2444*

 *Website: www.fhcsd.org*
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS


SPITZER, MARSHA


Provider ID: 402851

Provider Gender: Female

License Number: A76785

NPI: 1851323315

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,


GROSSMONT HOSPITAL


Board Certified Specialty: No
*Family Health Centers of San
Diego*

*FAMILY HLTH CTR SAN
DIEGO-BEACH AREA*

 *3705 MISSION BLVD
SAN DIEGO, CA 92109*

 *Phone: (619) 515-2444*

 *After Hours Phone: (619)
515-2444*

 *Website: www.fhcsd.org*
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

SPITZER, MARSHA

Provider ID: 206360

Provider Gender: Female

License Number: A76785

NPI: 1851323315

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No
*Family Health Centers of San
Diego*



*LOGAN HEIGHTS FAMILY
HEALTH CENTER*

D2. 主治医生名录

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

SPITZER, MARSHA



Provider ID: 206360
Provider Gender: Female
License Number: A76785
NPI: 1851323315
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER





 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):


N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

SPITZER, MARSHA

Provider ID: 417429
Provider Gender: Female
License Number: A76785
NPI: 1851323315
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE



 1550 BROADWAY STE 2
SAN DIEGO, CA 92101
 Phone: (619) 515-2525
 After Hours Phone: (619)
515-2525
 Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):






N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

SPITZER, MARSHA


Provider ID: 417429
Provider Gender: Female

License Number: A76785
NPI: 1851323315
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE






 1550 BROADWAY STE 2
SAN DIEGO, CA 92101
 Phone: (619) 515-2525
 After Hours Phone: (619)
515-2525
 Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

STUMP, CHARI



Provider ID: 587747
Provider Gender: Female
NPI: 1265968788
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
CHARI D STUMP






D2. 主治医生名录

 7910 FROST ST STE 400
SAN DIEGO, CA 92123
 Phone: (858) 495-0500
Fax: (858) 560-4279
 After Hours Phone: (858)
495-0500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS


SUBRAMANIAN, RAMA

Provider ID: 662343
Provider Gender: Female
NPI: 1932593506
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tamil
Cultural Competency: N
Board Certified Specialty: No
Rady Childrens Health Network
RAMA V SUBRAMANIAN


 11943 EL CAMINO REAL STE
210
SAN DIEGO, CA 92130
 Phone: (858) 793-1011
 After Hours Phone: (858)
793-1011
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

SULEIMAN QAFITI, KHAWLA


Provider ID: 416831
Provider Gender: Female
License Number: A51318
NPI: 1659303121
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18




American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-5:00PM

PEDIATRICS

SULEIMAN QAFITI, KHAWLA



Provider ID: 416831
Provider Gender: Female
License Number: A51318
NPI: 1659303121
 Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-5:00PM

PEDIATRICS

TAMAYO, MAITHE

Provider ID: 206360
Provider Gender: Female
License Number: A80504
NPI: 1487748430
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
Family Health Centers of San

D2. 主治医生名录

Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

TAMAYO, MAITHE

Provider ID: 356145

Provider Gender: Female

License Number: A80504

NPI: 1487748430

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

SHERMAN HEIGHTS FAMILY
HLTH CTRS INC

2391 ISLAND AVE
SAN DIEGO, CA 92102

Phone: (619) 515-2435

After Hours Phone: (619)
515-2435

Website: N/A

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

TAMAYO, MAITHE

Provider ID: 356145

Provider Gender: Female

License Number: A80504

NPI: 1487748430

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

SHERMAN HEIGHTS FAMILY
HLTH CTRS INC

2391 ISLAND AVE
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Website: N/A

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

TAMAYO, MAITHE

Provider ID: 206360

Provider Gender: Female

License Number: A80504

NPI: 1487748430

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

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After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

WASSON, MINA

Provider ID: 524333

Provider Gender: Female

NPI: 1366753022

Provider English Spoken: Y

Provider Language(s)

D2. 主治医生名录

Spoken: Russian
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
MINA K WASSON
📍 11943 EL CAMINO REAL STE 210
SAN DIEGO, CA 92130
☎ *Phone: (858) 793-1011*
📞 *After Hours Phone: (858) 793-1011*
🌐 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM SA 8:00AM-0:00PM

PEDIATRICS

WATERS, ELIZABETH

Provider ID: 153090
Provider Gender: Female
NPI: 1730477621
📄 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL, RADY CHILDRENS HOSPITAL

SAN DIEGO
Board Certified Specialty: No
Rady Childrens Health Network
ELIZABETH J WATERS
📍 292 EUCLID AVE STE 220
SAN DIEGO, CA 92114
☎ *Phone: (619) 262-8624*
Fax: (619) 262-6639
📞 *After Hours Phone: (619) 262-8624*
🌐 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

WEATHERLY, JACOB

Provider ID: 637376
Provider Gender: Male
NPI: 1538520457
📄 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: LUCILE SALTER PACKARD CHILDRENS HOSP, Stanford Health Care
Board Certified Specialty: No
Rady Childrens Health Network
JACOB A WEATHERLY
📍 6699 ALVARADO RD STE 2200
SAN DIEGO, CA 92120
☎ *Phone: (619) 265-3400*
Fax: (619) 265-3407
📞 *After Hours Phone: (619) 265-3400*
🌐 *Website: N/A*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL): N
♿ *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM SA 8:30AM-0:00PM

PEDIATRICS

WONG, YOLANDA

Provider ID: 482070
Provider Gender: Female
License Number: A94449
NPI: 1851599872
📄 *Provider English Spoken: Y*
📄 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE
📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ *Phone: (858) 810-8700*
📞 *After Hours Phone: (858) 810-8700*
🌐 *Website: www.sdfamilycare.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ *Accessibility: CONTACT PROVIDER*
Hours: M 8:30AM-5:30PM TU 8:30AM-9:00PM W-F 8:30AM-5:30PM SA 9:00AM-4:00PM

D2. 主治医生名录

PEDIATRICS


WONG, YOLANDA

Provider ID: 482070

Provider Gender: Female

License Number: A94449

NPI: 1851599872

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PEDIATRICS


WONG, YOLANDA

Provider ID: 233532

Provider Gender: Female

License Number: A94449

NPI: 1851599872

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


WONG, YOLANDA

Provider ID: 233532

Provider Gender: Female

License Number: A94449

NPI: 1851599872

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
IHP of Southern Cal-PHP


MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

ZAHEER, AARON


Provider ID: 233532

Provider Gender: Male

License Number: A61238

NPI: 1902882301

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Persian, Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
IHP of Southern Cal-PHP


MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

D2. 主治医生名录

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS


ZAHEER, AARON


Provider ID: 233532

Provider Gender: Male

License Number: A61238

NPI: 1902882301

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Persian, Spanish*
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 *4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105*

 *Phone: (619) 280-2058*

 *After Hours Phone: (619) 280-2058*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS


ZAHEER, AARON


Provider ID: 482070

Provider Gender: Male

License Number: A61238

NPI: 1902882301


 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Persian, Spanish*
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

*Board Certified Specialty: No IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE*

 *7011 LINDA VISTA RD
SAN DIEGO, CA 92111*

 *Phone: (858) 810-8700*

 *After Hours Phone: (858) 810-8700*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS


ZAHEER, AARON


Provider ID: 482070

Provider Gender: Male

License Number: A61238

NPI: 1902882301

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Persian, Spanish*
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO


*Board Certified Specialty: No IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE*

 *7011 LINDA VISTA RD*

SAN DIEGO, CA 92111

 *Phone: (858) 810-8700*


 *After Hours Phone: (858) 810-8700*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

ZAND, FARIBA


Provider ID: 206360

Provider Gender: Female

License Number: A46161

NPI: 1356373674

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Farsi, Persian, Spanish*
Cultural Competency: N

Hospital Affiliation: MERCY GENERAL HOSPITAL, RADY

CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY


HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD


MEDICAL CTR

Board Certified Specialty: No Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 *1809 NATIONAL AVE
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*

D2. 主治医生名录

Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


ZAND, FARIBA


Provider ID: 206360

Provider Gender: Female

License Number: A46161

NPI: 1356373674

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Persian,
Spanish


Cultural Competency: N


Hospital Affiliation: MERCY
GENERAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA, UCSD
MEDICAL CTR


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT


ALVARADO, EDMUND

Provider ID: 419529

Provider Gender: Male

License Number: PA20888

NPI: 1720303340

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR OF SD SAN
DIEGO COMMERCIAL

 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

 After Hours Phone: (619)
515-2422

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT


ALVARADO, EDMUND

Provider ID: 419529

Provider Gender: Male

License Number: PA20888

NPI: 1720303340

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR OF SD SAN
DIEGO COMMERCIAL

 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

 After Hours Phone: (619)
515-2422

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

ARMENTA, JORGE

Provider ID: 185268

Provider Gender: Male


License Number: PA13694


NPI: 1346382611

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

D2. 主治医生名录

 Website: www.lamaestra.org SA 8:00AM-2:00PM

g
Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT


ARMENTA, JORGE

Provider ID: 185268

Provider Gender: Male

License Number: PA13694

NPI: 1346382611

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-6:00PM

PHYSICIANS ASSISTANT


BATISTA, OSVALDO

Provider ID: 206360

Provider Gender: Male

License Number: PA17864

NPI: 1245349224

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


BATISTA, OSVALDO

Provider ID: 206360

Provider Gender: Male

License Number: PA17864

NPI: 1245349224

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BHAGAN, SHANNA

Provider ID: 206362

Provider Gender: Female

License Number: PA59874

NPI: 1437635943


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 主治医生名录

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

BHAGAN, SHANNA

Provider ID: 206362

Provider Gender: Female

License Number: PA59874


NPI: 1437635943


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

BHAGAN, SHANNA

Provider ID: 206362

Provider Gender: Female

License Number: PA59874


NPI: 1437635943


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CASTILLO, PATRICIA
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

BHAGAN, SHANNA

Provider ID: 206362

Provider Gender: Female

License Number: PA59874

NPI: 1437635943


 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San

Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA

Provider ID: 206362

Provider Gender: Female

License Number: PA17220


NPI: 1376550657


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA

Provider ID: 206362

Provider Gender: Female

License Number: PA17220


NPI: 1376550657

 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego


NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*

D2. 主治医生名录

 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA

Provider ID: 206362

Provider Gender: Female

License Number: PA17220

NPI: 1376550657


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San

Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA

Provider ID: 206362

Provider Gender: Female

License Number: PA17220

NPI: 1376550657


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHAN, TIFFANY

Provider ID: 206360

Provider Gender: Female

License Number: PA23258

NPI: 1790111607


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHAN, TIFFANY

Provider ID: 206360

Provider Gender: Female

License Number: PA23258

NPI: 1790111607


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300


 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CONDEZ, ESEL

Provider ID: 206360

Provider Gender: Male

License Number: PA53129

NPI: 1073978680

 Provider English Spoken: Y

D2. 主治医生名录

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT **CONDEZ, EDSSEL**

Provider ID: 206360
Provider Gender: Male
License Number: PA53129
NPI: 1073978680
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT **CONTRERAS, LORETTA**

Provider ID: 403583
Provider Gender: Female
License Number: PA54617
NPI: 1679096341
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU-W 8:30AM-5:00PM
TH 8:30AM-9:00PM
F 8:30AM-5:00PM

PHYSICIANS ASSISTANT **CONTRERAS, LORETTA**

Provider ID: 403583
Provider Gender: Female
License Number: PA54617
NPI: 1679096341



Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU-W 8:30AM-5:00PM
TH 8:30AM-9:00PM
F 8:30AM-5:00PM

PHYSICIANS ASSISTANT **DAVID, MARVIC**


Provider ID: 206360
Provider Gender: Male
License Number: PA53748
NPI: 1750832317
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300

D2. 主治医生名录

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 9:00AM-5:00PM

PHYSICIANS ASSISTANT

DAVID, MARVIC



Provider ID: 206360
Provider Gender: Male
License Number: PA53748
NPI: 1750832317
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 9:00AM-5:00PM






PHYSICIANS ASSISTANT

DRAME, SALWA

Provider ID: 417987



Provider Gender: Female
License Number: PA59481
NPI: 1093136426
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR IBARRA


 4874 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 515-2426
 After Hours Phone: (619)
515-2426
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER



PHYSICIANS ASSISTANT

DRAME, SALWA

Provider ID: 417987
Provider Gender: Female
License Number: PA59481
NPI: 1093136426
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego


FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 515-2426
 After Hours Phone: (619)

515-2426
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

FINK, PATRICK

Provider ID: 402851
Provider Gender: Male
License Number: PA52704
NPI: 1922380328
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

FINK, PATRICK

D2. 主治医生名录

Provider ID: 402851

Provider Gender: Male

License Number: PA52704


NPI: 1922380328


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619) 515-2444


 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

GARCIA, DEANA

Provider ID: 416831

Provider Gender: Female

License Number: PA21042

NPI: 1447567995


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH

CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

GARCIA, DEANA

Provider ID: 416831

Provider Gender: Female

License Number: PA21042


NPI: 1447567995


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

HOXMEIER, KRISTA

Provider ID: 418142

Provider Gender: Female

License Number: PA58505

NPI: 1104203454


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

 Phone: (619) 515-2454

 After Hours Phone: (619) 515-2454

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

HOXMEIER, KRISTA

Provider ID: 418142

Provider Gender: Female

License Number: PA58505

NPI: 1104203454

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San

D2. 主治医生名录

Diego

FAMILY HEALTH CTR SAN
DIEGO-OAK PARK

5160 FEDERAL BLVD
SAN DIEGO, CA 92105

Phone: (619) 515-2454

After Hours Phone: (619)
515-2454

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

HOXMEIER, KRYSTA

Provider ID: 206363

Provider Gender: Female

License Number: PA58505

NPI: 1104203454

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San

Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

HOXMEIER, KRYSTA

Provider ID: 206363

Provider Gender: Female

License Number: PA58505

NPI: 1104203454

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San

Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

LANDIS, SARAH

Provider ID: 417782

Provider Gender: Female

License Number: PA58826

NPI: 1144733676

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

DOWNTOWN FAMILY CTR AT
CONNECTIONS

1250 6TH AVE STE 100
SAN DIEGO, CA 92101

Phone: (619) 515-2430

After Hours Phone: (619)
515-2430

Website: www.fhcsd.org

Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

LANDIS, SARAH

Provider ID: 417782

Provider Gender: Female

License Number: PA58826

NPI: 1144733676

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego


DOWNTOWN FAMILY CTR AT
CONNECTIONS

1250 6TH AVE STE 100
SAN DIEGO, CA 92101

Phone: (619) 515-2430

After Hours Phone: (619)

D2. 主治医生名录

515-2430
 Website: www.fhcsd.org
Email: jinah@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

LAPINA, LORI


Provider ID: 206362
Provider Gender: Female
License Number: PA23231
NPI: 1245670413
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

LAPINA, LORI

Provider ID: 206362
Provider Gender: Female
License Number: PA23231
NPI: 1245670413
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS





 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
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 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
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PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

LAPINA, LORI


Provider ID: 206362
Provider Gender: Female
License Number: PA23231
NPI: 1245670413
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
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NORTH PARK FAMILY HEALTH
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Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

LAPINA, LORI

Provider ID: 206362
Provider Gender: Female
License Number: PA23231
NPI: 1245670413
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
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 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

D2. 主治医生名录

PHYSICIANS ASSISTANT

LAPINA, LORI

Provider ID: 417937

Provider Gender: Female

License Number: PA23231


NPI: 1245670413


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103


 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

LAPINA, LORI

Provider ID: 417937

Provider Gender: Female


License Number: PA23231

NPI: 1245670413


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego


FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

LLOYD, MATTHEW

Provider ID: 417429

Provider Gender: Male

License Number: PA62752


NPI: 1487307369


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

LLOYD, MATTHEW

Provider ID: 417429

Provider Gender: Male

License Number: PA62752


NPI: 1487307369


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

LOHNES, ELLIE

Provider ID: 417429

Provider Gender: Female

License Number: PA63071

NPI: 1902580426

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN

D2. 主治医生名录

DIEGO- CITY COLLEGE

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619)
515-2525

Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

LOHNES, ELLIE

Provider ID: 417429

Provider Gender: Female

License Number: PA63071

NPI: 1902580426

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619)
515-2525

Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

LOPEZ, MARIO

Provider ID: 417937

Provider Gender: Male

License Number: PA21385

NPI: 1932335080

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

LOPEZ, MARIO

Provider ID: 417937

Provider Gender: Male

License Number: PA21385

NPI: 1932335080

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

LOPEZ, MARIO

Provider ID: 417987

Provider Gender: Male

License Number: PA21385

NPI: 1932335080

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HEALTH CTR IBARRA

4874 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 515-2426

After Hours Phone: (619)
515-2426

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

D2. 主治医生名录

LOPEZ, MARIO

Provider ID: 417987

Provider Gender: Male

License Number: PA21385


NPI: 1932335080


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 515-2426


 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

MARTINEZ-MURGUIA, IRENE

Provider ID: 185268

Provider Gender: Female

License Number: PA20296

NPI: 1447492889

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

MARTINEZ-MURGUIA, IRENE

Provider ID: 185268

Provider Gender: Female

License Number: PA20296

NPI: 1447492889

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 185268

Provider Gender: Female

License Number: PA21625

NPI: 1154609790

Provider English Spoken: Y


Provider Language(s)
Spoken: Arabic


Cultural Competency: N


Board Certified Specialty: No

La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 185268

Provider Gender: Female

License Number: PA21625

NPI: 1154609790

Provider English Spoken: Y

Provider Language(s)

D2. 主治医生名录



Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
**LA MAESTRA FAMILY CLINIC
INC**
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619)
255-9155
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

MILLER, LAUREL

Provider ID: 206363
Provider Gender: Female
License Number: PA20378
NPI: 1598992133
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
*Family Health Centers of San
Diego*
**DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC**

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)



515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

MILLER, LAUREL

Provider ID: 206363
Provider Gender: Female
License Number: PA20378
NPI: 1598992133
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
*Family Health Centers of San
Diego*
**DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC**

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 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT


NUNO, JOSE




Provider ID: 206360
Provider Gender: Male

License Number: PA15227
NPI: 1275543068
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
*Family Health Centers of San
Diego*
**LOGAN HEIGHTS FAMILY
HEALTH CENTER**
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER



PHYSICIANS ASSISTANT

NUNO, JOSE

Provider ID: 206360
Provider Gender: Male
License Number: PA15227
NPI: 1275543068
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
*Family Health Centers of San
Diego*
**LOGAN HEIGHTS FAMILY
HEALTH CENTER**

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300


D2. 主治医生名录

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

PENA, NICHOLAS

Provider ID: 206360
Provider Gender: Male
License Number: PA56636
NPI: 1083176077

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER




 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
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 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER



PHYSICIANS ASSISTANT

PENA, NICHOLAS

Provider ID: 206360
Provider Gender: Male
License Number: PA56636



NPI: 1083176077
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
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 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

PHUNG, AIVI






Provider ID: 206046
Provider Gender: Female
License Number: PA53902
NPI: 1639528110
 Provider English Spoken: Y
 Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE CTR



 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: [www.sdfamilycare](http://www.sdfamilycare.org)

www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
TU 8:00AM-8:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-1:00PM

PHYSICIANS ASSISTANT

PHUNG, AIVI

Provider ID: 206046
Provider Gender: Female
License Number: PA53902
NPI: 1639528110
 Provider English Spoken: Y
 Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
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 After Hours Phone: (858) 279-0925

 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
TU 8:00AM-8:00PM

D2. 主治医生名录

W-F 8:00AM-5:00PM
SA 9:00AM-1:00PM

PHYSICIANS ASSISTANT


PHUNG, AIVI


Provider ID: 206046

Provider Gender: Female

License Number: PA53902

NPI: 1639528110

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

PHYSICIANS ASSISTANT


PHUNG, AIVI

Provider ID: 206046

Provider Gender: Female

License Number: PA53902

NPI: 1639528110

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

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SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
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 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

PHYSICIANS ASSISTANT


POLLEY, SHANNON

Provider ID: 206363

Provider Gender: Female

License Number: PA60864

NPI: 1225608722

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San

Diego
DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560


 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

POLLEY, SHANNON

Provider ID: 206363

Provider Gender: Female

License Number: PA60864

NPI: 1225608722


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

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 Phone: (619) 515-2560


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 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

QUICK, ELISABETH

D2. 主治医生名录

Provider ID: 206360

Provider Gender: Female

License Number: PA21591

NPI: 1790055010

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

QUICK, ELISABETH

Provider ID: 206360

Provider Gender: Female

License Number: PA21591

NPI: 1790055010

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RALL, EMILY

Provider ID: 227409

Provider Gender: Female

License Number: PA52141

NPI: 1407855828


Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC -
OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: [https://www.syhe
alth.org/locations](https://www.syhealth.org/locations)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RALL, EMILY

Provider ID: 227409

Provider Gender: Female

License Number: PA52141

NPI: 1407855828


Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC -
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 3177 OCEAN VIEW BLVD
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 After Hours Phone: (619)
662-4100

 Website: [https://www.syhe
alth.org/locations](https://www.syhealth.org/locations)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RASMUSSEN, DALE

Provider ID: 417429

Provider Gender: Male

License Number: PA54022

NPI: 1962880864

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: MERCY
HOSPITAL OF FOLSOM

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2

D2. 主治医生名录

SAN DIEGO, CA 92101
☎ Phone: (619) 515-2525
🕒 After Hours Phone: (619) 515-2525
🌐 Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

RASMUSSEN, DALE

Provider ID: 417429
Provider Gender: Male
License Number: PA54022
NPI: 1962880864
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: MERCY
HOSPITAL OF FOLSOM
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE
📍 1550 BROADWAY STE 2
SAN DIEGO, CA 92101
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🕒 After Hours Phone: (619) 515-2525
🌐 Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT

PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

SCHELLIE, SCOTT

Provider ID: 417429
Provider Gender: Male
License Number: PA53288
NPI: 1699053843
☑ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE
📍 1550 BROADWAY STE 2
SAN DIEGO, CA 92101
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🕒 After Hours Phone: (619) 515-2525
🌐 Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

SCHELLIE, SCOTT

Provider ID: 417429
Provider Gender: Male
License Number: PA53288
NPI: 1699053843
☑ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San

Diego
FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE
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🌐 Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 517403
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
☑ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE
📍 316 25TH ST
SAN DIEGO, CA 92102
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619) 662-4100
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
♿ Accessibility: CONTACT

D2. 主治医生名录

PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 517403

Provider Gender: Female


License Number: PA20490

NPI: 1619100237


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE

 316 25TH ST

SAN DIEGO, CA 92102

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

Provider ID: 206363

Provider Gender: Female

License Number: MT2061555

NPI: 1215264452


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

Provider ID: 206363

Provider Gender: Female

License Number: PA58081

NPI: 1215264452


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

Provider ID: 206363

Provider Gender: Female

License Number: PA58081

NPI: 1215264452


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

Provider ID: 206363

Provider Gender: Female

License Number: MT2061555

NPI: 1215264452

 Provider English Spoken: Y
Cultural Competency: N





Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

D2. 主治医生名录

 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER



PHYSICIANS ASSISTANT


TREUNER, JULIE

Provider ID: 206360
Provider Gender: Female
License Number: PA17478
NPI: 1922013614
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM

PHYSICIANS ASSISTANT



TREUNER, JULIE

Provider ID: 206360
Provider Gender: Female
License Number: PA17478
NPI: 1922013614
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER

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 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM

PHYSICIANS ASSISTANT

TURNER, SHEREENA

Provider ID: 206360
Provider Gender: Female
License Number: PA20396
NPI: 1992934988
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No







Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER


 1809 NATIONAL AVE
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 Phone: (619) 515-2300
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 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


PHYSICIANS ASSISTANT

TURNER, SHEREENA

Provider ID: 206360
Provider Gender: Female
License Number: PA20396
NPI: 1992934988
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
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 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

D2. 主治医生名录

American Sign Language (ASL):  Provider English Spoken: Y
Cultural Competency: N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

UDOH, EKAETE

Provider ID: 418535

Provider Gender: Male

License Number: PA19664


NPI: 1841472776


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Operation Samahan


OPERATION SAMAHAN

RANCHO PENASQUITOS

 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

 Phone: (844) 200-2426


 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

UDOH, EKAETE

Provider ID: 418535

Provider Gender: Male

License Number: PA19664


NPI: 1841472776


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Operation Samahan


OPERATION SAMAHAN

RANCHO PENASQUITOS

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 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT


VARGAS, ROBERT

Provider ID: 206360

Provider Gender: Male

License Number: PA11194

NPI: 1972528081

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

PHYSICIANS ASSISTANT


VARGAS, ROBERT

Provider ID: 206360

Provider Gender: Male

License Number: PA11194

NPI: 1972528081

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego


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HEALTH CENTER

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515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

D2. 主治医生名录

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI

Provider ID: 233597

Provider Gender: Female

License Number: PA18746

NPI: 1932297595

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish,
Vietnamese


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619)
563-0250

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI

Provider ID: 233597

Provider Gender: Female

License Number: PA18746

NPI: 1932297595

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish,
Vietnamese


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619)
563-0250

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI

Provider ID: 206362

Provider Gender: Female

License Number: PA18746

NPI: 1932297595

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish,
Vietnamese


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI

Provider ID: 206362

Provider Gender: Female

License Number: PA18746

NPI: 1932297595

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish,
Vietnamese


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
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 Phone: (619) 515-2424

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 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI


Provider ID: 206362






Provider Gender: Female

License Number: PA18746

NPI: 1932297595



D2. 主治医生名录



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish,
Vietnamese
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS

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Min/Max Age: 0\150
American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI



Provider ID: 206362
Provider Gender: Female
License Number: PA18746
NPI: 1932297595
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish,
Vietnamese
Cultural Competency: N
Board Certified Specialty: No
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 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PODIATRIST

JUAREZ, LETICIA



Provider ID: 206360
Provider Gender: Female
License Number: DPM5661
NPI: 1508393778
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER






 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PODIATRIST

JUAREZ, LETICIA



Provider ID: 206360
Provider Gender: Female
License Number: DPM5661
NPI: 1508393778
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
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 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PODIATRIST

LE, DIANA

Provider ID: 206360
Provider Gender: Female
License Number: DPM5734
NPI: 1184112864
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR
Board Certified Specialty: No
Family Health Centers of San

D2. 主治医生名录

Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PODIATRIST

LE, DIANA

Provider ID: 206360

Provider Gender: Female

License Number: DPM5734

NPI: 1184112864

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PODIATRIST

LE, DIANA

Provider ID: 206363

Provider Gender: Female

License Number: DPM5734

NPI: 1184112864

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PODIATRIST

LE, DIANA

Provider ID: 206363

Provider Gender: Female

License Number: DPM5734

NPI: 1184112864

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PODIATRIST

MANCHEL, BRUCE

Provider ID: 631494

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR

Board Certified Specialty: No

D2. 主治医生名录

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
PRECISION PARK

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PODIATRIST

MANCHEL, BRUCE

Provider ID: 631494

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND
HEALTHCARE CTR

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
PRECISION PARK

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 206360

Provider Gender: Female

License Number: DPM4819

NPI: 1326282237

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 206360

Provider Gender: Female

License Number: DPM4819

NPI: 1326282237

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San

Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 402851

Provider Gender: Female

License Number: DPM4819

NPI: 1326282237

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

D2. 主治医生名录

 *Accessibility: CONTACT PROVIDER*

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 402851

Provider Gender: Female

License Number: DPM4819


NPI: 1326282237


 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 *3705 MISSION BLVD
SAN DIEGO, CA 92109*

 *Phone: (619) 515-2444*


 *After Hours Phone: (619) 515-2444*

 *Website: www.fhcsd.org*
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 417429

Provider Gender: Female

License Number: DPM4819


NPI: 1326282237


 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 *1550 BROADWAY STE 2
SAN DIEGO, CA 92101*

 *Phone: (619) 515-2525*

 *After Hours Phone: (619) 515-2525*

 *Website: www.fhcsd.org*
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 417429

Provider Gender: Female

License Number: DPM4819


NPI: 1326282237


 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 *1550 BROADWAY STE 2
SAN DIEGO, CA 92101*

 *Phone: (619) 515-2525*

 *After Hours Phone: (619) 515-2525*

 *Website: www.fhcsd.org*
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

PREVENTATIVE MEDICINE GENERAL

HILL, LINDA

Provider ID: 206046

Provider Gender: Female

License Number: G41532

NPI: 1467434811

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: French, Spanish*

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE CTR

 *6973 LINDA VISTA RD
SAN DIEGO, CA 92111*

 *Phone: (858) 279-0925*

 *After Hours Phone: (858) 279-0925*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE GENERAL

HILL, LINDA

Provider ID: 482070

D2. 主治医生名录

Provider Gender: Female
License Number: G41532
NPI: 1467434811
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

HILL, LINDA


Provider ID: 206046
Provider Gender: Female
License Number: G41532
NPI: 1467434811
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

HILL, LINDA






Provider ID: 206046
Provider Gender: Female
License Number: G41532
NPI: 1467434811
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

HILL, LINDA

Provider ID: 482070
Provider Gender: Female
License Number: G41532
NPI: 1467434811
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT

D2. 主治医生名录

PROVIDER

Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL


HILL, LINDA


Provider ID: 206046

Provider Gender: Female

License Number: G41532

NPI: 1467434811

 Provider English Spoken: Y

 Provider Language(s)

Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE

CTR


 6973 LINDA VISTA RD

SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)

279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL


RISSER, JOSEPH

Provider ID: 206046

Provider Gender: Male

License Number: G70886

NPI: 1952386765

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: Yes


IHP of Southern Cal-PHP


LINDA VISTA HEALTH CARE

CTR

 6973 LINDA VISTA RD

SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 Fax: (858) 279-0377

 After Hours Phone: (858) 279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL


RISSER, JOSEPH

Provider ID: 482070

Provider Gender: Male

License Number: G70886

NPI: 1952386765

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


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 7011 LINDA VISTA RD

SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858) 810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

RISSER, JOSEPH

Provider ID: 206046

Provider Gender: Male

License Number: G70886

NPI: 1952386765

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: Yes


IHP of Southern Cal-PHP


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CTR


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 Phone: (858) 279-0925

 Fax: (858) 279-0377

 After Hours Phone: (858) 279-0925

 Website: www.sdfamilycare.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 主治医生名录

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

RISSER, JOSEPH

Provider ID: 206046

Provider Gender: Male

License Number: G70886


NPI: 1952386765

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: Yes
IHP of Southern Cal-PHP


LINDA VISTA HEALTH CARE
CTR

 *6973 LINDA VISTA RD*
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*

Fax: (858) 279-0377

 *After Hours Phone: (858)*
279-0925

 *Website: www.sdfamilycare*
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

RISSER, JOSEPH

Provider ID: 482070

Provider Gender: Male

License Number: G70886


NPI: 1952386765


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 *7011 LINDA VISTA RD*
SAN DIEGO, CA 92111

 *Phone: (858) 810-8700*

 *After Hours Phone: (858)*
810-8700

 *Website: www.sdfamilycare*
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

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PREVENTATIVE MEDICINE

GENERAL

RISSER, JOSEPH

Provider ID: 206046

Provider Gender: Male

License Number: G70886


NPI: 1952386765

 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: Yes
IHP of Southern Cal-PHP


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CTR

 *6973 LINDA VISTA RD*
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*

Fax: (858) 279-0377

 *After Hours Phone: (858)*
279-0925

 *Website: www.sdfamilycare*
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

ROMERO, CAMILA


Provider ID: 206046

Provider Gender: Female

License Number: A93812

NPI: 1508912130

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS


Board Certified Specialty: No

IHP of Southern Cal-PHP


LINDA VISTA HEALTH CARE


CTR

 *6973 LINDA VISTA RD*
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*

Fax: (858) 279-0377

 *After Hours Phone: (858)*
279-0925

 *Website: www.sdfamilycare*
.org


Medi-Cal Open Panel: Yes

D2. 主治医生名录

Min/Max Age: 0\150

American Sign Language (ASL): Provider ID: 206046

N

 Accessibility: CONTACT PROVIDER

PREVENTATIVE MEDICINE

GENERAL


ROMERO, CAMILA

Provider ID: 206046

Provider Gender: Female

License Number: A93812

NPI: 1508912130

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N


Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS


Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 279-0377

 After Hours Phone: (858)
279-0925


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Provider ID: 206046

N

 Accessibility: CONTACT PROVIDER

PREVENTATIVE MEDICINE

GENERAL


ROMERO, CAMILA

Provider ID: 206046

Provider Gender: Female

License Number: A93812

NPI: 1508912130

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N


Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS


Board Certified Specialty: No
IHP of Southern Cal-PHP

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CTR

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 Phone: (858) 279-0925

Fax: (858) 279-0377

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279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Provider ID: 206360

N

 Accessibility: CONTACT PROVIDER

PREVENTATIVE MEDICINE

GENERAL


ROMERO, CAMILA

Provider ID: 206046

Provider Gender: Female

License Number: A93812

NPI: 1508912130

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N


Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS


Board Certified Specialty: No
IHP of Southern Cal-PHP


LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 279-0377

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL

THERAPIST

BLOCKER, NIRIT


Provider ID: 206360

Provider Gender: Female

License Number: PT30272

NPI: 1457689309

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hebrew

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San

Diego
LOGAN HEIGHTS FAMILY

HEALTH CENTER



 1809 NATIONAL AVE
SAN DIEGO, CA 92113

D2. 主治医生名录






 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 9:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

BLOCKER, NIRIT

Provider ID: 206360
Provider Gender: Female
License Number: PT30272
NPI: 1457689309
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hebrew
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER


 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Hours: M-F 9:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST


CHAVARRIA, JESSICA

Provider ID: 417937
Provider Gender: Female
License Number: PT292351
NPI: 1407391808

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST


CHAVARRIA, JESSICA

Provider ID: 417937
Provider Gender: Female
License Number: PT292351
NPI: 1407391808

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

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Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

CONCORS, ANDREW



Provider ID: 417937
Provider Gender: Male
License Number: PT12930
NPI: 1578706743


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

D2. 主治医生名录

 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST


CONCORS, ANDREW

Provider ID: 417937

Provider Gender: Male

License Number: PT12930

NPI: 1578706743

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish



Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST


CUMMINGS, GEORGE

Provider ID: 417937

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish



Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
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 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE

Provider ID: 417937

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish



Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

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Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

DAHMS, MADELYNN

Provider ID: 206360

Provider Gender: Female

License Number: PT295463

NPI: 1245712702

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Sign Language

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE

D2. 主治医生名录

SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
🕒 After Hours Phone: (619) 515-2300
🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

DAHMS, MADELYNN

Provider ID: 206360
Provider Gender: Female
License Number: PT295463
NPI: 1245712702
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Sign Language
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
🕒 After Hours Phone: (619) 515-2300
🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

FIELDING, JOSEPH

Provider ID: 417937
Provider Gender: Male
License Number: PT40975
NPI: 1235577560
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD HILLCREST

📍 4094 4TH AVE
SAN DIEGO, CA 92103
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🌐 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

FIELDING, JOSEPH

Provider ID: 417937
Provider Gender: Male
License Number: PT40975
NPI: 1235577560
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San

Diego
FAMILY HLTH CTR SD HILLCREST
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

HAPKE, ELENA

Provider ID: 417937
Provider Gender: Female
License Number: PT292613
NPI: 1003354895
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD HILLCREST

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🌐 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

D2. 主治医生名录

N

 *Accessibility: CONTACT PROVIDER*

REGISTERED PHYSICAL

THERAPIST


HAPKE, ELENA

Provider ID: 417937

Provider Gender: Female

License Number: PT292613

NPI: 1003354895

 *Provider English Spoken: Y*

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

 *4094 4TH AVE
SAN DIEGO, CA 92103*

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Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

REGISTERED PHYSICAL

THERAPIST


HERMES, MARY


Provider ID: 206360

Provider Gender: Female

License Number: PT24707

NPI: 1518028547

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

*LOGAN HEIGHTS FAMILY
HEALTH CENTER*

 *1809 NATIONAL AVE
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 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

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THERAPIST


HERMES, MARY


Provider ID: 206360

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NPI: 1518028547

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 *Provider Language(s)*

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Board Certified Specialty: No

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Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

REGISTERED PHYSICAL

THERAPIST


IRIZARRY, NICOLE

Provider ID: 206360

Provider Gender: Female

License Number: PT33914

NPI: 1003088063

 *Provider English Spoken: Y*


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

*LOGAN HEIGHTS FAMILY
HEALTH CENTER*

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Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

REGISTERED PHYSICAL

THERAPIST

IRIZARRY, NICOLE

D2. 主治医生名录

Provider ID: 206360

Provider Gender: Female

License Number: PT33914


NPI: 1003088063


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

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Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

MAHONEY, KAITLYN

Provider ID: 417937

Provider Gender: Female

License Number: PT296559


NPI: 1114583176


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST

MAHONEY, KAITLYN

Provider ID: 417937

Provider Gender: Female

License Number: PT296559


NPI: 1114583176


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

Provider ID: 417937

Provider Gender: Male

License Number: PT293536


NPI: 1043736879


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103


 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

Provider ID: 417937

Provider Gender: Male

License Number: PT293536

NPI: 1043736879

Provider English Spoken: Y
Cultural Competency: N

D2. 主治医生名录

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL

THERAPIST

SCHMIDT, BRYAN

Provider ID: 417937

Provider Gender: Male

License Number: PT28061

NPI: 1780685032

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL

THERAPIST

SCHMIDT, BRYAN

Provider ID: 417937

Provider Gender: Male

License Number: PT28061

NPI: 1780685032

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

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Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL

THERAPIST

VAN DYKE, JASON

Provider ID: 417937

Provider Gender: Male

License Number: PT25155

NPI: 1487658720

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

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Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL

THERAPIST

VAN DYKE, JASON

Provider ID: 417937

Provider Gender: Male

License Number: PT25155

NPI: 1487658720

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

D2. 主治医生名录


Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
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 *Phone: (619) 515-2545*
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Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

RHEUMATOLOGY

OGANDO, SHEENA

Provider ID: 206363
Provider Gender: Female
License Number: A142743
NPI: 1649564295


Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: JOHN MUIR MEDICAL CENTER WALNUT CREEK CAMPUS
Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102
 *Phone: (619) 515-2560*
 *After Hours Phone: (619) 515-2560*

 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

RHEUMATOLOGY

OGANDO, SHEENA


Provider ID: 206363
Provider Gender: Female
License Number: A142743
NPI: 1649564295

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: JOHN MUIR MEDICAL CENTER WALNUT CREEK CAMPUS
Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102
 *Phone: (619) 515-2560*
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 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

RHEUMATOLOGY

REDDY, DANA

Provider ID: 206363
Provider Gender: Female
License Number: A115598
NPI: 1144538778


Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102
 *Phone: (619) 515-2560*
 *After Hours Phone: (619) 515-2560*

 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT*

D2. 主治医生名录

PROVIDER
Hours: M-F 8:00AM-5:00PM

RHEUMATOLOGY

REDDY, DANA

Provider ID: 206363

Provider Gender: Female

License Number: A115598

NPI: 1144538778

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

*Family Health Centers of San
Diego*

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

*4725 MARKET ST
SAN DIEGO, CA 92102*

Phone: (619) 515-2560

*After Hours Phone: (619)
515-2560*

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

*Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

RHEUMATOLOGY

REDDY, DANA

Provider ID: 403583

Provider Gender: Female

License Number: A115598

NPI: 1144538778

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

*1501 IMPERIAL AVE
SAN DIEGO, CA 92101*

Phone: (619) 233-8500

*After Hours Phone: (619)
233-8500*

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

*Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:30PM

RHEUMATOLOGY

REDDY, DANA

Provider ID: 403583

Provider Gender: Female

License Number: A115598

NPI: 1144538778

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

*1501 IMPERIAL AVE
SAN DIEGO, CA 92101*

Phone: (619) 233-8500

*After Hours Phone: (619)
233-8500*

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

*Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:30PM

SPEECH PATHOLOGIST

MILLER, WILLIAM

Provider ID: 206360

Provider Gender: Male

License Number: SP35150

NPI: 1972002210

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

D2. 主治医生名录

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

SPEECH PATHOLOGIST

MILLER, WILLIAM

Provider ID: 206360

Provider Gender: Male

License Number: SP35150

NPI: 1972002210

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

SPEECH PATHOLOGIST

WILLIAMS, JESSICA

Provider ID: 206360

Provider Gender: Female

License Number: SP27677

NPI: 1932680006

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

SPEECH PATHOLOGIST

WILLIAMS, JESSICA

Provider ID: 206360

Provider Gender: Female

License Number: SP27677

NPI: 1932680006

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

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American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

SAN MARCOS

CERTIFIED NURSE

PRACTITIONER

FODDA, RAMI

Provider ID: 614511

Provider Gender: Male

License Number: NP18788

NPI: 1164660452

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760) 736-6767

Website: www.ihpsocal.org

D2. 主治医生名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

FODDA, RAMI

Provider ID: 614511

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CERTIFIED NURSE

PRACTITIONER

FODDA, RAMI


Provider ID: 614511

Provider Gender: Male

D2. 主治医生名录

License Number: NP18788

NPI: 1164660452

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic


Cultural Competency: N

Board Certified Specialty: No

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): TRUECARE

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

FREEMAN, WANDA

Provider ID: 206426

Provider Gender: Female

License Number: NP95003903

NPI: 1659504264

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): TRUECARE

N

 Accessibility: CONTACT
PROVIDER

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PRACTITIONER


FREEMAN, WANDA

Provider ID: 206426

Provider Gender: Female

License Number: NP95003903

NPI: 1659504264

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PROVIDER

CERTIFIED NURSE

PRACTITIONER

D2. 主治医生名录

FREEMAN, WANDA

Provider ID: 206426

Provider Gender: Female

License Number: NP95003903

NPI: 1659504264

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


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 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER



HENLEY, MEARA

Provider ID: 206426

Provider Gender: Female

License Number: NP95002545

NPI: 1538319645

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

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IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. 主治医生名录

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

HENLEY, MEARA

Provider ID: 206426

Provider Gender: Female

License Number: NP95002545

NPI: 1538319645

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

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Provider Gender: Female

License Number: NP95002545

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Provider Language(s)


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Cultural Competency: N


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American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

KOUSARI, JHALEH

Provider ID: 206426

Provider Gender: Female

License Number: NP20893

NPI: 1811262405

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Persian,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS


MEMORIAL HOSPITAL


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

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 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

KOUSARI, JHALEH



Provider ID: 206426





Provider Gender: Female

License Number: NP20893

NPI: 1811262405

D2. 主治医生名录

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Persian,
Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE



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736-6767
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER





CERTIFIED NURSE

PRACTITIONER

KOUSARI, JHALEH

Provider ID: 206426
Provider Gender: Female
License Number: NP20893
NPI: 1811262405

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Persian,
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Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP



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PRACTITIONER

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NPI: 1811262405

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 Provider Language(s)
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Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
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NPI: 1811262405

D2. 主治医生名录


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Persian,
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Cultural Competency: N
Hospital Affiliation: SCRIPPS
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CERTIFIED NURSE

PRACTITIONER

MACIAS, ALISSA

Provider ID: 206426
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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CERTIFIED NURSE

D2. 主治医生名录

PRACTITIONER

MACIAS, ALISSA

Provider ID: 206426

Provider Gender: Female


License Number: NP21368


NPI: 1952658445


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
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American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 206426

Provider Gender: Female

License Number: NM235844


NPI: 1407287469


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER
Board Certified Specialty: No

IHP of Southern Cal-PHP
TRUECARE

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Min/Max Age: 0\150

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

CERTIFIED REGISTERED

NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 206426

Provider Gender: Female

License Number: NM235844


NPI: 1407287469


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER
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Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

CERTIFIED REGISTERED

NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 206426

Provider Gender: Female

License Number: NM235844

NPI: 1407287469





 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER
Board Certified Specialty: No


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TRUECARE

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D2. 主治医生名录

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CERTIFIED REGISTERED NURSE MIDWIFE **BELANGER, TANYA**






Provider ID: 206426
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
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 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA



Provider ID: 206426
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR

MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPREDA RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

FAMILY PRACTICE **NATH, DEVARSHI**

Provider ID: 614511
Provider Gender: Male
License Number: C54157
NPI: 1275630618
 Provider English Spoken: Y
 Provider Language(s) Spoken: Bengali
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

D2. 主治医生名录

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 614511

Provider Gender: Male

License Number: C54157

NPI: 1275630618

Provider English Spoken: Y


Provider Language(s) Spoken: Bengali

Cultural Competency: N

Board Certified Specialty: No IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 614511

Provider Gender: Male

License Number: C54157

NPI: 1275630618

Provider English Spoken: Y

Provider Language(s) Spoken: Bengali


Cultural Competency: N

Board Certified Specialty: No

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NATH, DEVARSHI

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License Number: C54157

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PROVIDER

FAMILY PRACTICE

NATH, DEVARSHI

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D2. 主治医生名录

TRUECARE

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Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FQHC

TRUECARE,

Provider ID: 614511

NPI: 1245246917

Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

TRUECARE

1595 GRAND AVE STE 106
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Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

TRUECARE,

Provider ID: 614511

NPI: 1598484255

Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

TRUECARE

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Hours: M-F 8:00AM-5:00PM

FQHC

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Cultural Competency: N

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Hours: M-F 8:00AM-5:00PM

FQHC

TRUECARE,

Provider ID: 614511

NPI: 1811617939

Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

TRUECARE

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FQHC

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American Sign Language (ASL):

D2. 主治医生名录

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Hours: M-F 8:00AM-5:00PM

FQHC

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D2. 主治医生名录

FQHC

TRUECARE,

Provider ID: 206426


NPI: 1598484255

Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

TRUECARE

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

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 Accessibility: CONTACT
PROVIDER

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FQHC

TRUECARE,

Provider ID: 206426


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Provider English Spoken: Y
Cultural Competency: N

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736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1184735201

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

GENERAL PRACTICE

WITCZAK, IZABELA

Provider ID: 206426

Provider Gender: Female

License Number: A71311

NPI: 1184735201

Provider English Spoken: Y

Provider Language(s)

Spoken: Polish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL


ENCINITAS


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

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736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

GENERAL PRACTICE

WITCZAK, IZABELA

Provider ID: 206426

Provider Gender: Female

License Number: A71311

Provider English Spoken: Y

Provider Language(s)
Spoken: Polish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL


ENCINITAS


Board Certified Specialty: No

IHP of Southern Cal-PHP

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 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

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 Accessibility: CONTACT
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GENERAL PRACTICE

WITCZAK, IZABELA

Provider ID: 206426

Provider Gender: Female

License Number: A71311

NPI: 1184735201

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Provider Language(s)
Spoken: Polish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE



 150 VALPRED A RD


D2. 主治医生名录

SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

GENERAL PRACTICE



WITCZAK, IZABELA



Provider ID: 206426
Provider Gender: Female
License Number: A71311
NPI: 1184735201
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Polish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
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GENERAL PRACTICE



WITCZAK, IZABELA

Provider ID: 206426
Provider Gender: Female
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 Provider English Spoken: Y
 Provider Language(s)
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MEMORIAL HOSPITAL
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American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 206426
Provider Gender: Male
License Number: G74757
NPI: 1467485078
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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D2. 主治医生名录

INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 206426

Provider Gender: Male

License Number: G74757

NPI: 1467485078

Provider English Spoken: Y

Provider Language(s)
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INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 206426

Provider Gender: Male

License Number: G74757

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Provider Language(s)
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Cultural Competency: N

Board Certified Specialty: No

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INTERNAL MEDICINE

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Provider ID: 206426

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License Number: G74757

NPI: 1467485078

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Provider Language(s)
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INTERNAL MEDICINE

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INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 206426

Provider Gender: Male

License Number: G74757

NPI: 1467485078

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. 主治医生名录

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

Provider ID: 206426

Provider Gender: Female

License Number: A97181

NPI: 1154477628

Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

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License Number: A97181

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Provider English Spoken: Y
Provider Language(s)
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Cultural Competency: N

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OBSTETRICS / GYNECOLOGY

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D2. 主治医生名录

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

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License Number: A97181

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Provider Language(s)
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Hospital Affiliation: PALOMAR
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PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

Provider ID: 206426

Provider Gender: Female

License Number: A97181

NPI: 1154477628

Provider English Spoken: Y


Provider Language(s)
Spoken: Farsi, Spanish


Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 206426

Provider Gender: Female

License Number: A93248

NPI: 1174703680

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 206426

Provider Gender: Female

License Number: A93248

NPI: 1174703680

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

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 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 206426

Provider Gender: Female

D2. 主治医生名录

License Number: A93248

NPI: 1174703680

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 206426

Provider Gender: Female

License Number: A93248

NPI: 1174703680

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
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American Sign Language (ASL):
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 Accessibility: CONTACT
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OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 206426

Provider Gender: Female

License Number: A93248

NPI: 1174703680

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Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
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OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 206426

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

MALHOTRA, ARATI

Provider ID: 110242

Provider Gender: Female

NPI: 1215135306

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

D2. 主治医生名录

Board Certified Specialty: No
Rady Childrens Health Network N

ARATI MALHOTRA

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 566-1501

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

PEDIATRICS

MALHOTRA, ARATI

Provider ID: 206426

Provider Gender: Female

License Number: A63903

NPI: 1215135306

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

PEDIATRICS

MALHOTRA, ARATI

Provider ID: 206426

Provider Gender: Female

License Number: A63903

NPI: 1215135306

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

MALHOTRA, ARATI

Provider ID: 206426

Provider Gender: Female

License Number: A63903

NPI: 1215135306

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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Min/Max Age: 0\150

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Accessibility: CONTACT
PROVIDER

PEDIATRICS

MALHOTRA, ARATI

Provider ID: 206426

Provider Gender: Female

License Number: A63903

NPI: 1215135306

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

D2. 主治医生名录

☎ After Hours Phone: (760) 736-6767

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

PEDIATRICS

MALHOTRA, ARATI

Provider ID: 206426

Provider Gender: Female

License Number: A63903

NPI: 1215135306

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

☎ After Hours Phone: (760)
736-6767

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

PEDIATRICS

MALHOTRA, ARATI

Provider ID: 206426

Provider Gender: Female

License Number: A63903

NPI: 1215135306

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

☎ After Hours Phone: (760)
736-6767

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

PEDIATRICS

MATIAS, JULIE

Provider ID: 661065

Provider Gender: Female

NPI: 1083094510

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Rady Childrens Health Network
JULIE M MATIAS

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767
Fax: (760) 736-6744

☎ After Hours Phone: (760)
736-6767

🌐 Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-6:00PM

TU 8:00AM-5:00PM

W-F 8:00AM-6:00PM

SA 8:00AM-5:00PM

PEDIATRICS

MONAHAN, CAROLYN

Provider ID: 50425

Provider Gender: Female

NPI: 1619973666

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: Yes

Rady Childrens Health Network
CAROLYN O MONAHAN

📍 1582 W SAN MARCOS BLVD
STE 203

SAN MARCOS, CA 92078

☎ Phone: (760) 744-6710

Fax: (760) 744-6156

☎ After Hours Phone: (760)
744-6710


🌐 Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

D2. 主治医生名录



N



 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PEDIATRICS


NEVES, VANESSA

Provider ID: 143763
Provider Gender: Female
NPI: 1174672547

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
Rady Childrens Health Network
VANESSA L NEVES


 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
Fax: (760) 736-6797

 *After Hours Phone: (760) 736-6767*

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):



N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM


PEDIATRICS


POSADAS, EMERITO

Provider ID: 206426
Provider Gender: Male
License Number: A48980
NPI: 1720093198

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish, Tagalog*

Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
 *After Hours Phone: (760) 736-6767*



 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

PEDIATRICS



POSADAS, EMERITO


Provider ID: 206426
Provider Gender: Male
License Number: A48980
NPI: 1720093198

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish, Tagalog*
Cultural Competency: N


Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*
 *After Hours Phone: (760) 736-6767*

 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):



N

 *Accessibility: CONTACT PROVIDER*



PEDIATRICS

POSADAS, EMERITO


Provider ID: 303661
Provider Gender: Male
NPI: 1720093198

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish, Tagalog*
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER


Board Certified Specialty: No
Rady Childrens Health Network
EMERITO D POSADAS

 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
Fax: (760) 566-1501

 *After Hours Phone: (760) 736-6767*

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-6:00PM

PEDIATRICS

D2. 主治医生名录

POSADAS, EMERITO

Provider ID: 206426

Provider Gender: Male

License Number: A48980

NPI: 1720093198

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD

SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

POSADAS, EMERITO

Provider ID: 206426

Provider Gender: Male

License Number: A48980

NPI: 1720093198

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

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PEDIATRICS

POSADAS, EMERITO

Provider ID: 206426

Provider Gender: Male

License Number: A48980

NPI: 1720093198

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER


Board Certified Specialty: No


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TRUECARE

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

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PEDIATRICS

POSADAS, EMERITO

Provider ID: 206426

Provider Gender: Male

License Number: A48980

NPI: 1720093198

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

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 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

QUINTERO, CAROLYN

Provider ID: 614767

Provider Gender: Female

NPI: 1023033156

Provider English Spoken: Y

Provider Language(s)

Spoken: Afar, Spanish

Cultural Competency: N

D2. 主治医生名录

Board Certified Specialty: No
Rady Childrens Health Network
CAROLYN S QUINTERO

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-5:00PM

PEDIATRICS

SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

D2. 主治医生名录

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Board Certified Specialty: No
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

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Accessibility: CONTACT
PROVIDER

PEDIATRICS

SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SOCHA, TRACI

Provider ID: 428861

Provider Gender: Female

NPI: 1669478616

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
Rady Childrens Health Network
TRACI E SOCHA

1582 W SAN MARCOS BLVD
STE 203

SAN MARCOS, CA 92078

Phone: (760) 744-6710

Fax: (760) 744-6156

After Hours Phone: (760)
744-6710

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:45PM

PHYSICIANS ASSISTANT

BERNARDO, RACHELLE

Provider ID: 614511

Provider Gender: Female

License Number: PA17718

NPI: 1821237678

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

D2. 主治医生名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT


BERNARDO, RACHELLE

Provider ID: 614511

Provider Gender: Female

License Number: PA17718

NPI: 1821237678

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767


 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT


BERNARDO, RACHELLE

Provider ID: 614511

Provider Gender: Female

License Number: PA17718

NPI: 1821237678

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP

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D2. 主治医生名录

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N

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PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 206426

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

 Provider English Spoken: Y


Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

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 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

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PROVIDER

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PHYSICIANS ASSISTANT

KOSEL, MATTHEW

Provider ID: 206426

Provider Gender: Male

License Number: PA17101


NPI: 1316947302


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

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Min/Max Age: 0\150

American Sign Language (ASL):
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D2. 主治医生名录

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

KOSEL, MATTHEW

Provider ID: 206426

Provider Gender: Male


License Number: PA17101


NPI: 1316947302


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IHP of Southern Cal-PHP
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PHYSICIANS ASSISTANT


RUSSO, KRISTA

Provider ID: 206426

Provider Gender: Female

License Number: PA53036


NPI: 1922471192


 *Provider English Spoken: Y*


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
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Min/Max Age: 0\150

American Sign Language (ASL):
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 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT

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Provider ID: 206426

Provider Gender: Female


License Number: PA53036


NPI: 1922471192


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 *Accessibility: CONTACT*

D2. 主治医生名录

PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM




PHYSICIANS ASSISTANT


RUSSO, KRISTA

Provider ID: 206426
Provider Gender: Female
License Number: PA53036
NPI: 1922471192

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

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SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT



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Provider ID: 206426
Provider Gender: Female
License Number: PA53036
NPI: 1922471192

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

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 After Hours Phone: (760)
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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM




PHYSICIANS ASSISTANT


RUSSO, KRISTA

Provider ID: 206426
Provider Gender: Female
License Number: PA53036
NPI: 1922471192

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
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PROVIDER

Hours: M-F 8:00AM-5:00PM
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PHYSICIANS ASSISTANT



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Provider ID: 206426
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Provider English Spoken: Y
Cultural Competency: N
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 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT

SPENCE, JAMIE


Provider ID: 206426
Provider Gender: Female
License Number: PA21723
NPI: 1518133032

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

D2. 主治医生名录

 After Hours Phone: (760) 736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

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SPENCE, JAMIE

Provider ID: 206426

Provider Gender: Female

License Number: PA21723

NPI: 1518133032

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 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


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D2. 主治医生名录

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American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH

Provider ID: 206426

Provider Gender: Female

License Number: PA51867

NPI: 1295147387

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

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Hours: M-F 8:00AM-5:00PM

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Hours: M-F 8:00AM-5:00PM
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PODIATRIST

DASGUPTA, DEBORSHI

Provider ID: 614511

Provider Gender: Male

License Number: DPM5542

NPI: 1598129223

Provider English Spoken: Y


Provider Language(s)
Spoken: Bengali, Hindi,
Spanish

Cultural Competency: N


Hospital Affiliation: CLOVIS
COMMUNITY HOSPITAL,
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
FRESNO HEART AND
SURGICAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

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COMMUNITY HOSPITAL,
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
FRESNO HEART AND
SURGICAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

D2. 主治医生名录

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PODIATRIST



DASGUPTA, DEBORSHI

Provider ID: 614511

Provider Gender: Male

License Number: DPM5542

NPI: 1598129223

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Bengali, Hindi, Spanish*

Cultural Competency: N


Hospital Affiliation: CLOVIS


COMMUNITY HOSPITAL, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, FRESNO HEART AND SURGICAL HOSPITAL


Board Certified Specialty: No IHP of Southern Cal-PHP

TRUECARE

 *1595 GRAND AVE STE 106 SAN MARCOS, CA 92078*

 *Phone: (760) 736-6767*

 *After Hours Phone: (760) 736-6767*

 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

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 *Accessibility: CONTACT PROVIDER*

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Hospital Affiliation: CLOVIS


COMMUNITY HOSPITAL, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, FRESNO HEART AND SURGICAL HOSPITAL

Board Certified Specialty: No IHP of Southern Cal-PHP

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COMMUNITY HOSPITAL, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, FRESNO HEART AND SURGICAL HOSPITAL

Board Certified Specialty: No IHP of Southern Cal-PHP
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PODIATRIST



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Provider Gender: Male

License Number: DPM5542

NPI: 1598129223

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Bengali, Hindi, Spanish*

Cultural Competency: N

Hospital Affiliation: CLOVIS

COMMUNITY HOSPITAL, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, FRESNO HEART AND SURGICAL HOSPITAL

D2. 主治医生名录

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SAN YSIDRO

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 206292

Provider Gender: Female

License Number: C52581

NPI: 1053300251

Provider English Spoken: Y

Provider Language(s)
Spoken: Cambodian, Hindi,
Spanish, Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

/clinics/san- ysidro- health
- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 206292

Provider Gender: Female

License Number: C52581

NPI: 1053300251

Provider English Spoken: Y

Provider Language(s)
Spoken: Cambodian, Hindi,
Spanish, Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

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Phone: (619) 662-4100

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662-4100

Website: www.syhealth.org
/clinics/san- ysidro- health
- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CARDIOVASCULAR DISEASE

PONCE, SONIA

Provider ID: 206292

Provider Gender: Female

License Number: A145008

NPI: 1164659033

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org
/clinics/san- ysidro- health
- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CARDIOVASCULAR DISEASE

PONCE, SONIA

Provider ID: 206292

Provider Gender: Female

License Number: A145008

NPI: 1164659033


Provider English Spoken: Y


Provider Language(s)

D2. 主治医生名录

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL



Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER **CELIZ, ADRIANA**

Provider ID: 227469
Provider Gender: Female
License Number: NP95004315
NPI: 1972956514



 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER **CELIZ, ADRIANA**

Provider ID: 227469
Provider Gender: Female
License Number: NP95004315
NPI: 1972956514


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

 3364 BEYER BLVD
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 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER **CHAUSSE CASTRO, EKATERINA**

Provider ID: 227469
Provider Gender: Female
License Number: NP95018617
NPI: 1154040418


 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER **CHAUSSE CASTRO, EKATERINA**

Provider ID: 227469
Provider Gender: Female
License Number: NP95018617
NPI: 1154040418

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No

D2. 主治医生名录

IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

GARCIA, TEDAYSHIA

Provider ID: 206292
Provider Gender: Female
License Number: NP95003355
NPI: 1659730778
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

GARCIA, TEDAYSHIA

Provider ID: 206292
Provider Gender: Female
License Number: NP95003355
NPI: 1659730778
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

GUADARRAMA, IGNACIO

Provider ID: 227469
Provider Gender: Male




License Number: NP95003671
NPI: 1821331174
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

GUADARRAMA, IGNACIO

Provider ID: 227469
Provider Gender: Male
License Number: NP95003671
NPI: 1821331174
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100

D2. 主治医生名录


 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

HACINAS, REYNALDO

Provider ID: 206292
Provider Gender: Male
License Number: NP95003024
NPI: 1215304860

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER


 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER





CERTIFIED NURSE


PRACTITIONER

HACINAS, REYNALDO

Provider ID: 206292
Provider Gender: Male
License Number: NP95003024
NPI: 1215304860

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center



Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

IBARRA, MARTHA

Provider ID: 206292
Provider Gender: Female
License Number: NP12112
NPI: 1114957289

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, CHULA VISTA
Board Certified Specialty: No




IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
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 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE





PRACTITIONER

IBARRA, MARTHA

Provider ID: 227469
Provider Gender: Female
License Number: NP12112
NPI: 1114957289







 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 3364 BEYER BLVD
SAN YSIDRO, CA 92173

D2. 主治医生名录

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE **PRACTITIONER**








IBARRA, MARTHA

Provider ID: 227469
Provider Gender: Female
License Number: NP12112
NPI: 1114957289
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 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
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Medi-Cal Open Panel: Yes
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American Sign Language (ASL):
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CERTIFIED NURSE **PRACTITIONER**

IBARRA, MARTHA

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Provider Gender: Female
License Number: NP12112
NPI: 1114957289
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 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
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YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM


CERTIFIED NURSE **PRACTITIONER**

KANTAS, PARIS

Provider ID: 206292
Provider Gender: Male
License Number: NP18661
NPI: 1114329612
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE **PRACTITIONER**

KANTAS, PARIS

Provider ID: 206292
Provider Gender: Male
License Number: NP18661
NPI: 1114329612
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP

D2. 主治医生名录

CORONADO HOSP AND
HEALTHCARE CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

ORDINANZA, MYLENE

Provider ID: 227469
Provider Gender: Female
License Number: NP95019995
NPI: 1265019061

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

ORDINANZA, MYLENE

Provider ID: 227469
Provider Gender: Female
License Number: NP95019995
NPI: 1265019061

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

PITTMAN, LILIANA

Provider ID: 227469
Provider Gender: Female
License Number: NP95017732
NPI: 1326599002

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

3364 BEYER BLVD
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After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER



PITTMAN, LILIANA

Provider ID: 227469
Provider Gender: Female
License Number: NP95017732
NPI: 1326599002

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)


D2. 主治医生名录

662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

SANCHEZ, MYRNA

Provider ID: 227469
Provider Gender: Female
License Number: NP95003721
NPI: 1548614506
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS


 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

SANCHEZ, MYRNA

Provider ID: 227469



Provider Gender: Female
License Number: NP95003721
NPI: 1548614506
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS



 3364 BEYER BLVD
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 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER




CERTIFIED NURSE

PRACTITIONER

VAZQUEZ-ERLBECK, MARTHA

Provider ID: 227469
Provider Gender: Female
License Number: NP95001960
NPI: 1669865960
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS



 3364 BEYER BLVD
SAN YSIDRO, CA 92173
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

VAZQUEZ-ERLBECK, MARTHA

Provider ID: 227469
Provider Gender: Female
License Number: NP95001960
NPI: 1669865960
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CHIROPRACTOR

OCHOA, RAUL

D2. 主治医生名录

Provider ID: 206292

Provider Gender: Male

License Number: DC33693

NPI: 1518401827

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

OCHOA, RAUL

Provider ID: 206292

Provider Gender: Male

License Number: DC33693

NPI: 1518401827

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

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YSIDRO HEALTH CENTER



4004 BEYER BLVD
SAN YSIDRO, CA 92173



Phone: (619) 662-4100



After Hours Phone: (619)
662-4100



Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

CRUZ, MICHAEL

Provider ID: 206292

Provider Gender: Male

License Number: A138772

NPI: 1265851133

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173



Phone: (619) 662-4100



After Hours Phone: (619)
662-4100



Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

CRUZ, MICHAEL

Provider ID: 206292

Provider Gender: Male

License Number: A138772

NPI: 1265851133

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Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

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SAN YSIDRO, CA 92173



Phone: (619) 662-4100



After Hours Phone: (619)
662-4100




Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ALGHAMDI, ASMA

Provider ID: 227469

Provider Gender: Female

D2. 主治医生名录

License Number: A167529

NPI: 1316310840


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ALGHAMDI, ASMA

Provider ID: 227469

Provider Gender: Female

License Number: A167529

NPI: 1316310840


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HLTH SAN DIEGO

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662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


ALVAREZ-ESTRADA, MIGUEL

Provider ID: 206292

Provider Gender: Male

License Number: A157505

NPI: 1588197826

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, PARADISE VALLEY
HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL


Provider ID: 227411

Provider Gender: Male

License Number: A157505

NPI: 1588197826

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, PARADISE VALLEY
HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD

HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL



Provider ID: 227411

Provider Gender: Male




License Number: A157505


NPI: 1588197826

D2. 主治医生名录

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL, PARADISE VALLEY
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
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 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinic/s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE



ALVAREZ-ESTRADA, MIGUEL

Provider ID: 206292

Provider Gender: Male

License Number: A157505

NPI: 1588197826



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL, PARADISE VALLEY
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
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 Phone: (619) 662-4100
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662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE



ARRIETA, NOEMI

Provider ID: 206292

Provider Gender: Female


License Number: 20A11153



NPI: 1912223496


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE



ARRIETA, NOEMI

Provider ID: 206292

Provider Gender: Female


License Number: 20A11153



NPI: 1912223496


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 主治医生名录



N

 **Accessibility: CONTACT PROVIDER**
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM




FAMILY PRACTICE


BAUM, PETER

Provider ID: 227411
Provider Gender: Male
License Number: 20A14949
NPI: 1174919971


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N



 **Accessibility: CONTACT PROVIDER**
Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE


BAUM, PETER


Provider ID: 227411
Provider Gender: Male

License Number: 20A14949
NPI: 1174919971


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

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662-4100

 Website: syhealth.org/clinics/maternal-child-health-center



Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 **Accessibility: CONTACT PROVIDER**
Hours: M-F 8:30AM-5:00PM





FAMILY PRACTICE

BORSAN, COSMIN


Provider ID: 206292
Provider Gender: Male
License Number: 20A17643
NPI: 1679060255

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Romanian

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center



Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 **Accessibility: CONTACT PROVIDER**
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM



FAMILY PRACTICE


BORSAN, COSMIN

Provider ID: 206292
Provider Gender: Male
License Number: 20A17643
NPI: 1679060255

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Romanian

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER


 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

D2. 主治医生名录

N





 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

CAMPOS, MELISSA


Provider ID: 227411
Provider Gender: Female
License Number: A138474
NPI: 1427475318

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: syhealth.org/clinics/maternal-child-health-center*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*





FAMILY PRACTICE

CAMPOS, MELISSA

Provider ID: 227411
Provider Gender: Female
License Number: A138474
NPI: 1427475318

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: syhealth.org/clinics/maternal-child-health-center*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


CARRIEDO-CENICEROS, MARIA

Provider ID: 206292
Provider Gender: Female
License Number: A78373
NPI: 1295746618


Provider English Spoken: Y

Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*
Fax: (619) 205-6341

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org/clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


FAMILY PRACTICE


CARRIEDO-CENICEROS, MARIA

Provider ID: 206292
Provider Gender: Female
License Number: A78373
NPI: 1295746618




Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*
Fax: (619) 205-6341

D2. 主治医生名录

 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


CASTILLO, STEPHANIE

Provider ID: 206292
Provider Gender: Female
License Number: A159673
NPI: 1902330723
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE



CASTILLO, STEPHANIE

Provider ID: 206292
Provider Gender: Female
License Number: A159673
NPI: 1902330723
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

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 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

CEVALLOS, JAMES





Provider ID: 206292
Provider Gender: Male
License Number: A55469
NPI: 1720181829
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6341
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CEVALLOS, JAMES








Provider ID: 206292
Provider Gender: Male
License Number: A55469
NPI: 1720181829
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6341

D2. 主治医生名录

 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER



FAMILY PRACTICE






CORONADO, MYRNA

Provider ID: 206292
Provider Gender: Female
License Number: A112627
NPI: 1710147566
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



CORONADO, MYRNA

Provider ID: 227411
Provider Gender: Female
License Number: A112627
NPI: 1710147566
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP
SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR




 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CORONADO, MYRNA







Provider ID: 227411
Provider Gender: Female
License Number: A112627
NPI: 1710147566
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


CORONADO, MYRNA

Provider ID: 206292
Provider Gender: Female
License Number: A112627
NPI: 1710147566
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
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 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

D2. 主治医生名录

American Sign Language (ASL): NPI: 1962662718

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


DALUGDUGAN, ESTHER


Provider ID: 206292

Provider Gender: Female

License Number: A112511

NPI: 1962662718

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1194840231

N

 Accessibility: CONTACT PROVIDER


FAMILY PRACTICE

DALUGDUGAN, ESTHER

Provider ID: 206292

Provider Gender: Female

License Number: A112511

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


FAMILY PRACTICE

DAVIS, CHARLES

Provider ID: 206292

Provider Gender: Male

License Number: G41219

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER


 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

DAVIS, CHARLES

Provider ID: 206292

Provider Gender: Male

License Number: G41219

NPI: 1194840231

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

D2. 主治医生名录

FAMILY PRACTICE

ESTRADA, JOHANNA

Provider ID: 206292

Provider Gender: Female

License Number: A127188

NPI: 1255698155

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS GREEN

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

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 Phone: (619) 662-4100

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662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

ESTRADA, JOHANNA

Provider ID: 206292

Provider Gender: Female

License Number: A127188

NPI: 1255698155

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS GREEN

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

HEINRICI, ALEKA

Provider ID: 206292

Provider Gender: Female

License Number: A125329

NPI: 1780979120

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


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662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

HEINRICI, ALEKA

Provider ID: 206292

Provider Gender: Female

License Number: A125329

NPI: 1780979120

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN



YSIDRO HEALTH CENTER

D2. 主治医生名录

 4004 BEYER BLVD
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

HENDRIX, JEFFERSON



Provider ID: 227469
Provider Gender: Male
License Number: A32571
NPI: 1235142738
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS


 3364 BEYER BLVD
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 Phone: (619) 662-4100
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



HENDRIX, JEFFERSON

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IHP of Southern Cal-PHP
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

HERNANDEZ, RALPH



Provider ID: 227469
Provider Gender: Male
License Number: C42207
NPI: 1285782151
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

HERNANDEZ, RALPH

Provider ID: 227469
Provider Gender: Male
License Number: C42207
NPI: 1285782151
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

D2. 主治医生名录

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


HERNANDEZ, RALPH

Provider ID: 206292

Provider Gender: Male

License Number: C42207

NPI: 1285782151

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N


*Board Certified Specialty: No
IHP of Southern Cal-PHP*

*SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER*

 *4004 BEYER BLVD
SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

 *Website: www.syhealth.org
/clinics/san-ysidro-health
-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE


HERNANDEZ, RALPH

Provider ID: 206292

Provider Gender: Male

License Number: C42207

NPI: 1285782151


 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N

*Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER*

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 *Phone: (619) 662-4100*

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662-4100*

 *Website: www.syhealth.org
/clinics/san-ysidro-health
-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE


KAUFHOLD, ANNE


Provider ID: 206292

Provider Gender: Female

License Number: A88893

NPI: 1164508073

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Arabic, Spanish*


Cultural Competency: N


*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA*

*Board Certified Specialty: No
IHP of Southern Cal-PHP*

*SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER*

 *4004 BEYER BLVD
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 *After Hours Phone: (619)
662-4100*

 *Website: www.syhealth.org*

*/clinics/san-ysidro-health
-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE

KAUFHOLD, ANNE


Provider ID: 206292

Provider Gender: Female

License Number: A88893

NPI: 1164508073


 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N*


*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA*

*Board Certified Specialty: No
IHP of Southern Cal-PHP
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 *Website: www.syhealth.org
/clinics/san-ysidro-health
-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE

D2. 主治医生名录

LARA, LESLEY

Provider ID: 206292

Provider Gender: Female

License Number: A173435

NPI: 1184112682

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

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662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-4:00PM

M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

FAMILY PRACTICE

LARA, LESLEY

Provider ID: 206292

Provider Gender: Female

License Number: A173435

NPI: 1184112682

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-4:00PM

M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

FAMILY PRACTICE

LEE, JOSEPH

Provider ID: 206292

Provider Gender: Male

License Number: A164201

NPI: 1417480948

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: ST

ELIZABETH HOSP

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD


SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)

662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

LEE, JOSEPH

Provider ID: 206292

Provider Gender: Male

License Number: A164201

NPI: 1417480948

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: ST

ELIZABETH HOSP

Board Certified Specialty: No


IHP of Southern Cal-PHP

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YSIDRO HEALTH CENTER


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662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N







 Accessibility: CONTACT

D2. 主治医生名录

PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM


FAMILY PRACTICE





LEE, JOSEPH

Provider ID: 227469
Provider Gender: Male
License Number: A164201
NPI: 1417480948
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: ST
ELIZABETH HOSP
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE





LEE, JOSEPH




Provider ID: 227469
Provider Gender: Male
License Number: A164201
NPI: 1417480948
 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ST
ELIZABETH HOSP
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LEPEZ, DAVID

Provider ID: 206292
Provider Gender: Male
License Number: A130348
NPI: 1205196029
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
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YSIDRO HEALTH CENTER
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 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LEPEZ, DAVID





Provider ID: 206292
Provider Gender: Male
License Number: A130348
NPI: 1205196029
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
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662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT

D2. 主治医生名录

PROVIDER	Provider Gender: Male	Spoken: Spanish
<p><u>FAMILY PRACTICE</u></p> <p>LEUTE, ERIC Provider ID: 206292 Provider Gender: Male License Number: A80832 NPI: 1720171507</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER <input type="checkbox"/> 4004 BEYER BLVD SAN YSIDRO, CA 92173 <input type="checkbox"/> Phone: (619) 662-4100 <input type="checkbox"/> After Hours Phone: (619) 662-4100 <input type="checkbox"/> Website: www.syhealth.org /clinics/san-ysidro-health-center Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:30PM SA 8:30AM-2:00PM</p> <p><u>FAMILY PRACTICE</u></p> <p>LEUTE, ERIC Provider ID: 206292</p>	<p>Provider Gender: Male License Number: A80832 NPI: 1720171507</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER <input type="checkbox"/> 4004 BEYER BLVD SAN YSIDRO, CA 92173 <input type="checkbox"/> Phone: (619) 662-4100 <input type="checkbox"/> After Hours Phone: (619) 662-4100 <input type="checkbox"/> Website: www.syhealth.org /clinics/san-ysidro-health-center Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:30PM SA 8:30AM-2:00PM</p> <p><u>FAMILY PRACTICE</u></p> <p>MOYA, MARY Provider ID: 206292 Provider Gender: Female License Number: A80185 NPI: 1093844417</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA Board Certified Specialty: No IHP of Southern Cal-PHP</p>	<p>Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER <input type="checkbox"/> 4004 BEYER BLVD SAN YSIDRO, CA 92173 <input type="checkbox"/> Phone: (619) 662-4100 <input type="checkbox"/> After Hours Phone: (619) 662-4100 <input type="checkbox"/> Website: www.syhealth.org /clinics/san-ysidro-health-center Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER</p> <p><u>FAMILY PRACTICE</u></p> <p>MOYA, MARY Provider ID: 206292 Provider Gender: Female License Number: A80185 NPI: 1093844417</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA Board Certified Specialty: No IHP of Southern Cal-PHP</p>

D2. 主治医生名录

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


NAVARRO, VANESSAMARIA


Provider ID: 227469

Provider Gender: Female

License Number: A113624

NPI: 1952563421

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Filipino, Spanish,
Tagalog

Cultural Competency: N



Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 3364 BEYER BLVD
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 Website: <https://www.syhealth.org/locations>

[alth.org/locations](https://www.syhealth.org/locations)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


NAVARRO, VANESSAMARIA


Provider ID: 227469

Provider Gender: Female

License Number: A113624

NPI: 1952563421

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Filipino, Spanish,
Tagalog

Cultural Competency: N




Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

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 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, CARIE

Provider ID: 206292

Provider Gender: Female

License Number: A106103

NPI: 1174781132




 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

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SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

NGUYEN, CARIE

Provider ID: 206292

Provider Gender: Female

License Number: A106103

NPI: 1174781132

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

D2. 主治医生名录

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

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Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

NIKZAD, JASON

Provider ID: 206292

Provider Gender: Male

License Number: 20A12653

NPI: 1508121674

Provider English Spoken: Y

Provider Language(s)

Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

NIKZAD, JASON

Provider ID: 206292

Provider Gender: Male

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NPI: 1508121674

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Provider Language(s)

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Cultural Competency: N

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MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

ORTEGA, LUIS

Provider ID: 206292

Provider Gender: Male

License Number: A180886

NPI: 1558924936

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
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FAMILY PRACTICE

ORTEGA, LUIS


Provider ID: 206292

Provider Gender: Male

License Number: A180886

D2. 主治医生名录

NPI: 1558924936

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


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Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

ORTIZ, KENNETH

Provider ID: 206292

Provider Gender: Male

License Number: A156607

NPI: 1356761571

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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ORTIZ, KENNETH

Provider ID: 206292

Provider Gender: Male

License Number: A156607

NPI: 1356761571

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RAJAIPOUR, NEGIN


Provider ID: 227469

Provider Gender: Female

License Number: A145480

NPI: 1508286709

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Farsi, Persian

Cultural Competency: N

Hospital Affiliation: CHULA

VISTA COMM HOSP

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 3364 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RAJAIPOUR, NEGIN

Provider ID: 206292

Provider Gender: Female

D2. 主治医生名录

License Number: A145480

NPI: 1508286709

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Persian

Cultural Competency: N

Hospital Affiliation: CHULA

VISTA COMM HOSP

Board Certified Specialty: No

IHP of Southern Cal-PHP

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PROVIDER

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Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

RITTER, STEVEN

Provider ID: 206292

Provider Gender: Male

License Number: 20A7435

NPI: 1356556021

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RITTER, STEVEN

Provider ID: 206292

Provider Gender: Male

License Number: 20A7435


D2. 主治医生名录


NPI: 1356556021


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


ROJAS, STEVEN

Provider ID: 206292

Provider Gender: Male

License Number: A132982

NPI: 1801230297


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

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 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

[/clinics/san-ysidro-health-center](#)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE


ROJAS, SARAH

Provider ID: 206292

Provider Gender: Female

License Number: A139169


NPI: 1245645076


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
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PROVIDER

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FAMILY PRACTICE

ROJAS, SARAH

Provider ID: 206292

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License Number: A139169

NPI: 1245645076


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 Provider Language(s)
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Cultural Competency: N

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FAMILY PRACTICE

ROJAS, STEVEN

Provider ID: 206292

Provider Gender: Male

License Number: A132982

NPI: 1801230297

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

D2. 主治医生名录







Board Certified Specialty: No
IHP of Southern Cal-PHP
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PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

ROSENBAUM, HERBERT

Provider ID: 206292
Provider Gender: Male
License Number: A169694
NPI: 1922532712
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
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FAMILY PRACTICE

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Provider ID: 206292
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License Number: A169694
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Cultural Competency: N
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IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
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662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM



FAMILY PRACTICE

SALEM, RAMSEY

Provider ID: 206292
Provider Gender: Male
License Number: A158364
NPI: 1245401298
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SALEM, RAMSEY

Provider ID: 206292
Provider Gender: Male
License Number: A158364
NPI: 1245401298
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173

D2. 主治医生名录

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SHAHTAJI, ALAN

Provider ID: 206292
Provider Gender: Male
License Number: 20A11087
NPI: 1972751089
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
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FAMILY PRACTICE

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Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



SNYDER, CHRISTOPHER

Provider ID: 206292
Provider Gender: Male
License Number: 20A7502
NPI: 1922041235
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: PIH Hospital - Downey, JOHN F KENNEDY MEMORIAL HOSP, CEDARS SINAI MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, EISENHOWER MEDICAL CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
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Min/Max Age: 0\150
American Sign Language (ASL): N
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FAMILY PRACTICE

SNYDER, CHRISTOPHER

Provider ID: 206292
Provider Gender: Male
License Number: 20A7502
NPI: 1922041235
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PIH Hospital - Downey, JOHN F KENNEDY MEMORIAL HOSP, CEDARS SINAI MEDICAL

D2. 主治医生名录

CENTER, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
EISENHOWER MEDICAL CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

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662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE **STALEY, MICHAELA**

Provider ID: 206292
Provider Gender: Female
License Number: A157772
NPI: 1912438250
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
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- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE **STALEY, MICHAELA**

Provider ID: 206292
Provider Gender: Female
License Number: A157772
NPI: 1912438250
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE **SWEET, PATRICK**

Provider ID: 206292
Provider Gender: Male
License Number: A101827
NPI: 1457407702

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: HOAG
HOSPITAL IRVINE, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, GROSSMONT
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
DESERT REGIONAL MED CTR,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
PIONEERS MEMORIAL
HOSPITAL, PIONEERS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
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American Sign Language (ASL):
N
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PROVIDER
Hours: M-F 8:00AM-5:30PM
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FAMILY PRACTICE **SWEET, PATRICK**

Provider ID: 206292
Provider Gender: Male
License Number: A101827
NPI: 1457407702

D2. 主治医生名录

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: HOAG
HOSPITAL IRVINE, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, GROSSMONT
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
DESERT REGIONAL MED CTR,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
PIONEERS MEMORIAL
HOSPITAL, PIONEERS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
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American Sign Language (ASL):
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Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

TALAVERA, GREGORY

Provider ID: 206292

Provider Gender: Male

License Number: A40061

NPI: 1740337161

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

FAMILY PRACTICE

TALAVERA, GREGORY

Provider ID: 206292

Provider Gender: Male

License Number: A40061

NPI: 1740337161

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

FAMILY PRACTICE

TAN, LO FU

Provider ID: 227469

Provider Gender: Male

License Number: C170935

NPI: 1356314835

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

3364 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TAN, LO FU

Provider ID: 227469

D2. 主治医生名录

Provider Gender: Male
License Number: C170935
NPI: 1356314835
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TREJO, RAUL

Provider ID: 206292
Provider Gender: Male
License Number: A77936
NPI: 1174534184
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD

SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TREJO, RAUL

Provider ID: 206292
Provider Gender: Male
License Number: A77936
NPI: 1174534184
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
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 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

UTZ, JACK





Provider ID: 206292
Provider Gender: Male
License Number: A183145
NPI: 1194353094
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


FAMILY PRACTICE

UTZ, JACK

Provider ID: 206292
Provider Gender: Male
License Number: A183145
NPI: 1194353094
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

D2. 主治医生名录

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
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662-4100
 Website: [www.syhealth.org](http://www.syhealth.org/clinics/san-ysidro-health-center)
/clinics/san-ysidro-health
- center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

FAMILY PRACTICE


VANHOLLEBEKE, RACHEL

Provider ID: 206292
Provider Gender: Female
License Number: A177337
NPI: 1497217756
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org

/clinics/san-ysidro-health
- center


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM


FAMILY PRACTICE

VANHOLLEBEKE, RACHEL

Provider ID: 206292
Provider Gender: Female
License Number: A177337
NPI: 1497217756
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
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662-4100
 Website: [www.syhealth.org](http://www.syhealth.org/clinics/san-ysidro-health-center)
/clinics/san-ysidro-health
- center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE


VELASQUEZ, SHARON

Provider ID: 206292
Provider Gender: Female
License Number: A71304
NPI: 1972732584
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
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662-4100
 Website: [www.syhealth.org](http://www.syhealth.org/clinics/san-ysidro-health-center)
/clinics/san-ysidro-health
- center


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

FAMILY PRACTICE


VELASQUEZ, SHARON


Provider ID: 206292
Provider Gender: Female
License Number: A71304
NPI: 1972732584
 Provider English Spoken: Y


D2. 主治医生名录


 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA*

Board Certified Specialty: No
IHP of Southern Cal-PHP
*SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER*

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*


 *After Hours Phone: (619)
662-4100*

 *Website: www.syhealth.org
/clinics/san- ysidro- health
- center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT
PROVIDER*


FQHC


**SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR,**

Provider ID: 227411

NPI: 1558852947


 *Provider English Spoken: Y*
Cultural Competency: N
IHP of Southern Cal-PHP
*SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR*

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

Fax: (619) 205-1967

 *After Hours Phone: (619)
662-4100*

 *Website: syhealth.org/clinic
s/maternal- child- health- c
enter*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*


Hours: M-F 8:00AM-5:00PM

FQHC


**SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR,**

Provider ID: 227411

NPI: 1558852947


 *Provider English Spoken: Y*
Cultural Competency: N
IHP of Southern Cal-PHP
*SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR*

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

Fax: (619) 205-1967

 *After Hours Phone: (619)
662-4100*

 *Website: syhealth.org/clinic
s/maternal- child- health- c
enter*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*


Hours: M-F 8:00AM-5:00PM


FQHC


**SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER,**

Provider ID: 206292

NPI: 1952364747


 *Provider English Spoken: Y*
Cultural Competency: N
IHP of Southern Cal-PHP
*SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER*

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

Fax: (619) 205-6305


 *After Hours Phone: (619)
662-4100*

 *Website: www.syhealth.org
/clinics/san- ysidro- health
- center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*


*Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM*

FQHC


**SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER,**

Provider ID: 206292

NPI: 1952364747

 *Provider English Spoken: Y*
Cultural Competency: N
IHP of Southern Cal-PHP
*SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER*

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

D2. 主治医生名录

Fax: (619) 205-6305

☎ After Hours Phone: (619) 662-4100

🌐 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FQHC

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS,

Provider ID: 227469

NPI: 1801438239

☑ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

📍 3364 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

Fax: (619) 600-4870

☎ After Hours Phone: (619) 662-4100

🌐 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS,

Provider ID: 227469

NPI: 1801438239

☑ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

📍 3364 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

Fax: (619) 600-4870

☎ After Hours Phone: (619) 662-4100

🌐 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

GENERAL PRACTICE

REYNAGA, JOSUE

Provider ID: 206292

Provider Gender: Male

License Number: A181644

NPI: 1356929111

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

☎ After Hours Phone: (619) 662-4100

🌐 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

GENERAL PRACTICE

REYNAGA, JOSUE

Provider ID: 206292

Provider Gender: Male

License Number: A181644

NPI: 1356929111

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

☎ After Hours Phone: (619) 662-4100

D2. 主治医生名录

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

GENERAL PRACTICE


TEJEDA, FRANCISCO

Provider ID: 206292

Provider Gender: Male

License Number: A66885

NPI: 1407940075

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

GENERAL PRACTICE


TEJEDA, FRANCISCO

Provider ID: 206292

Provider Gender: Male

License Number: A66885

NPI: 1407940075

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

GYNECOLOGY


CALDERON, JORGE

Provider ID: 206292

Provider Gender: Male

License Number: A40480

NPI: 1407800881

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA


VISTA, LOMPOC VALLEY
MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

GYNECOLOGY

CALDERON, JORGE

Provider ID: 206292

Provider Gender: Male

License Number: A40480

NPI: 1407800881

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA, LOMPOC VALLEY


MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER


 4004 BEYER BLVD

D2. 主治医生名录

 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center



Medi-Cal Open Panel: Yes
Min/Max Age: 0\150





American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INFECTIOUS DISEASE

PROMER, KATHERINE

Provider ID: 206292
Provider Gender: Female
License Number: A131952
NPI: 1306280607
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, PALOMAR MEDICAL CENTER
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center



Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM


INFECTIOUS DISEASE

PROMER, KATHERINE

Provider ID: 206292
Provider Gender: Female
License Number: A131952
NPI: 1306280607
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, PALOMAR MEDICAL CENTER
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM





INTERNAL MEDICINE

ALDOUS, JEANNETTE

Provider ID: 206292
Provider Gender: Female
License Number: A101017
NPI: 1073650339

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


INTERNAL MEDICINE

ALDOUS, JEANNETTE

Provider ID: 206292
Provider Gender: Female
License Number: A101017

D2. 主治医生名录

NPI: 1073650339

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

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 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE


CARPENTERIII, ROBERT

Provider ID: 206292

Provider Gender: Male

License Number: 20A10964

NPI: 1356343040

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

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662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

INTERNAL MEDICINE

CARPENTERIII, ROBERT

Provider ID: 206292

Provider Gender: Male

License Number: 20A10964

NPI: 1356343040

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

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SAN YSIDRO, CA 92173

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662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

INTERNAL MEDICINE

CHEN, TSUH-YIN

Provider ID: 206292

Provider Gender: Female

License Number: C55563

NPI: 1093803520

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER


 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CHEN, TSUH-YIN

D2. 主治医生名录

Provider ID: 206292

Provider Gender: Female

License Number: C55563

NPI: 1093803520

Provider English Spoken: Y


Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CHOW, MAN HUNG

Provider ID: 227469

Provider Gender: Female

License Number: G66745

NPI: 1225149115

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL,


SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CHOW, MAN HUNG

Provider ID: 227469

Provider Gender: Female

License Number: G66745

NPI: 1225149115

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

DELAROSA, JOSE

Provider ID: 206292

Provider Gender: Male

License Number: A49267

NPI: 1689646572

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog
Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER


 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100







 Website: www.syhealth.org/clinics/san-ysidro-health-center

D2. 主治医生名录

- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

DELAROSA, JOSE

Provider ID: 206292
Provider Gender: Male
License Number: A49267
NPI: 1689646572
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


INTERNAL MEDICINE





DILLON, BENEDICT

Provider ID: 227411
Provider Gender: Male
License Number: A111118
NPI: 1710142708
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, CHULA VISTA
COMM HOSP
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE



DILLON, BENEDICT

Provider ID: 227411
Provider Gender: Male
License Number: A111118
NPI: 1710142708
 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, CHULA VISTA
COMM HOSP
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

HURST, MICHAEL

Provider ID: 206292
Provider Gender: Male
License Number: 20A8081
NPI: 1205893104
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SUTTER
TRACY COMMUNITY HOSP,

D2. 主治医生名录

SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-8:00PM
SA 8:00AM-2:00PM

INTERNAL MEDICINE

HURST, MICHAEL

Provider ID: 206292

Provider Gender: Male

License Number: 20A8081

NPI: 1205893104

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SUTTER
TRACY COMMUNITY HOSP,
SCRIPPS MEMORIAL

HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-8:00PM
SA 8:00AM-2:00PM

INTERNAL MEDICINE

KAUFER, DAVID

Provider ID: 206292

Provider Gender: Male

License Number: G80107

NPI: 1710082789

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

INTERNAL MEDICINE

KAUFER, DAVID

Provider ID: 206292

Provider Gender: Male

License Number: G80107

NPI: 1710082789

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

INTERNAL MEDICINE

KAUFER, DAVID

Provider ID: 227469

Provider Gender: Male

D2. 主治医生名录




License Number: G80107
NPI: 1710082789
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS



 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

KAUFER, DAVID

Provider ID: 227469
Provider Gender: Male
License Number: G80107
NPI: 1710082789
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
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662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 206292
Provider Gender: Female
License Number: G71855
NPI: 1124176102
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER



 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 206292

Provider Gender: Female
License Number: G71855
NPI: 1124176102
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER




INTERNAL MEDICINE

MAY, LOUIS

Provider ID: 206292
Provider Gender: Male
License Number: A138568
NPI: 1720497514
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
EISENHOWER MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN

D2. 主治医生名录

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


MAY, LOUIS

Provider ID: 206292

Provider Gender: Male

License Number: A138568

NPI: 1720497514

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): License Number: A99433
NPI: 1538371844

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

PARK, DANIEL

Provider ID: 206292

Provider Gender: Male

License Number: A99433

NPI: 1538371844

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

INTERNAL MEDICINE

PARK, DANIEL

Provider ID: 206292

Provider Gender: Male

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

INTERNAL MEDICINE

POAST, JENNIFER

Provider ID: 206292

Provider Gender: Female

License Number: 20A8245

NPI: 1164435681

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD

D2. 主治医生名录

SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

POAST, JENNIFER

Provider ID: 206292
Provider Gender: Female
License Number: 20A8245
NPI: 1164435681
☑ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

RAMIREZSANCHEZ, CLAUDIA
Provider ID: 206292
Provider Gender: Female
License Number: A160493
NPI: 1659720555
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

RAMIREZSANCHEZ, CLAUDIA
Provider ID: 206292
Provider Gender: Female
License Number: A160493
NPI: 1659720555
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

REDDY, SAMATHHA

Provider ID: 227469
Provider Gender: Female
License Number: A120797
NPI: 1659620854
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Gujarati, Hindi, Punjabi, Spanish, Telugu
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC, GROSSMONT HOSPITAL, SHARP CHULA VISTA MED CTR, ST AGNES MEDICAL

D2. 主治医生名录

CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [https://www.syhe](https://www.syhealth.org/locations)
[alth.org/locations](https://www.syhealth.org/locations)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):


N


 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

REDDY, SAMATHHA

Provider ID: 227469
Provider Gender: Female
License Number: A120797
NPI: 1659620854

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Gujarati, Hindi,
Punjabi, Spanish, Telugu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,
ALVARADO HOSPITAL LLC,
GROSSMONT HOSPITAL,
SHARP CHULA VISTA MED
CTR, ST AGNES MEDICAL
CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [https://www.syhe](https://www.syhealth.org/locations)
[alth.org/locations](https://www.syhealth.org/locations)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):


N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

SALERNO, MARIANA

Provider ID: 206292
Provider Gender: Female
License Number: A131021
NPI: 1598921645

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: Providence

St. Joseph Hospital Eureka


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: [www.syhealth.org](http://www.syhealth.org/clinics/san-ysidro-health-center)
[/clinics/san-ysidro-health](http://www.syhealth.org/clinics/san-ysidro-health-center)
- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

SALERNO, MARIANA

Provider ID: 206292
Provider Gender: Female
License Number: A131021
NPI: 1598921645

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: Providence


St. Joseph Hospital Eureka


Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: [www.syhealth.org](http://www.syhealth.org/clinics/san-ysidro-health-center)
[/clinics/san-ysidro-health](http://www.syhealth.org/clinics/san-ysidro-health-center)
- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N



 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

SCHNEIDER-MUNOZ, MARGARITA

Provider ID: 206292
Provider Gender: Female
License Number: G81461
NPI: 1821299520

D2. 主治医生名录


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE


**SCHNEIDER-MUNOZ,
MARGARITA**

Provider ID: 206292

Provider Gender: Female

License Number: G81461

NPI: 1821299520


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

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SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE


SHEIKH MOHAMED, AMIRA


Provider ID: 227469

Provider Gender: Female

License Number: A153975

NPI: 1831583079

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, French,
Hindi, Italian, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL


CHULA VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

SHEIKH MOHAMED, AMIRA


Provider ID: 227469

Provider Gender: Female

License Number: A153975

NPI: 1831583079

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, French,
Hindi, Italian, Urdu

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL


CHULA VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

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662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

SY, RAMON

Provider ID: 227469

Provider Gender: Male

D2. 主治医生名录

License Number: A51843

NPI: 1982617403

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL,

PARADISE VALLEY HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

3364 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

SY, RAMON

Provider ID: 227469

Provider Gender: Male

License Number: A51843

NPI: 1982617403

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL,

PARADISE VALLEY HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

3364 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

VELAZQUEZ CAMARENA,

MARIA

Provider ID: 206292

Provider Gender: Female

License Number: A56153

NPI: 1518965714

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

VELAZQUEZ CAMARENA,

MARIA

Provider ID: 206292

Provider Gender: Female

License Number: A56153

NPI: 1518965714

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

D2. 主治医生名录

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

WEN, AKI YEN CHANG

Provider ID: 227411

Provider Gender: Male


License Number: 20A12555


NPI: 1205126505


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

WEN, AKI YEN CHANG

Provider ID: 227411

Provider Gender: Male

License Number: 20A12555


NPI: 1205126505


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

GERIATRIC MEDICINE

PANDIT, IVY

Provider ID: 206292

Provider Gender: Female

License Number: C53735

NPI: 1891796165

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: KAISER
FOUNDATION HOSPITAL
RIVERSIDE, RIVERSIDE


COUNTY REGIONAL MED CTR


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 205-1950


 After Hours Phone: (619)
205-1950

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

INTERNAL MEDICINE

GERIATRIC MEDICINE

PANDIT, IVY

Provider ID: 206292

Provider Gender: Female

License Number: C53735

NPI: 1891796165


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: KAISER
FOUNDATION HOSPITAL
RIVERSIDE, RIVERSIDE


COUNTY REGIONAL MED CTR


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 205-1950

 After Hours Phone: (619)
205-1950

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

D2. 主治医生名录

Min/Max Age: 0\150

American Sign Language (ASL): **OBSTETRICS / GYNECOLOGY**

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

OBSTETRICS / GYNECOLOGY

ANDERSON, MANDY

Provider ID: 227411

Provider Gender: Female

License Number: A113914


NPI: 1982812392


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): **BERGGREN, ERICA**

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

ANDERSON, MANDY

Provider ID: 227411

Provider Gender: Female

License Number: A113914


NPI: 1982812392


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

BERGGREN, ERICA

Provider ID: 227411

Provider Gender: Female

License Number: C158543


NPI: 1912159674


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS GREEN
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

BERGGREN, ERICA

Provider ID: 227411

Provider Gender: Female

License Number: C158543

NPI: 1912159674

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

D2. 主治医生名录

MEMORIAL HOSPITAL, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS GREEN
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

CARR, MIANDA

Provider ID: 227411
Provider Gender: Female
License Number: A104660
NPI: 1083815823
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: ST
JOSEPHS MEDICAL CENTER,

SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

CARR, MIANDA

Provider ID: 227411
Provider Gender: Female
License Number: A104660
NPI: 1083815823

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: ST
JOSEPHS MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

CARR, MIANDA

Provider ID: 206292
Provider Gender: Female
License Number: A104660
NPI: 1083815823



Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: ST
JOSEPHS MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100

D2. 主治医生名录

 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


CARR, MIANDA

Provider ID: 206292

Provider Gender: Female

License Number: A104660

NPI: 1083815823

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: ST


JOSEPHS MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


CARSON, LATISA

Provider ID: 206292

Provider Gender: Female

License Number: A72235

NPI: 1245229129

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP


CHULA VISTA MED CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CARSON, LATISA

Provider ID: 206292

Provider Gender: Female

License Number: A72235

NPI: 1245229129

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP


CHULA VISTA MED CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DANESHMAND, SHAHRAM


Provider ID: 227411

Provider Gender: Male

License Number: A63844

NPI: 1891867412

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT





HOSPITAL, SHARP MEMORIAL


HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

D2. 主治医生名录

ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, SCRIPPS GREEN
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR



 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-1948
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:00PM


OBSTETRICS / GYNECOLOGY


DANESHMAND, SHAHRAM

Provider ID: 206292
Provider Gender: Male
License Number: A63844
NPI: 1891867412

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, SCRIPPS GREEN
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER



 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center




Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

OBSTETRICS / GYNECOLOGY

DANESHMAND, SHAHRAM

Provider ID: 206292
Provider Gender: Male
License Number: A63844
NPI: 1891867412


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, SCRIPPS GREEN
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

D2. 主治医生名录

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM


OBSTETRICS / GYNECOLOGY


DANESHMAND, SHAHRAM

Provider ID: 227411
Provider Gender: Male
License Number: A63844
NPI: 1891867412


Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 *4050 BEYER BLVD*
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

Fax: (619) 205-1948

 *After Hours Phone: (619) 662-4100*

 *Website: syhealth.org/clinics/maternal-child-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

DINH, MY

Provider ID: 227411


Provider Gender: Female


License Number: 20A9907


NPI: 1316146996

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 *4050 BEYER BLVD*
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: syhealth.org/clinics/maternal-child-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

DINH, MY

Provider ID: 206292


Provider Gender: Female


License Number: 20A9907


NPI: 1316146996

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 *4004 BEYER BLVD*
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*


 *Website: www.syhealth.org/clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

DINH, MY

Provider ID: 206292

Provider Gender: Female

License Number: 20A9907

NPI: 1316146996

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 *4004 BEYER BLVD*

D2. 主治医生名录

SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY **DINH, MY**

Provider ID: 227411

Provider Gender: Female

License Number: 20A9907

NPI: 1316146996

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

📍 4050 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619) 662-4100

🌐 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

GOLDSTEIN, EDWARD

Provider ID: 227411

Provider Gender: Male

License Number: G20087

NPI: 1982617494

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

📍 4050 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

Fax: (619) 205-1948

🕒 After Hours Phone: (619) 662-4100

🌐 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

GOLDSTEIN, EDWARD

Provider ID: 227411

Provider Gender: Male

License Number: G20087

NPI: 1982617494

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

MATERNAL AND CHILD

HEALTH CTR

📍 4050 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

Fax: (619) 205-1948

🕒 After Hours Phone: (619) 662-4100

🌐 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA



Provider ID: 227411





Provider Gender: Female


License Number: A175006

NPI: 1255878997

D2. 主治医生名录



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR



 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center



Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:00PM


OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA

Provider ID: 206292
Provider Gender: Female
License Number: A175006
NPI: 1255878997
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER



 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA

Provider ID: 206292
Provider Gender: Female
License Number: A175006
NPI: 1255878997
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:00PM





Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM


OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA

Provider ID: 227411
Provider Gender: Female
License Number: A175006
NPI: 1255878997


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

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662-4100
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

JENKINS, ENCHANTA



Provider ID: 227411
Provider Gender: Female
License Number: C143625
NPI: 1285604702
 Provider English Spoken: Y

D2. 主治医生名录

 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: syhealth.org/clinics/maternal-child-health-center*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY



JENKINS, ENCHANTA

Provider ID: 227411
Provider Gender: Female
License Number: C143625
NPI: 1285604702
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: syhealth.org/clinics/maternal-child-health-center*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY



MENDEZ, DIEGO

Provider ID: 227411
Provider Gender: Male
License Number: A47906
NPI: 1437181922
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, Adventist Health Bakersfield, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER, KERN MEDICAL CENTER

Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: syhealth.org/clinics/maternal-child-health-center*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*





OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO


Provider ID: 227411
Provider Gender: Male
License Number: A47906
NPI: 1437181922
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, Adventist Health Bakersfield, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER, KERN MEDICAL CENTER

D2. 主治医生名录

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR




 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


SEFA-BOAKYE, KOFI

Provider ID: 206292
Provider Gender: Male
License Number: G59670
NPI: 1902993660
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD

SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes


Min/Max Age: 0\150

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


SEFA-BOAKYE, KOFI

Provider ID: 206292
Provider Gender: Male
License Number: G59670
NPI: 1902993660
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SHORT, ABIADÉ

Provider ID: 206292
Provider Gender: Male
License Number: A114893
NPI: 1750559589
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

D2. 主治医生名录

OBSTETRICS / GYNECOLOGY


SHORT, ABIADE

Provider ID: 206292

Provider Gender: Male

License Number: A114893

NPI: 1750559589


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY


SKAF, AYHAM


Provider ID: 227469

Provider Gender: Male

License Number: A120584

NPI: 1285888628

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic, Spanish


Cultural Competency: N


Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY


SKAF, AYHAM


Provider ID: 227469

Provider Gender: Male

License Number: A120584

NPI: 1285888628

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL,


SCRIPPS MEMORIAL


HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619) 662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

ACEVEDO, SUSANA

Provider ID: 227411

Provider Gender: Female

License Number: A74960

NPI: 1801971569

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH MATERNAL AND CHILD

HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/maternal-child-health-c

D2. 主治医生名录

enter
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


ACEVEDO, SUSANA

Provider ID: 227411

Provider Gender: Female

License Number: A74960

NPI: 1801971569

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinic/s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


BARBADILLO, FERDINAND

Provider ID: 206292

Provider Gender: Male

License Number: A49307

NPI: 1982662193

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP


CHULA VISTA MED CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-5:30PM

PEDIATRICS


BARBADILLO, FERDINAND


Provider ID: 227411

Provider Gender: Male

License Number: A49307

NPI: 1982662193

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

MATERNAL AND CHILD


HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1948

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinic/s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

BARBADILLO, FERDINAND


Provider ID: 206292

Provider Gender: Male

License Number: A49307

NPI: 1982662193

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N


Hospital Affiliation: SHARP


CHULA VISTA MED CTR


Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

D2. 主治医生名录

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-5:30PM

PEDIATRICS

BARBADILLO, FERDINAND

Provider ID: 227411

Provider Gender: Male

License Number: A49307

NPI: 1982662193

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

MATERNAL AND CHILD


HEALTH CTR

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Fax: (619) 205-1948


 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

CABARLO, JEHRIB

Provider ID: 227411

Provider Gender: Male

License Number: 20A8516

NPI: 1770661340

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD

HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

CABARLO, JEHRIB

Provider ID: 227411

Provider Gender: Male

License Number: 20A8516

NPI: 1770661340

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD

HEALTH CTR

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 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

CHAIT LLAMAS, LWBBA

Provider ID: 227411

Provider Gender: Female

License Number: A138938

NPI: 1134567530

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS

MEMORIAL HOSPITAL





Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

D2. 主治医生名录

MATERNAL AND CHILD HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

CHAIT LLAMAS, LWBBA

Provider ID: 227411

Provider Gender: Female

License Number: A138938

NPI: 1134567530


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS



FUJII, CINDY

Provider ID: 227411

Provider Gender: Female

License Number: G52183




NPI: 1871664821


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

FUJII, CINDY

Provider ID: 227411

Provider Gender: Female

License Number: G52183

NPI: 1871664821

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

GHAHREMANI, SIMIN

Provider ID: 206292

Provider Gender: Female

License Number: C51110

NPI: 1508904657

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Faroese, Farsi

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA
MED CTR, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

D2. 主治医生名录

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

PEDIATRICS

GHAHREMANI, SIMIN

Provider ID: 206292

Provider Gender: Female

License Number: C51110

NPI: 1508904657

Provider English Spoken: Y

Provider Language(s) Spoken: Faroese, Farsi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

PEDIATRICS

HERMAN, ANDREA

Provider ID: 227411

Provider Gender: Female

License Number: A72721

NPI: 1518970037

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-1948

After Hours Phone: (619) 662-4100

Website: syhealth.org/clinic

[s/maternal-child-health-center](http://syhealth.org/clinic)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

HERMAN, ANDREA

Provider ID: 227411

Provider Gender: Female

License Number: A72721

NPI: 1518970037

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

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Fax: (619) 205-1948

After Hours Phone: (619) 662-4100

Website: syhealth.org/clinic
[s/maternal-child-health-center](http://syhealth.org/clinic)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 主治医生名录

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


NISSAN, BETI

Provider ID: 206292

Provider Gender: Female

License Number: A64487

NPI: 1396705299

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Persian

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO, HOLLYWOOD


PRESBYTERIAN MED CTR,
SHARP MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

PEDIATRICS


NISSAN, BETI


Provider ID: 206292

Provider Gender: Female

License Number: A64487

NPI: 1396705299

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Persian

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, HOLLYWOOD


PRESBYTERIAN MED CTR,
SHARP MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

PEDIATRICS


PIANSAY, MARIACORAZON


Provider ID: 206292

Provider Gender: Female

License Number: A93785

NPI: 1669680351

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL


CHULA VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

PIANSAY, MARIACORAZON


Provider ID: 206292

Provider Gender: Female

License Number: A93785

NPI: 1669680351

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL

CHULA VISTA

D2. 主治医生名录

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

RODRIGUEZ, ALDO

Provider ID: 227411

Provider Gender: Male

License Number: A134995

NPI: 1508209651

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

RODRIGUEZ, ALDO

Provider ID: 227411

Provider Gender: Male

License Number: A134995

NPI: 1508209651

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

RUELAS, ROBERTO

Provider ID: 227411

Provider Gender: Male

License Number: A170141

NPI: 1194257386

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
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Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

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Provider ID: 227411

Provider Gender: Male

License Number: A170141





NPI: 1194257386

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD

D2. 主治医生名录

HEALTH CTR


 4050 BEYER BLVD
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662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


SAHMS, TIMOTHY

Provider ID: 227411

Provider Gender: Male

License Number: G51462

NPI: 1780697276

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

MATERNAL AND CHILD


HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1948

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

enter

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


SAHMS, TIMOTHY

Provider ID: 206292

Provider Gender: Male

License Number: G51462

NPI: 1780697276

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-7:30PM

SA 8:30AM-2:00PM

PEDIATRICS

SAHMS, TIMOTHY

Provider ID: 206292

Provider Gender: Male

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NPI: 1780697276

 Provider English Spoken: Y

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Spoken: Spanish

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CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No


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PEDIATRICS

SAHMS, TIMOTHY


Provider ID: 227411


Provider Gender: Male

License Number: G51462

NPI: 1780697276

D2. 主治医生名录

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

IHP of Southern Cal-PHP


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Min/Max Age: 0\150

American Sign Language (ASL): Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

MATERNAL AND CHILD

HEALTH CTR

 Accessibility: CONTACT

PROVIDER

PEDIATRICS

SHAHIDYAZDANI, TINA

Provider ID: 227411

Provider Gender: Female

License Number: A94813

NPI: 1891924858

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

MATERNAL AND CHILD

HEALTH CTR


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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


SHAHIDYAZDANI, TINA

Provider ID: 227411

Provider Gender: Female

License Number: A94813

NPI: 1891924858

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


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HEALTH CTR


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662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

SULLIVAN, ELISSA

Provider ID: 227411

Provider Gender: Female

License Number: A169577

NPI: 1790216422

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD

HEALTH CTR


 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

PEDIATRICS

SULLIVAN, ELISSA

Provider ID: 227411

Provider Gender: Female

License Number: A169577

NPI: 1790216422

 Provider English Spoken: Y

Cultural Competency: N





Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

D2. 主治医生名录

MATERNAL AND CHILD HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

PEDIATRICS


TAYLOR, TASHA


Provider ID: 227411

Provider Gender: Female

License Number: A82187

NPI: 1528144433

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1948

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


TAYLOR, TASHA


Provider ID: 227411

Provider Gender: Female

License Number: A82187

NPI: 1528144433

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
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Fax: (619) 205-1948

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

BUCKNER, JOSEPH

Provider ID: 206292

Provider Gender: Male

License Number: PA18363


NPI: 1215909205


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

BUCKNER, JOSEPH

Provider ID: 206292

Provider Gender: Male

License Number: PA18363

NPI: 1215909205

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

D2. 主治医生名录

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT



GI, HUNG

Provider ID: 206292
Provider Gender: Male
License Number: PA16994
NPI: 1023207404
 Provider English Spoken: Y
 Provider Language(s) Spoken: Chinese, French, Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


GI, HUNG

Provider ID: 206292
Provider Gender: Male
License Number: PA16994
NPI: 1023207404
 Provider English Spoken: Y
 Provider Language(s) Spoken: Chinese, French, Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER






 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

HARMIS, NATASHA

Provider ID: 227469
Provider Gender: Female
License Number: PA58672
NPI: 1013516996
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

HARMIS, NATASHA

Provider ID: 227469
Provider Gender: Female
License Number: PA58672
NPI: 1013516996
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

D2. 主治医生名录

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

KAMOTO, LYNN

Provider ID: 206292

Provider Gender: Female

License Number: PA17162

NPI: 1447326459

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

KAMOTO, LYNN

Provider ID: 206292

Provider Gender: Female

License Number: PA17162

NPI: 1447326459

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

PORTOMADURSKI, KRISTINE

Provider ID: 227411

Provider Gender: Female

License Number: PA16269

NPI: 1053403782

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD


HEALTH CTR

 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

PORTOMADURSKI, KRISTINE

Provider ID: 227411

Provider Gender: Female

License Number: PA16269

NPI: 1053403782

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD


HEALTH CTR

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

ROSS, COLLIN

Provider ID: 206292

Provider Gender: Male

License Number: PA16058

NPI: 1629182050

Provider English Spoken: Y







Provider Language(s)


D2. 主治医生名录

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

ROSS, COLLIN

Provider ID: 206292
Provider Gender: Male
License Number: PA16058
NPI: 1629182050
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
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- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 206292
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT






SHARPE, NORMA

Provider ID: 206292
Provider Gender: Female
License Number: PA20490
NPI: 1619100237

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SMITH, DOUGLAS

Provider ID: 206292
Provider Gender: Male
License Number: PA12304
NPI: 1902016611
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes

D2. 主治医生名录

Min/Max Age: 0\150

American Sign Language (ASL): IHP of Southern Cal-PHP

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SMITH, DOUGLAS

Provider ID: 206292

Provider Gender: Male

License Number: PA12304

NPI: 1902016611

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): SAN YSIDRO HLTH SAN DIEGO

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SUNA-SITTO, MOHEEN

Provider ID: 227469

Provider Gender: Female

License Number: PA22855

NPI: 1497196729

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 3364 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SUNA-SITTO, MOHEEN

Provider ID: 227469

Provider Gender: Female

License Number: PA22855

NPI: 1497196729

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


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 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

PHYSICIANS ASSISTANT

TRUJILLO, MIGUEL

Provider ID: 206292

Provider Gender: Male

License Number: PA15656

NPI: 1285806794

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TRUJILLO, MIGUEL

Provider ID: 206292

Provider Gender: Male

License Number: PA15656

NPI: 1285806794

Provider English Spoken: Y





Provider Language(s)


Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No







D2. 主治医生名录


IHP of Southern Cal-PHP
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662-4100
 Website: [www.syhealth.org](http://www.syhealth.org/clinics/san-ysidro-health-center)
/clinics/san-ysidro-health
- center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

PODIATRIST








MANCHEL, BRUCE

Provider ID: 206292
Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6341
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org

/clinics/san-ysidro-health
- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER








PODIATRIST

MANCHEL, BRUCE

Provider ID: 206292
Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
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/clinics/san-ysidro-health
- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER



PODIATRIST

MANCHEL, BRUCE

Provider ID: 227469
Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 3364 BEYER BLVD
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662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER




PODIATRIST

MANCHEL, BRUCE

Provider ID: 227469
Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N


D2. 主治医生名录




Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
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 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

SHAUF, JOANN


Provider ID: 206292
Provider Gender: Female
License Number: PT296607
NPI: 1134732522
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER




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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

SHAUF, JOANN

Provider ID: 206292
Provider Gender: Female
License Number: PT296607
NPI: 1134732522
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


SPEECH PATHOLOGIST

HILL, CARLA

Provider ID: 206292
Provider Gender: Female
License Number: SP9075
NPI: 1043950751


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

SPEECH PATHOLOGIST

HILL, CARLA

Provider ID: 206292
Provider Gender: Female
License Number: SP9075
NPI: 1043950751
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
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662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes

D2. 主治医生名录

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

SURGERY GENERAL

OKWUOSA, CHRIS

Provider ID: 206292

Provider Gender: Male

License Number: A170738

NPI: 1114336260

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Providence
St Mary Medical Center


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

SURGERY GENERAL

OKWUOSA, CHRIS

Provider ID: 206292

Provider Gender: Male

License Number: A170738

NPI: 1114336260

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Providence
St Mary Medical Center


Board Certified Specialty: No


IHP of Southern Cal-PHP


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YSIDRO HEALTH CENTER

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SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

SANTEE



PEDIATRICS

ARLATA, TAMANTHA

Provider ID: 615945

Provider Gender: Female

NPI: 1568721934

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL


CTR

Board Certified Specialty: No

Rady Childrens Health Network
TAMANTHA S ARLATA

 9600 CUYAMACA ST STE
101

SANTEE, CA 92071

 Phone: (619) 749-2150

Fax: (619) 456-9744

 After Hours Phone: (619)
749-2150

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MANGINE, REGINA

Provider ID: 366456

Provider Gender: Female

NPI: 1417177577

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT


HOSPITAL, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS



Board Certified Specialty: No

Rady Childrens Health Network
REGINA M MANGINE


 9600 CUYAMACA ST STE
101

SANTEE, CA 92071


D2. 主治医生名录

 Phone: (619) 749-2150
 Fax: (619) 456-9744

 After Hours Phone: (619) 749-2150

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM



SPRING VALLEY

CERTIFIED NURSE

PRACTITIONER

LEONARD, BEVERLY



Provider ID: 206361
Provider Gender: Female
License Number: NP10943
NPI: 1285772392


 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555

 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N



 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

LEONARD, BEVERLY



Provider ID: 206361
Provider Gender: Female
License Number: NP10943
NPI: 1285772392


 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego


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 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N



 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, TAKISHA



Provider ID: 206361
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386


 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

GROSSMONT SPRING VALLEY
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SPRING VALLEY, CA 91977

 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555

 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N



 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 206361
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386





 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

D2. 主治医生名录

 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BACHARACH, REBECCA

Provider ID: 206361
Provider Gender: Female
License Number: 20A15459
NPI: 1225442643
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



BACHARACH, REBECCA

Provider ID: 206361
Provider Gender: Female
License Number: 20A15459
NPI: 1225442643
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

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 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CARDONES, ARTHUR

Provider ID: 206361
Provider Gender: Male
License Number: A55932
NPI: 1962436451
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
 8788 JAMACHA RD

SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CARDONES, ARTHUR

Provider ID: 206361
Provider Gender: Male
License Number: A55932
NPI: 1962436451
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

D2. 主治医生名录

FAMILY PRACTICE


CONSTANTINO, STEPHANIE

Provider ID: 206361

Provider Gender: Female

License Number: A149063

NPI: 1366824971

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
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 Phone: (619) 515-2555

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 Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

FAMILY PRACTICE


CONSTANTINO, STEPHANIE

Provider ID: 206361

Provider Gender: Female

License Number: A149063

NPI: 1366824971

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Mandarin


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

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 Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

FAMILY PRACTICE

ROSE, PATRICIA

Provider ID: 206361

Provider Gender: Female

License Number: A76059

NPI: 1588677314


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego


GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

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SPRING VALLEY, CA 91977

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 Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

FAMILY PRACTICE

ROSE, PATRICIA

Provider ID: 206361

Provider Gender: Female

License Number: A76059


NPI: 1588677314


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

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 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT

D2. 主治医生名录

PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

FQHC

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC,


Provider ID: 206361
NPI: 1508801069

Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
Fax: (619) 462-5584

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER



FQHC

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC,


Provider ID: 206361
NPI: 1508801069

Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC
 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
Fax: (619) 462-5584

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY




ALIMONOS, LYSISTRATI


Provider ID: 206361
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI


Provider ID: 206361
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

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 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

D2. 主治医生名录

TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206361

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL


CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN


AND NEWBORNS

Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
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 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206361

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL


CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN


AND NEWBORNS

Board Certified Specialty: No
Family Health Centers of San
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Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206361

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,


GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

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 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

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OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206361

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,

D2. 主治医生名录

GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

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TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 206361

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San
Diego

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

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Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 206361

Provider Gender: Female

License Number: A163464

NPI: 1326531401

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Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San
Diego

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Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 206361

Provider Gender: Male

License Number: A108228

NPI: 1629277322

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

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Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

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Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 206361

Provider Gender: Male

License Number: A108228

NPI: 1629277322

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

D2. 主治医生名录

Family Health Centers of San Diego
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

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Phone: (619) 515-2555
After Hours Phone: (619) 515-2555

Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 206361
Provider Gender: Female
License Number: A178499
NPI: 1033613732

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San Diego
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

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Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 206361
Provider Gender: Female
License Number: A178499
NPI: 1033613732

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San Diego
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Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

FOLCHTORRES-AGUIAR, BEATRIZ

Provider ID: 206361

Provider Gender: Female

License Number: A148014

NPI: 1457794752

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Yue Chinese

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San Diego

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

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After Hours Phone: (619) 515-2555

Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

FOLCHTORRES-AGUIAR, BEATRIZ


D2. 主治医生名录


Provider ID: 206361

Provider Gender: Female

License Number: A148014

NPI: 1457794752

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish, Yue
Chinese

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
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 Website: www.fhcsd.org


Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


HANLEY, LAUREN


Provider ID: 206361

Provider Gender: Female

License Number: C174771

NPI: 1053392035

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No

Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


HANLEY, LAUREN

Provider ID: 206361

Provider Gender: Female

License Number: C174771

NPI: 1053392035

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San

Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206361

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,


GROSSMONT HOSPITAL


Board Certified Specialty: No

Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)

D2. 主治医生名录

515-2555
 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206361
Provider Gender: Female
License Number: A72005
NPI: 1649208711
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
GROSSMONT SPRING VALLEY
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 8788 JAMACHA RD
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 After Hours Phone: (619)
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 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206361
Provider Gender: Female
License Number: A116680
NPI: 1700073962
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
GROSSMONT SPRING VALLEY
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 8788 JAMACHA RD
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 Phone: (619) 515-2555
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 Website: www.fhcsd.org
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
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 Accessibility: CONTACT

PROVIDER
Hours: M 8:30AM-5:30PM
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OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206361
Provider Gender: Female
License Number: A116680
NPI: 1700073962
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
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FAMILY HLTH CTRS INC
 8788 JAMACHA RD
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 Phone: (619) 515-2555
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

D2. 主治医生名录

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 206361

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

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 Phone: (619) 515-2555

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 Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 206361

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206361

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

Provider English Spoken: Y


Cultural Competency: N

Hospital Affiliation: Sharp
Grossmont Hospital

Board Certified Specialty: No
Family Health Centers of San
Diego

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

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 Accessibility: CONTACT
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OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206361

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198


Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Sharp
Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

D2. 主治医生名录

Provider ID: 206361
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No
Family Health Centers of San
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PROVIDER
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W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 206361
Provider Gender: Female
License Number: 20A11535

NPI: 1811162456
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No
Family Health Centers of San
Diego
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
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PROVIDER
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TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206361
Provider Gender: Male
License Number: G78814
NPI: 1699790634
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
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 8788 JAMACHA RD
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515-2555
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Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206361
Provider Gender: Male
License Number: G78814
NPI: 1699790634
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,

D2. 主治医生名录

SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

JI, AMANDA

Provider ID: 206361

Provider Gender: Female

License Number: A169342

NPI: 1750745493

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

JI, AMANDA

Provider ID: 206361

Provider Gender: Female

License Number: A169342

NPI: 1750745493

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

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SPRING VALLEY, CA 91977

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After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

LOPEZ, MARIO

Provider ID: 206361

Provider Gender: Male

License Number: PA21385

NPI: 1932335080

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

W-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

LOPEZ, MARIO

Provider ID: 206361

Provider Gender: Male

License Number: PA21385

NPI: 1932335080

Provider English Spoken: Y
Cultural Competency: N

D2. 主治医生名录

Board Certified Specialty: No
Family Health Centers of San Diego
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
W-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

TRAN, TU-UYEN

Provider ID: 206361
Provider Gender: Female
License Number: PA54588
NPI: 1598293748
Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555

Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

TRAN, TU-UYEN

Provider ID: 206361
Provider Gender: Female
License Number: PA54588
NPI: 1598293748
Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
8788 JAMACHA RD
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Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

TURNER, ERIC

Provider ID: 206361
Provider Gender: Male
License Number: PA55067
NPI: 1669756128
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

TURNER, ERIC

Provider ID: 206361
Provider Gender: Male
License Number: PA55067
NPI: 1669756128
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

D2. 主治医生名录

Family Health Centers of San Diego
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555
After Hours Phone: (619) 515-2555

Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

VALLEY CENTER

CLINIC OUTPATIENT

NEIGHBORHOOD

HEALTHCARE,

Provider ID: 519918

NPI: 1437335148

Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP
NEIGHBORHOOD

HEALTHCARE

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Phone: (760) 742-9919
Fax: (360) 462-2750

After Hours Phone: (760) 742-9919

Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

CLINIC OUTPATIENT

NEIGHBORHOOD

HEALTHCARE,

Provider ID: 519918

NPI: 1437335148

Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP
NEIGHBORHOOD

HEALTHCARE

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Phone: (760) 742-9919
Fax: (360) 462-2750

After Hours Phone: (760) 742-9919

Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

AYON MARTINEZ, CARLOS

Provider ID: 519918

Provider Gender: Male

License Number: A114419

NPI: 1154583128

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Phone: (760) 742-9919
After Hours Phone: (760) 742-9919

Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

AYON MARTINEZ, CARLOS

Provider ID: 519918

Provider Gender: Male

License Number: A114419

NPI: 1154583128

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Phone: (760) 742-9919
After Hours Phone: (760) 742-9919

Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

D2. 主治医生名录

FAMILY PRACTICE

CASTANER, ZALYA

Provider ID: 519918

Provider Gender: Female

License Number: A139490

NPI: 1487072179

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9912

 After Hours Phone: (760)
742-9912

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

CASTANER, ZALYA

Provider ID: 519918

Provider Gender: Female

License Number: A139490

NPI: 1487072179

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9912

 After Hours Phone: (760)
742-9912

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE



SCHULTZ, JAMES

Provider ID: 519918

Provider Gender: Male

License Number: G61829

NPI: 1356376164

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Farsi, Greek,
Spanish

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

PALOMAR MEDICAL CENTER


Board Certified Specialty: No

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

 After Hours Phone: (760)
742-9919

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SCHULTZ, JAMES


Provider ID: 519918

Provider Gender: Male

License Number: G61829

NPI: 1356376164

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Greek,
Spanish

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

PALOMAR MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

 After Hours Phone: (760)
742-9919

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

D2. 主治医生名录

 *Accessibility: CONTACT PROVIDER*

FQHC NEIGHBORHOOD HEALTHCARE,

Provider ID: 519918


NPI: 1437335148

 *Provider English Spoken: Y*
Cultural Competency: N

IHP of Southern Cal-PHP

NEIGHBORHOOD HEALTHCARE

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 *Phone: (760) 742-9919*

Fax: (360) 462-2750


 *After Hours Phone: (760)
742-9919*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

FQHC NEIGHBORHOOD HEALTHCARE,

Provider ID: 519918


NPI: 1437335148

 *Provider English Spoken: Y*
Cultural Competency: N

IHP of Southern Cal-PHP


NEIGHBORHOOD HEALTHCARE

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 *Phone: (760) 742-9919*

Fax: (360) 462-2750

 *After Hours Phone: (760)
742-9919*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM


PEDIATRICS


CRAYCHEE, LEO

Provider ID: 71887

Provider Gender: Male

NPI: 1265432710

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

*CHILDRENS HOSPITAL SAN
DIEGO*


Board Certified Specialty: No

Rady Childrens Health Network

LEO C CRAYCHEE

 28714 VALLEY CENTER RD
STE L

VALLEY CENTER, CA 92082

 *Phone: (760) 749-7770*

Fax: (760) 751-9988

 *After Hours Phone: (760)
749-7770*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:30AM-5:00PM

PHYSICIANS ASSISTANT

AGUEY, OMAR

Provider ID: 519918

Provider Gender: Male

License Number: PA18708

NPI: 1851479372

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 *Phone: (760) 742-9919*

 *After Hours Phone: (760)
742-9919*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

AGUEY, OMAR

Provider ID: 519918

Provider Gender: Male

License Number: PA18708

NPI: 1851479372

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP

D2. 主治医生名录

NEIGHBORHOOD

HEALTHCARE

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

 After Hours Phone: (760)
742-9919

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

VISTA

CERTIFIED NURSE

PRACTITIONER


HALGEDAHL, YI TING

Provider ID: 400339

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

GRAPEVINE

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): **PRACTITIONER**

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER


HALGEDAHL, YI TING

Provider ID: 400339

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

GRAPEVINE

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VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

CERTIFIED NURSE

KELLEHER, BRIDGET

Provider ID: 400339

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR


Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

GRAPEVINE

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 400339


Provider Gender: Female


License Number: NP95003447



NPI: 1245695006

 Provider English Spoken: Y

D2. 主治医生名录

 *Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
GRAPEVINE*

 134 GRAPEVINE RD
VISTA, CA 92083

 *Phone: (760) 631-5000*
 *After Hours Phone: (760)
631-5000*

 *Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\999*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

*Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM*

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, JINA

Provider ID: 400339

Provider Gender: Female

License Number: NP95020624



NPI: 1225500259

 *Provider English Spoken: Y
Cultural Competency: N*

*Board Certified Specialty: No
IHP of Southern Cal-PHP*

*VISTA COMMUNITY CLINIC
GRAPEVINE*

 134 GRAPEVINE RD
VISTA, CA 92083

 *Phone: (760) 631-5000*
 *After Hours Phone: (760)
631-5000*

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, JINA

Provider ID: 400339

Provider Gender: Female

License Number: NP95020624



NPI: 1225500259

 *Provider English Spoken: Y
Cultural Competency: N*

*Board Certified Specialty: No
IHP of Southern Cal-PHP*

*VISTA COMMUNITY CLINIC
GRAPEVINE*

 134 GRAPEVINE RD
VISTA, CA 92083

 *Phone: (760) 631-5000*
 *After Hours Phone: (760)
631-5000*

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

CHIROPRACTOR



JU, NATHANIEL

Provider ID: 400339

Provider Gender: Male

License Number: DC32054

NPI: 1972883882



 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Chinese*

Cultural Competency: N

*Board Certified Specialty: No
IHP of Southern Cal-PHP*

*VISTA COMMUNITY CLINIC
GRAPEVINE*

 134 GRAPEVINE RD
VISTA, CA 92083

 *Phone: (760) 631-5000*
 *After Hours Phone: (760)
631-5000*

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

*Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM*

CHIROPRACTOR

JU, NATHANIEL

Provider ID: 400339

Provider Gender: Male

License Number: DC32054

NPI: 1972883882

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Chinese*

Cultural Competency: N

*Board Certified Specialty: No
IHP of Southern Cal-PHP*

VISTA COMMUNITY CLINIC

D2. 主治医生名录

GRAPEVINE


 134 GRAPEVINE RD
VISTA, CA 92083
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

FAMILY PRACTICE


ESPINOSA-SILVA, YAMINAH

Provider ID: 400339

Provider Gender: Female

License Number: 20A12958

NPI: 1003172016

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL
CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

GRAPEVINE

 134 GRAPEVINE RD

VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)

631-5000

 Website: www.vistacommunityclinic.org

nityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


ESPINOSA-SILVA, YAMINAH

Provider ID: 400339

Provider Gender: Female

License Number: 20A12958

NPI: 1003172016

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL
CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP


VISTA COMMUNITY CLINIC

GRAPEVINE

 134 GRAPEVINE RD

VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KETCHEL, CLINT


Provider ID: 400339

Provider Gender: Male

License Number: A135564

NPI: 1699038125

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, TRI CITY

MEDICAL CTR, WHITTIER

HOSPITAL MEDICAL CENTER

Board Certified Specialty: No


IHP of Southern Cal-PHP


VISTA COMMUNITY CLINIC

GRAPEVINE

 134 GRAPEVINE RD

VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

D2. 主治医生名录

FAMILY PRACTICE

KETCHEL, CLINT

Provider ID: 400339

Provider Gender: Male

License Number: A135564

NPI: 1699038125

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, TRI CITY
MEDICAL CTR, WHITTIER

HOSPITAL MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

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VISTA, CA 92083

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After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

FQHC

VCC DURIAN,

Provider ID: 411518

NPI: 1851300123

Provider English Spoken: Y

Cultural Competency: N

IHP of Southern Cal-PHP

VCC DURIAN

105 DURIAN ST STE A
VISTA, CA 92083

Phone: (844) 308-5003

Fax: (760) 414-3892

After Hours Phone: (844)
308-5003

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

FQHC

VCC DURIAN,

Provider ID: 411518

NPI: 1851300123

Provider English Spoken: Y

Cultural Competency: N

IHP of Southern Cal-PHP

VCC DURIAN

105 DURIAN ST STE A
VISTA, CA 92083

Phone: (844) 308-5003

Fax: (760) 414-3892

After Hours Phone: (844)
308-5003

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

FQHC

VISTA COMMUNITY CLINIC

GRAPEVINE,

Provider ID: 400339

NPI: 1851300123

Provider English Spoken: Y

Cultural Competency: N

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

GRAPEVINE

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

FQHC

VISTA COMMUNITY CLINIC

GRAPEVINE,

Provider ID: 400339


NPI: 1851300123

Provider English Spoken: Y

D2. 主治医生名录

Cultural Competency: N
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
GRAPEVINE

 134 GRAPEVINE RD
VISTA, CA 92083

 *Phone: (760) 631-5000*
Fax: (760) 414-3892


 *After Hours Phone: (760)*
631-5000

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM


PEDIATRICS

AMBO, STANLEY

Provider ID: 52269

Provider Gender: Male

NPI: 1891735676

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS
HOSPITAL SAN DIEGO

Board Certified Specialty: No

Rady Childrens Health Network
STANLEY G AMBO

 2067 W VISTA WAY STE 180
VISTA, CA 92083

 *Phone: (760) 945-3434*

Fax: (760) 945-6761

 *After Hours Phone: (760)*
945-3434

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 8:00AM-5:00PM


PEDIATRICS

ASSELIN, LYNETTE

Provider ID: 65507

Provider Gender: Female

NPI: 1053484568

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No

Rady Childrens Health Network

LYNETTE M ASSELIN

 2067 W VISTA WAY STE 280
VISTA, CA 92083

 *Phone: (760) 941-3630*

Fax: (760) 941-1214

 *After Hours Phone: (760)*
941-3630

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 8:30AM-6:00PM
SA 9:00AM-1:00PM

PEDIATRICS

BEDROSIAN, DIANE

Provider ID: 80272

Provider Gender: Female

NPI: 1447323951

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No

Rady Childrens Health Network

DIANE H BEDROSIAN

 2067 W VISTA WAY STE 280
VISTA, CA 92083

 *Phone: (760) 941-3630*

Fax: (760) 941-1214

 *After Hours Phone: (760)*
941-3630


 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 8:30AM-6:00PM

SA 9:00AM-1:00PM

PEDIATRICS

CASTRO, JORGE

Provider ID: 100779

Provider Gender: Male

NPI: 1326082868

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

D2. 主治医生名录

MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, RADY CHILDRENS
HOSPITAL SAN DIEGO
Board Certified Specialty: No
Rady Childrens Health Network
JORGE L CASTRO

2067 W VISTA WAY STE 180
VISTA, CA 92083

Phone: (760) 945-3434

Fax: (760) 945-6761

After Hours Phone: (760)
945-3434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

HARTFORD, NICOLE

Provider ID: 411518

Provider Gender: Female

License Number: 20A14390

NPI: 1346530466

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VCC DURIAN

105 DURIAN ST STE A
VISTA, CA 92083

Phone: (844) 308-5003

After Hours Phone: (844)
308-5003

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

HARTFORD, NICOLE

Provider ID: 411518

Provider Gender: Female

License Number: 20A14390

NPI: 1346530466

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VCC DURIAN

105 DURIAN ST STE A
VISTA, CA 92083

Phone: (844) 308-5003

After Hours Phone: (844)
308-5003

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

KARP, MICHAEL

Provider ID: 95672

Provider Gender: Male

NPI: 1295808632

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No

Rady Childrens Health Network

MICHAEL W KARP

2067 W VISTA WAY STE 280
VISTA, CA 92083

Phone: (760) 941-3630

Fax: (760) 941-1214

After Hours Phone: (760)
941-3630

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-6:00PM
SA 9:00AM-1:00PM

PEDIATRICS

KRAK, MICHAEL

Provider ID: 23455

Provider Gender: Male

NPI: 1003989419

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL
CTR

Board Certified Specialty: Yes

Rady Childrens Health Network
MICHAEL D KRAK

2067 W VISTA WAY STE 280
VISTA, CA 92083

Phone: (760) 941-3630

Fax: (760) 941-1214

After Hours Phone: (760)
941-3630

Website: N/A


Medi-Cal Open Panel: Yes

D2. 主治医生名录

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-6:00PM
SA 9:00AM-1:00PM

PEDIATRICS

LUSCHWITZ, BRIAN

Provider ID: 400339

Provider Gender: Male

License Number: A60517

NPI: 1205868510

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC
GRAPEVINE

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

PEDIATRICS

LUSCHWITZ, BRIAN

Provider ID: 400339

Provider Gender: Male

License Number: A60517

NPI: 1205868510

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC
GRAPEVINE

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VISTA, CA 92083

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 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

PEDIATRICS

NAUDIN, VERONICA

Provider ID: 84118

Provider Gender: Female

NPI: 1093755878

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS


HOSPITAL SAN DIEGO

Board Certified Specialty: No

Rady Childrens Health Network


VERONICA L NAUDIN

 2067 W VISTA WAY STE 180
VISTA, CA 92083

 Phone: (760) 945-3434

Fax: (760) 945-6761


 After Hours Phone: (760)
945-3434

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

PEDIATRICS

PERTL, URSULA

Provider ID: 593894

Provider Gender: Female

NPI: 1609947464

Provider English Spoken: Y

Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS

HOSPITAL SAN DIEGO,

CHILDRENS HOSP OF LOS

ANGELES

D2. 主治医生名录

Board Certified Specialty: No
Rady Childrens Health Network
URSULA G PERTL

2067 W VISTA WAY STE 180
VISTA, CA 92083

Phone: (760) 945-3434

Fax: (760) 945-6761

After Hours Phone: (760)
945-3434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-2:00PM

M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

PEDIATRICS

RONAN, KEVIN

Provider ID: 400339

Provider Gender: Male

License Number: G77176

NPI: 1225017353

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

GRAPEVINE

134 GRAPEVINE RD

VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

PEDIATRICS

RONAN, KEVIN

Provider ID: 400339

Provider Gender: Male

License Number: G77176

NPI: 1225017353

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

GRAPEVINE

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631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

WEAVER, APRIL

Provider ID: 400339

Provider Gender: Female

License Number: PA20775

NPI: 1063552800

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

GRAPEVINE

134 GRAPEVINE RD

VISTA, CA 92083

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After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 9:00AM-2:00PM

F 8:00AM-5:00PM

SA 8:00AM-4:00PM

PHYSICIANS ASSISTANT

WEAVER, APRIL

D2. 主治医生名录

Provider ID: 400339

Provider Gender: Female

License Number: PA20775

NPI: 1063552800

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

GRAPEVINE

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VISTA, CA 92083

 *Phone: (760) 631-5000*

 *After Hours Phone: (760)*

631-5000

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 9:00AM-2:00PM

F 8:00AM-5:00PM

SA 8:00AM-4:00PM

D3. 专科提供者名录

ALPINE

OPTOMETRIST

AOTO, KIM

Provider ID: 268720

Board Certified Specialty: No
KIM N AOTO

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

☎ Phone: (800) 898-2020

Fax: (844) 897-3788

🕒 After Hours Phone: (800)
898-2020

Provider Gender: Female

NPI: 1780935650

🗨 Provider English Spoken: Y

🗨 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:00PM

🌐 Website: N/A

PSYCHOLOGIST

TORRES, RANDALL

Provider ID: 306854

Board Certified Specialty: No
RANDALL P TORRES

📍 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1871696435

🗨 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CARLSBAD

CERTIFIED NURSE

PRACTITIONER

HOOPER, BONNIE

Provider ID: 275252

Board Certified Specialty: No
BONNIE J HOOPER

📍 6010 HIDDEN VALLEY RD
STE 120

CARLSBAD, CA 92011

☎ Phone: (760) 884-5990

Fax: (760) 448-4404

🕒 After Hours Phone: (760)
884-5990

Provider Gender: Female

NPI: 1821062878

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

RICE, ELIZABETH

Provider ID: 304664

Board Certified Specialty: No
ELIZABETH M RICE

📍 6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

☎ Phone: (760) 631-3000

Fax: (760) 631-3016

🕒 After Hours Phone: (760)
631-3000

Provider Gender: Female

NPI: 1902470537

🗨 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

DERMATOLOGY

ZUBAIR, RAHEEL

Provider ID: 306519

Board Certified Specialty: No
RAHEEL A ZUBAIR

📍 6010 HIDDEN VALLEY RD
STE 120

CARLSBAD, CA 92011

☎ Phone: (760) 448-4484

Fax: (760) 448-4404

🕒 After Hours Phone: (760)
448-4484

Provider Gender: Male

NPI: 1326493024

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

D3. 专科提供者名录

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

FAMILY PRACTICE


CHAVEZSANTOS, MARIA

Provider ID: 307651

*Board Certified Specialty: No
MARIA J CHAVEZSANTOS*

 1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008


 *Phone: (760) 736-6767*

Fax: (760) 720-7204

 *After Hours Phone: (760)
736-6767*

Provider Gender: Female

NPI: 1780061440

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-8:00PM
SA 8:00AM-5:00PM*

 *Website: N/A*

HEARING AID DEALER /


SUPPLIER

DAVIS, KELLE

Provider ID: 268654

*Board Certified Specialty: No
KELLE L DAVIS*

 1820 MARRON RD STE 102
CARLSBAD, CA 92008


 *Phone: (760) 434-0125*

Fax: (760) 434-4531

 *After Hours Phone: (760)
434-0125*

Provider Gender: Female

NPI: 1902853344

 *Provider English Spoken: Y*


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:30AM-5:00PM*

 *Website: N/A*

NEUROLOGY


DROKER, BRIAN

Provider ID: 306953


*Board Certified Specialty: No
BRIAN S DROKER*

 6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011


 *Phone: (760) 631-3000*


Fax: (760) 270-9534

 *After Hours Phone: (760)
631-3000*

Provider Gender: Male

NPI: 1801112669

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M 8:00AM-5:00PM
W 8:00AM-5:00PM*

 *Website: N/A*

NEUROLOGY


YOSHII-CONTRERAS, JUNE

Provider ID: 296589

*Board Certified Specialty: No
JUNE YOSHII-CONTRERAS*

 6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

 *Phone: (760) 631-3000*

Fax: (760) 631-3016

 *After Hours Phone: (760)
631-3000*

Provider Gender: Female

NPI: 1437441763

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

*Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL*

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL,

PALOMAR MEDICAL CENTER,

TRI CITY MEDICAL CTR,


SCRIPPS MERCY HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

OTOLARYNGOLOGY

D3. 专科提供者名录

CHANG, EDWARD

Provider ID: 309534

Board Certified Specialty: No
EDWARD W CHANG

2390 FARADAY AVE
CARLSBAD, CA 92008

Phone: (858) 909-0770

Fax: (858) 909-0880

After Hours Phone: (858)
909-0770

Provider Gender: Male

NPI: 1528146008

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

DONALDSON, CHADWICK

Provider ID: 268146

Board Certified Specialty: No
CHADWICK J DONALDSON

2390 FARADAY AVE
CARLSBAD, CA 92008

Phone: (858) 909-0770

Fax: (858) 909-0880

After Hours Phone: (858)
909-0770

Provider Gender: Male

NPI: 1891743910

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
TEMECULA VALLEY HOSPITAL N

INC, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SHARP CHULA VISTA MED

CTR, SHARP CHULA VISTA

MED CTR, Sharp Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

HERMANSON, KATHLEEN

Provider ID: 269004

Board Certified Specialty: No
KATHLEEN H HERMANSON

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)
631-3000

Provider Gender: Female

NPI: 1598160343

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-4:00PM

Website: N/A

PHYSICIANS ASSISTANT

INOCELDA, ANDREW

Provider ID: 269089

Board Certified Specialty: No
ANDREW G INOCELDA

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)
631-3000

Provider Gender: Male

NPI: 1497950208

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SHIMIZU, KELSIE

Provider ID: 296819

Board Certified Specialty: No
KELSIE SHIMIZU

2390 FARADAY AVE

CARLSBAD, CA 92008

Phone: (858) 909-0770

D3. 专科提供者名录

Fax: (858) 909-0880

☎ After Hours Phone: (858) 909-0770

Provider Gender: Female

NPI: 1972107811

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: KECK

HOSPITAL OF USC, USC

KENNETH NORRIS JR CANCER

HOSPITAL, USC VERDUGO

HILLS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

WILAND, WINONA

Provider ID: 296809

Board Certified Specialty: No

WINONA L WILAND

📍 2390 FARADAY AVE
CARLSBAD, CA 92008

☎ Phone: (858) 909-0770

Fax: (858) 909-0880

☎ After Hours Phone: (858) 909-0770

Provider Gender: Female

NPI: 1043967383

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

AMBROSE, CHRISTOPHER

Provider ID: 248010

Board Certified Specialty: No

CHRISTOPHER S AMBROSE

📍 3070 MADISON ST
CARLSBAD, CA 92008

☎ Phone: (760) 434-6100

Fax: (760) 471-5139

☎ After Hours Phone: (760) 591-7750

Provider Gender: Male

NPI: 1114977535

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 8\125

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 7:00AM-7:00PM
TU 7:00AM-5:00PM

W 7:00AM-7:00PM

TH 7:00AM-5:00PM

F 7:00AM-7:00PM

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

MCGEE, JACQUELINE

Provider ID: 252472

Board Certified Specialty: No

JACQUELINE M MCGEE

📍 3070 MADISON ST

CARLSBAD, CA 92008

☎ Phone: (760) 434-6100

Fax: (760) 434-4583

☎ After Hours Phone: (760) 434-6100

Provider Gender: Female

NPI: 1194217133

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 8\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
7:00AM-6:00PM

🌐 Website: N/A

SURGERY NEUROLOGICAL

BEN-HAIM, SHARONA

Provider ID: 244069

Board Certified Specialty: No

SHARONA BEN-HAIM

📍 6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1942469663

☐ Provider English Spoken: Y
☐ Provider Language(s)

Spoken: Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

D3. 专科提供者名录

American Sign Language (ASL): NIKHIL K MURTHY

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


SURGERY NEUROLOGICAL

BLASKIEWICZ, DONALD

Provider ID: 270283

Board Certified Specialty: No
DONALD J BLASKIEWICZ

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1215176839

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY NEUROLOGICAL

MURTHY, NIKHIL

Provider ID: 299996

Board Certified Specialty: No

 6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1710371273

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


 Website: N/A



SURGERY NEUROLOGICAL

PHAM, MARTIN

Provider ID: 203510

Board Certified Specialty: No
MARTIN H PHAM

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

 Phone: (619) 543-5540
 After Hours Phone: (619)
543-5540

Provider Gender: Male

NPI: 1609130921

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CHULA VISTA

ANESTHESIOLOGY PAIN MANAGEMENT


DAIRO, BRANDON

Provider ID: 299879

Board Certified Specialty: No

BRANDON DAIRO

 340 4TH AVE STE 19
CHULA VISTA, CA 91910

 Phone: (619) 761-5308
Fax: (619) 591-1910

 After Hours Phone: (619)
761-5308

Provider Gender: Male

NPI: 1689092470

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA


VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 18\100

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY PAIN MANAGEMENT

D3. 专科提供者名录

DAIRO, BRANDON

Provider ID: 300088

Board Certified Specialty: No
BRANDON DAIRO

340 4TH AVE STE 19
CHULA VISTA, CA 91910

Phone: (619) 761-5308

Fax: (619) 591-1910

After Hours Phone: (619)
761-5308

Provider Gender: Male

NPI: 1689092470

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CARDIOVASCULAR DISEASE

LERNER, JONATHAN

Provider ID: 303445

Board Certified Specialty: No
JONATHAN H LERNER

765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911

Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1962899823

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

LAM, KHANH

Provider ID: 295381

Board Certified Specialty: No

KHANH M LAM

340 4TH AVE STE 19
CHULA VISTA, CA 91910

Phone: (619) 761-5308

Fax: (619) 591-1910

After Hours Phone: (619)
761-5308

Provider Gender: Male

NPI: 1649594979

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, French,
Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

WILCOX, WENONAH

Provider ID: 290591

Board Certified Specialty: No
WENONAH WILCOX

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1598037178

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

ARMSTON, LINDSEY

Provider ID: 309664

Board Certified Specialty: No
LINDSEY C ARMSTON

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Phone: (619) 425-3840



Fax: (619) 425-3842

After Hours Phone: (619)
425-3840




Provider Gender: Female

NPI: 1841851375



D3. 专科提供者名录

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




CERTIFIED NURSE PRACTITIONER





**BRACEY-ASIEDU,
ALEKSANDRYA**
Provider ID: 309695
Board Certified Specialty: No
ALEKSANDRYA C
BRACEY-ASIEDU
 450 4TH AVE STE 215
CHULA VISTA, CA 91910
 Phone: (619) 425-3840
Fax: (619) 425-3842
 After Hours Phone: (619)
425-3840
Provider Gender: Female
NPI: 1336625524

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TEMECULA
VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT


PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A






CERTIFIED NURSE PRACTITIONER

BRAYTENBAH, MELANIE
Provider ID: 295830
Board Certified Specialty: No
MELANIE BRAYTENBAH
 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
 Phone: (619) 421-3361
Fax: (619) 869-4378
 After Hours Phone: (619)
421-3361
Provider Gender: Female
NPI: 1508370875







 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

BRAYTENBAH, MELANIE
Provider ID: 262342
Board Certified Specialty: No
MELANIE BRAYTENBAH
 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
 Phone: (619) 421-3361

Fax: (619) 869-4378
 After Hours Phone: (619)
421-3361
Provider Gender: Female
NPI: 1508370875
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

BRAYTENBAH, MELANIE
Provider ID: 268746
Board Certified Specialty: No
MELANIE BRAYTENBAH
 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
 Phone: (619) 421-3361
Fax: (619) 869-4378
 After Hours Phone: (619)
421-3361
Provider Gender: Female
NPI: 1508370875
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-5:00PM

D3. 专科提供者名录

 Website: N/A


CERTIFIED NURSE PRACTITIONER

CARRION GELABERT, ANA

Provider ID: 302402

Board Certified Specialty: No
ANA M CARRION GELABERT

 450 FOURTH AVESTE 215
CHULA VISTA, CA 91910

 Phone: (619) 425-3840

Fax: (619) 425-3842

 After Hours Phone: (619)
425-3840

Provider Gender: Female

NPI: 1023178233

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-6:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

DE DIOS, SARAH JANE

Provider ID: 302418

Board Certified Specialty: No
SARAH JANE J DE DIOS

 450 4TH AVE STE 215
CHULA VISTA, CA 91910

 Phone: (619) 425-3840

Fax: (619) 369-4880

 After Hours Phone: (619)
425-3840

Provider Gender: Female

NPI: 1528632742

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER


IBARRA, MARTHA

Provider ID: 308352


Board Certified Specialty: No

MARTHA A IBARRA

 855 THIRD AVESTE 2220
CHULA VISTA, CA 91911


 Phone: (619) 662-4100

Fax: (619) 662-4196

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1114957289

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,


SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8:30AM-2:30PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER


LANE, KIMBERLY

Provider ID: 301598

Board Certified Specialty: No
KIMBERLY A LANE

 752 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911


 Phone: (619) 397-4500

Fax: (858) 429-7931

 After Hours Phone: (619)
397-4500

Provider Gender: Female


NPI: 1457670119


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE


DILLMAN, ARIANA

Provider ID: 290495

Board Certified Specialty: Yes
ARIANA N DILLMAN

D3. 专科提供者名录





 333 H ST STE 2080
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (661) 205-6305
 After Hours Phone: (619)
662-4100
Provider Gender: Female
NPI: 1497067862
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: BEVERLY
HOSPITAL, TRI CITY MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999




American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM
 Website: N/A

EMERGENCY MEDICINE

EINSTEIN, ERIC

Provider ID: 290482
Board Certified Specialty: No
ERIC R EINSTEIN


 333 H ST STE 2080
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100
Provider Gender: Male
NPI: 1154683787
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CORONA
REGIONAL MED CTR
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM
 Website: N/A




EMERGENCY MEDICINE

FRENCH, TONIANNE

Provider ID: 290538
Board Certified Specialty: No
TONIANNE FRENCH

 333 H ST STE 2080
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100
Provider Gender: Female
NPI: 1770578411
 Provider English Spoken: Y
Cultural Competency: N





Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM
 Website: N/A

EMERGENCY MEDICINE

GALASSO, MADISON

Provider ID: 290477
Board Certified Specialty: Yes
MADISON M GALASSO





 333 H ST STE 2080
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100
Provider Gender: Female
NPI: 1053766766
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM
 Website: N/A

EMERGENCY MEDICINE

GRIESINGER, MICHAEL

Provider ID: 290537
Board Certified Specialty: Yes
MICHAEL G GRIESINGER

 333 H ST STE 2080
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100
Provider Gender: Male
NPI: 1336556604
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Adventist
Health Bakersfield, SAN

D3. 专科提供者名录

JOAQUIN GENERAL HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Provider ID: 290637

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:30AM-5:30PM

SA 8:00AM-2:30PM

 Website: N/A


EMERGENCY MEDICINE

PHAM, LILY


Provider ID: 304935

Board Certified Specialty: No

LILY M PHAM

 386 E H ST STE 202

CHULA VISTA, CA 91910


 Phone: (858) 966-1720

Fax: (858) 966-1725

 After Hours Phone: (858) 966-1720

Provider Gender: Female

NPI: 1811423072

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 Website: N/A

EMERGENCY MEDICINE


QUENZER, FAITH

Board Certified Specialty: No

FAITH C QUENZER

 333 H ST STE 2080

CHULA VISTA, CA 91910


 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619) 662-4100

Provider Gender: Female

NPI: 1295112670

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA

IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:30AM-5:30PM

SA 8:30AM-2:30PM

 Website: N/A

EMERGENCY MEDICINE

REARDON, JACQUELINE


Provider ID: 290673

Board Certified Specialty: No


JACQUELINE R REARDON

 333 H ST STE 2080

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619) 662-4100

Provider Gender: Female

NPI: 1417928557

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 10:00AM-4:00PM

M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

 Website: N/A

EMERGENCY MEDICINE

ROXAS, ROGER


Provider ID: 290600

Board Certified Specialty: No

ROGER R ROXAS

 333 H ST STE 2080

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619) 662-4100

Provider Gender: Male

NPI: 1578910840

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

D3. 专科提供者名录

8:30AM-5:30PM
SA 8:00AM-2:30PM

 Website: N/A

ENDOCRINOLOGY


METABOLISM DIABETES

CARRILLO, MARITZA

Provider ID: 290970

Board Certified Specialty: No
MARITZA E CARRILLO

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 425-1184

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1649628587


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-4:00PM

 Website: N/A


FAMILY PRACTICE

DEIS, CRISTINA


Provider ID: 302757

Board Certified Specialty: No
CRISTINA E DEIS

 1637 THIRD AVE STE H
CHULA VISTA, CA 91911

 Phone: (619) 662-4100

Fax: (619) 662-4196

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1639478811

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


FAMILY PRACTICE

VELASQUEZ, SHARON


Provider ID: 299164

Board Certified Specialty: No
SHARON F VELASQUEZ

 678 3RD AVE
CHULA VISTA, CA 91910



 Phone: (619) 662-4100

Fax: (619) 425-1184

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1972732584

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM

 Website: N/A


GASTROENTEROLOGY


SHAFFER, KATHERINE

Provider ID: 305510

Board Certified Specialty: No
KATHERINE M SHAFFER

 296 H ST STE 301
CHULA VISTA, CA 91910

 Phone: (619) 266-3332

 After Hours Phone: (619)
266-3332

Provider Gender: Female

NPI: 1336405695

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

GASTROENTEROLOGY

WIENER, GREGORY

D3. 专科提供者名录

Provider ID: 257480

Board Certified Specialty: Yes

GREGORY J WIENER

353 CHURCH AVE STE A
CHULA VISTA, CA 91910

Phone: (619) 585-8883

Fax: (619) 585-0166

After Hours Phone: (619)
585-8883

Provider Gender: Male

NPI: 1811099534

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH

8:30AM-4:30PM

F 8:30AM-3:00PM

Website: N/A

GASTROENTEROLOGY

WIENER, GREGORY

Provider ID: 290741

Board Certified Specialty: Yes

GREGORY J WIENER

353 CHURCH AVE STE A
CHULA VISTA, CA 91910

Phone: (619) 585-8883

Fax: (619) 585-0166

After Hours Phone: (619)
585-8883

Provider Gender: Male

NPI: 1811099534

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH

8:30AM-4:30PM

F 8:30AM-3:00PM

Website: N/A

GENERAL PRACTICE

SAMI, REMAN

Provider ID: 295214

Board Certified Specialty: No

REMAN A SAMI

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1295362242

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE

Provider ID: 268688

Board Certified Specialty: No

ELAINE ANDERSON

310 3RD AVE STE C11
CHULA VISTA, CA 91910

Phone: (619) 426-0841

Fax: (619) 426-9197

After Hours Phone: (619)
426-0841

Provider Gender: Female

NPI: 1063558856

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

HEARING AID DEALER / SUPPLIER

D3. 专科提供者名录

DAVIS, KELLE

Provider ID: 268651

Board Certified Specialty: No
KELLE L DAVIS

310 3RD AVE STE C11
CHULA VISTA, CA 91910

Phone: (619) 426-0841

Fax: (619) 426-9197

After Hours Phone: (619)
426-0841

Provider Gender: Female

NPI: 1902853344

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

HEMATOLOGY / ONCOLOGY

JOHNSON, KENNETH

Provider ID: 262288

Board Certified Specialty: No
KENNETH B JOHNSON

769 MEDICAL CENTER CT
STE 202
CHULA VISTA, CA 91911

Phone: (619) 482-8430

Fax: (619) 482-8005

After Hours Phone: (619)
482-8430

Provider Gender: Male

NPI: 1063527711

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

INTERVENTIONAL

CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 245576

Board Certified Specialty: No
BURHAN MOHAMEDALI

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1831393289

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
Adventist Health and Rideout

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM
Website: N/A

INTERVENTIONAL **CARDIOLOGY**

MOHAMEDALI, BURHAN

Provider ID: 309249

Board Certified Specialty: No
BURHAN MOHAMEDALI

865 3RD AVE STE 133
CHULA VISTA, CA 91911

Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1831393289

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish, Swahili
Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
Adventist Health and Rideout

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

INTERVENTIONAL **CARDIOLOGY**

NAGHI, JESSE

Provider ID: 247625

Board Certified Specialty: No
JESSE J NAGHI

D3. 专科提供者名录








 752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
 Phone: (619) 867-0557
Fax: (619) 867-0558
 After Hours Phone: (619)
867-0557
Provider Gender: Male
NPI: 1386896736
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Bulgarian,
Russian, Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, ALVARADO
HOSPITAL LLC, SHARP CHULA
VISTA MED CTR, SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERVENTIONAL CARDIOLOGY

ROUGH, STEVEN

Provider ID: 302985
Board Certified Specialty: No
STEVEN J ROUGH






 754 MEDICAL CENTER CT




STE 101
CHULA VISTA, CA 91911
 Phone: (619) 434-4208
Fax: (619) 434-4315
 After Hours Phone: (619)
434-4208
Provider Gender: Male
NPI: 1386821460
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERVENTIONAL CARDIOLOGY

ROUGH, STEVEN

Provider ID: 298442
Board Certified Specialty: No
STEVEN J ROUGH






 754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
 Phone: (619) 434-4208
Fax: (619) 434-4315
 After Hours Phone: (619)
434-4208
Provider Gender: Male
NPI: 1386821460
 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERVENTIONAL CARDIOLOGY

SHEREV, DIMITRI

Provider ID: 268950
Board Certified Specialty: No
DIMITRI A SHEREV

 752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
 Phone: (619) 867-0557
Fax: (619) 867-0558
 After Hours Phone: (619)
867-0557
Provider Gender: Male
NPI: 1154323996
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Bulgarian, Russian,
Spanish


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, ALVARADO


D3. 专科提供者名录


HOSPITAL LLC, SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont

Hospital, SHARP CORONADO HOSP AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A

INTERVENTIONAL CARDIOLOGY


SUDHAKAR, DEEPTHI

Provider ID: 296051

Board Certified Specialty: No
DEEPTHI SUDHAKAR

 765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911

 Phone: (619) 616-2100

Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Sharp
Grossmont Hospital, SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 15\99

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL CARDIOLOGY


SUDHAKAR, DEEPTHI

Provider ID: 295846

Board Certified Specialty: No
DEEPTHI SUDHAKAR

 765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911

 Phone: (619) 616-2100

Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Sharp
Grossmont Hospital, SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 15\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL CARDIOLOGY


SUDHAKAR, DEEPTHI

Provider ID: 309098

Board Certified Specialty: No

DEEPTHI SUDHAKAR

 865 3RD AVE STE 133
CHULA VISTA, CA 91911

 Phone: (760) 294-0480

Fax: (760) 294-0481

 After Hours Phone: (760)
294-0480

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Sharp
Grossmont Hospital, SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 15\99

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

MCCULLOUGH, DEIRDRE

Provider ID: 277263

Board Certified Specialty: No
DEIRDRE M MCCULLOUGH

 386 E H ST STE 202
CHULA VISTA, CA 91910

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1639153018

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR

D3. 专科提供者名录


WOMEN AND NEWBORNS,
Sharp Grossmont Hospital,
SHARP MEMORIAL HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


MELBER, DORA

Provider ID: 296993

Board Certified Specialty: No

DORA J MELBER

 386 E H ST STE 202
CHULA VISTA, CA 91910


 Phone: (858) 966-6710


Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1124413026

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hungarian, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


REIMERS, REBECCA

Provider ID: 294653

Board Certified Specialty: No

REBECCA M REIMERS

 386 E H ST STE 202
CHULA VISTA, CA 91910

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


RICHARDSON, ALVIE

Provider ID: 264687

Board Certified Specialty: No

ALVIE C RICHARDSON

 386 E H ST STE 202
CHULA VISTA, CA 91910

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1154305977

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, Sharp Grossmont
Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


WESTERMANN, MELISSA

Provider ID: 242523

Board Certified Specialty: No

MELISSA L WESTERMANN

 386 E H ST STE 202
CHULA VISTA, CA 91910

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female




NPI: 1760730758

 Provider English Spoken: Y
Cultural Competency: N

D3. 专科提供者名录

Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19



American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*


NEONATAL / PERINATAL MEDICINE

FLEMING, SARAH

Provider ID: 205646
Board Certified Specialty: No
SARAH E FLEMING

 435 H ST
CHULA VISTA, CA 91910
 *Phone: (619) 691-7000*
 *After Hours Phone: (619) 691-7000*


Provider Gender: Female
NPI: 1679809826

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

NEONATAL / PERINATAL MEDICINE

MATOBA, NANA



Provider ID: 297976
Board Certified Specialty: No

NANA MATOBA

 435 H ST
CHULA VISTA, CA 91910
 *Phone: (619) 691-7000*
Fax: (619) 260-7055

 *After Hours Phone: (619) 691-7000*

Provider Gender: Female
NPI: 1801952197


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Japanese*


Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*


NEONATAL / PERINATAL

MEDICINE

NIEMI, ANNA-KAISA



Provider ID: 262159
Board Certified Specialty: No
ANNA-KAISA NIEMI

 435 H ST
CHULA VISTA, CA 91910

 *Phone: (858) 966-5818*
Fax: (858) 966-7483

 *After Hours Phone: (858) 966-5818*

Provider Gender: Female
NPI: 1497941397


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Finnish, French, German, Spanish, Swedish*


Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*









 *Website: N/A*

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301823
Board Certified Specialty: No
KATHERINE N NYMAN





D3. 专科提供者名录

 435 H ST
CHULA VISTA, CA 91910
 Phone: (619) 691-7000
Fax: (619) 260-7055
 After Hours Phone: (619)
691-7000
Provider Gender: Female
NPI: 1003260951
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




NEONATAL / PERINATAL MEDICINE

SPEZIALE, MARK

Provider ID: 304829
Board Certified Specialty: No
MARK V SPEZIALE

 435 H ST
CHULA VISTA, CA 91910
 Phone: (619) 691-7000
Fax: (619) 260-7055
 After Hours Phone: (619)
691-7000
Provider Gender: Male
NPI: 1801978143
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL, SCRIPPS
MERCY HOSPITAL, UCSD
MEDICAL CTR, UCSD MEDICAL
CTR, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEPHROLOGY

HOREISH, ADAM

Provider ID: 290100
Board Certified Specialty: No
ADAM K HOREISH MD

 340 4TH AVE STE 4
CHULA VISTA, CA 91910
 Phone: (619) 427-1144
Fax: (619) 427-1185
 After Hours Phone: (619)
427-1144
Provider Gender: Male
NPI: 1760461206
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-5:00PM
 Website: N/A

NEPHROLOGY

HOREISH, ADAM

Provider ID: 99947
Board Certified Specialty: No
ADAM K HOREISH MD

 340 4TH AVE STE 4
CHULA VISTA, CA 91910
 Phone: (619) 427-1144
Fax: (619) 427-1185
 After Hours Phone: (619)
427-1144

Provider Gender: Male
NPI: 1760461206

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F

D3. 专科提供者名录

9:00AM-5:00PM
Website: N/A

NEPHROLOGY

HOREISH, ADAM

Provider ID: 99947
Board Certified Specialty: No
ADAM K HOREISH MD

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619)
427-1144

Provider Gender: Male

NPI: 1760461206

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEPHROLOGY

PATEL, AMAR

Provider ID: 245639
Board Certified Specialty: No
AMAR V PATEL

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619)
427-1144

Provider Gender: Male

NPI: 1821359605

Provider English Spoken: Y

Provider Language(s)
Spoken: Gujarati, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEPHROLOGY

PHAM, JENNIFER

Provider ID: 302863

Board Certified Specialty: No
JENNIFER A PHAM

340 FOURTH AVE STE 4
CHULA VISTA, CA 91910

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619)
427-1144

Provider Gender: Female

NPI: 1235629932

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEPHROLOGY

VIDEEN, JOHN

Provider ID: 65646

Board Certified Specialty: No
JOHN S VIDEEN

752 MEDICAL CENTER CT
STE 302

CHULA VISTA, CA 91911

Phone: (619) 421-3361

Fax: (619) 869-4378

After Hours Phone: (619)
421-3361

Provider Gender: Male

NPI: 1043318199

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SHARP CORONADO HOSP

AND HEALTHCARE CTR,
PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\150

American Sign Language (ASL):
N

Accessibility: CONTACT

D3. 专科提供者名录

PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

NEPHROLOGY

VIDEEN, JOHN

Provider ID: 290110

Board Certified Specialty: No

JOHN S VIDEEN

752 MEDICAL CENTER CT
STE 302

CHULA VISTA, CA 91911

Phone: (619) 421-3361

Fax: (619) 869-4378

After Hours Phone: (619)
421-3361

Provider Gender: Male

NPI: 1043318199

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SHARP CORONADO HOSP

AND HEALTHCARE CTR,

PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEPHROLOGY

VIDEEN, JOHN

Provider ID: 262286

Board Certified Specialty: No

JOHN S VIDEEN

752 MEDICAL CENTER CT
STE 302

CHULA VISTA, CA 91911

Phone: (619) 421-3361

Fax: (619) 869-4378

After Hours Phone: (619)
421-3361

Provider Gender: Male

NPI: 1043318199

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SHARP CORONADO HOSP

AND HEALTHCARE CTR,

PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEPHROLOGY

YUAN, HENRY

Provider ID: 268551

Board Certified Specialty: No

HENRY YUAN

340 4TH AVE STE 4

CHULA VISTA, CA 91910

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619)
427-1144

Provider Gender: Male

NPI: 1043442379

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, PARADISE

VALLEY HOSPITAL, Providence

St Joseph Hospital, Providence

St Jude Medical Center, SOUTH

COAST GLOBAL MEDICAL

CENTER INC, ENCOMPASS

HEALTH REHABILITATION

HOSPITAL OF TUSTIN, Foothill

Regional Medical Center,

Foothill Regional Medical

Center, KINDRED HOSPITAL

BREA, KINDRED HOSPITAL LA

MIRADA, KINDRED HOSPITAL

SANTA ANA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEUROLOGY

GUPTA, MONIKA

Provider ID: 307937

Board Certified Specialty: No

MONIKA A GUPTA

450 4TH AVE STE 215

CHULA VISTA, CA 91910

Phone: (619) 425-3840


Fax: (619) 425-3842


After Hours Phone: (619)
425-3840

Provider Gender: Female

D3. 专科提供者名录

NPI: 1922243401

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TEMECULA
VALLEY HOSPITAL INC, UCSD

LA JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY

HOSSEINZADEHMALEKI, ANA

Provider ID: 304999

Board Certified Specialty: No
ANA HOSSEINZADEHMALEKI

 450 FOURTH AVESTE 215
CHULA VISTA, CA 91910

 Phone: (619) 425-3840

Fax: (619) 485-5440

 After Hours Phone: (619)
425-3840

Provider Gender: Female

NPI: 1316471485

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Persian

Cultural Competency: N

Hospital Affiliation: TEMECULA
VALLEY HOSPITAL INC


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL): MAKSYM S MAREK

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


MANDEVILLE, ROSS

Provider ID: 309932

Board Certified Specialty: No

ROSS M MANDEVILLE

 450 4TH AVE STE 215
CHULA VISTA, CA 91910

 Phone: (619) 425-3840

Fax: (619) 425-3842

 After Hours Phone: (619)
425-3840

Provider Gender: Male

NPI: 1205084183

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON,
MAYERS MEMORIAL HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY

MAREK, MAKSYM


Provider ID: 306707

Board Certified Specialty: No

 450 FOURTH AVESTE 215
CHULA VISTA, CA 91910


 Phone: (619) 425-3840


Fax: (619) 425-3842

 After Hours Phone: (619)
425-3840

Provider Gender: Male

NPI: 1881182079

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish,
Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


MOHAMMAD, AHMADSHAH

Provider ID: 127244

Board Certified Specialty: No
AHMADSHAH S MOHAMMAD

 750 MEDICAL CENTER CT
STE 6

CHULA VISTA, CA 91911

 Phone: (619) 337-7900

Fax: (619) 337-7902

 After Hours Phone: (619)
337-7900

Provider Gender: Male

NPI: 1902973472

D3. 专科提供者名录

Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Farsi,
French, German, Pashto,
Persian, Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL, SHARP CHULA
VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY

SORIALOPEZ, JOSE

Provider ID: 295744
Board Certified Specialty: No
JOSE A SORIALOPEZ
 450 4TH AVE STE 215
CHULA VISTA, CA 91910
 Phone: (619) 425-3840
Fax: (619) 485-5440
 After Hours Phone: (619)
425-3840
Provider Gender: Male
NPI: 1225474034
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,

SCRIPPS MERCY HOSPITAL
CHULA VISTA, TEMECULA
VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-6:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

ATIGA, SCHUBERT

Provider ID: 268953
Board Certified Specialty: Yes
SCHUBERT J ATIGA
 752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911
 Phone: (619) 482-8406
Fax: (619) 482-6656
 After Hours Phone: (619)
482-8406
Provider Gender: Male
NPI: 1033138714

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TH
8:00AM-5:00PM

F 8:00AM-0:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

ATIGA, SCHUBERT

Provider ID: 290331
Board Certified Specialty: Yes
SCHUBERT J ATIGA
 752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911
 Phone: (619) 482-8406
Fax: (619) 482-6656
 After Hours Phone: (619)
482-8406
Provider Gender: Male
NPI: 1033138714
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 13\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TH
8:00AM-5:00PM
F 8:00AM-0:00PM
 Website: N/A

OCCUPATIONAL THERAPIST

MORRIS, SHEILA

Provider ID: 268926
Board Certified Specialty: No
SHEILA M MORRIS
 1020 TIERRA DEL REY STE
A-1

D3. 专科提供者名录

CHULA VISTA, CA 91910

Phone: (619) 585-7104

Fax: (619) 585-7106

After Hours Phone: (619) 585-7104

Provider Gender: Female

NPI: 1689039877

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
7:00AM-6:00PM
SA 7:00AM-2:00PM

Website: N/A

OPHTHALMOLOGY

GOLDMAN, DAVID

Provider ID: 308450

Board Certified Specialty: No

DAVID J GOLDMAN

311 DEL MAR AVE

CHULA VISTA, CA 91910

Phone: (619) 427-3355

Fax: (619) 427-0955

After Hours Phone: (619) 427-3355

Provider Gender: Male

NPI: 1629185467

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

GOLDMAN, DAVID

Provider ID: 308604

Board Certified Specialty: No

DAVID J GOLDMAN

311 DEL MAR AVE

CHULA VISTA, CA 91910

Phone: (619) 427-3355

Fax: (619) 427-0955

After Hours Phone: (619) 427-3355

Provider Gender: Male

NPI: 1629185467

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

HO, AMIEE

Provider ID: 297633

Board Certified Specialty: No

AMIEE HO

342 F ST

CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 422-0450

After Hours Phone: (619) 422-1471

Provider Gender: Female

NPI: 1396009478

Provider English Spoken: Y

Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

CHAIN, PEI CHI

Provider ID: 297621

Board Certified Specialty: No

PEI C CHAIN

342 F ST

CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 422-2025

After Hours Phone: (619) 422-1471

Provider Gender: Female

NPI: 1730676727

Provider English Spoken: Y

Provider Language(s)

Spoken: Mandarin

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

OPTOMETRIST

KOO, ANITA

D3. 专科提供者名录

Provider ID: 304830

Board Certified Specialty: No
ANITA K KOO

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1669825667

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

KOO, ANITA

Provider ID: 306902

Board Certified Specialty: No
ANITA K KOO

835 THIRD AVESTE A
CHULA VISTA, CA 91911

Phone: (619) 425-7755

Fax: (619) 425-2138

After Hours Phone: (619)
425-7755

Provider Gender: Female

NPI: 1669825667

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OPTOMETRIST

KOO, ANITA

Provider ID: 304537

Board Certified Specialty: No
ANITA K KOO

835 THIRD AVESTE A
CHULA VISTA, CA 91911

Phone: (619) 425-7755

Fax: (619) 425-2138

After Hours Phone: (619)
425-7755

Provider Gender: Female

NPI: 1669825667

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

MASCARENO, EFRAIN

Provider ID: 268679

Board Certified Specialty: No
EFRAIN MASCARENO

2260 OTAY LAKES RD STE
111
CHULA VISTA, CA 91915

Phone: (619) 421-5550

Fax: (866) 254-5707

After Hours Phone: (619)
421-5550

Provider Gender: Male

NPI: 1457507279

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-6:00PM

Website: N/A

OPTOMETRIST

MASCARENO, EFRAIN

Provider ID: 262228

Board Certified Specialty: No
EFRAIN MASCARENO

2260 OTAY LAKES RD STE
111
CHULA VISTA, CA 91915

Phone: (619) 421-5550

Fax: (866) 254-5707

After Hours Phone: (619)
421-5550

Provider Gender: Male

NPI: 1457507279

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-6:00PM

Website: N/A

D3. 专科提供者名录

OPTOMETRIST

MASCARENO, EFRAIN


Provider ID: 262229

Board Certified Specialty: No


EFRAIN MASCARENO

 440 4TH AVE STE 9

CHULA VISTA, CA 91910


 Phone: (619) 427-2020

Fax: (866) 254-5707

 After Hours Phone: (619)
427-2020

Provider Gender: Male

NPI: 1457507279

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-6:00PM

 Website: N/A

OPTOMETRIST

MASCARENO, EFRAIN


Provider ID: 268680

Board Certified Specialty: No

EFRAIN MASCARENO

 440 4TH AVE STE 9

CHULA VISTA, CA 91910


 Phone: (619) 427-2020

Fax: (866) 254-5707

 After Hours Phone: (619)
427-2020

Provider Gender: Male

NPI: 1457507279

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-6:00PM

 Website: N/A


OPTOMETRIST

NGUYEN, THU


Provider ID: 265518

Board Certified Specialty: No


THU T NGUYEN

 342 F ST

CHULA VISTA, CA 91910


 Phone: (619) 422-1471


Fax: (619) 422-0450

 After Hours Phone: (619)
422-1471

Provider Gender: Female

NPI: 1326323627

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPTOMETRIST

NGUYEN, THU


Provider ID: 298022

Board Certified Specialty: No

THU T NGUYEN

 342 F ST

CHULA VISTA, CA 91910

 Phone: (619) 422-1471


Fax: (619) 422-0450

 After Hours Phone: (619)
422-1471

Provider Gender: Female

NPI: 1326323627

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPTOMETRIST

NGUYEN, THU


Provider ID: 125032

Board Certified Specialty: No

THU T NGUYEN

 342 F ST

CHULA VISTA, CA 91910

 Phone: (619) 422-1471


Fax: (619) 422-0450

 After Hours Phone: (619)
422-1471




Provider Gender: Female

NPI: 1326323627

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog,








D3. 专科提供者名录

Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 13\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPTOMETRIST

RICHARDSON, JULIA








Provider ID: 297645
Board Certified Specialty: No
JULIA RICHARDSON

 342 F ST
CHULA VISTA, CA 91910
 Phone: (619) 422-1471
Fax: (619) 422-2025
 After Hours Phone: (619)
422-1471
Provider Gender: Female
NPI: 1770154528
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPTOMETRIST

SCOVILL, ALEXANDRA







Provider ID: 297625
Board Certified Specialty: No
ALEXANDRA L SCOVILL

 342 F ST
CHULA VISTA, CA 91910
 Phone: (619) 422-1471
Fax: (619) 422-0114
 After Hours Phone: (619)
422-1471
Provider Gender: Female
NPI: 1184146094
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPTOMETRIST

TRAN, JESSICA






Provider ID: 304888
Board Certified Specialty: No
JESSICA A TRAN

 340 FOURTH AVE STE 19
CHULA VISTA, CA 91910
 Phone: (619) 761-5308
Fax: (619) 591-1910
 After Hours Phone: (619)
761-5308
Provider Gender: Female
NPI: 1457922957
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY

CHANG, EDWARD


Provider ID: 309536
Board Certified Specialty: No
EDWARD W CHANG

 577 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 426-5181
Fax: (619) 426-0714
 After Hours Phone: (619)
426-5181
Provider Gender: Male
NPI: 1528146008
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY

MCCALLION, PATRICK

Provider ID: 290541
Board Certified Specialty: No
PATRICK G MCCALLION

 765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
 Phone: (619) 482-0565
Fax: (619) 482-2775
 After Hours Phone: (619)
482-0565
Provider Gender: Male
NPI: 1134144454
 Provider English Spoken: Y
 Provider Language(s)

D3. 专科提供者名录

Spoken: Arabic, Spanish
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY


SAEZ, NEIL

Provider ID: 302432

Board Certified Specialty: No
NEIL A SAEZ

 765 MEDICAL CENTER CT
STE 210

CHULA VISTA, CA 91911

 Phone: (619) 482-0565


Fax: (619) 482-2775

 After Hours Phone: (619)
482-0565

Provider Gender: Male

NPI: 1518456508

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

AGHILI, ROXANA

Provider ID: 303782

Board Certified Specialty: No
ROXANA AGHILI

 386 E H ST STE 202
CHULA VISTA, CA 91910


 Phone: (858) 966-1720

Fax: (858) 966-1725

 After Hours Phone: (858)
966-1720

Provider Gender: Female

NPI: 1851927883

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: KAISER
FOUNDATION HOSPITAL SAN
DIEGO, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


DEVERA, GEMMIE

Provider ID: N/A

Board Certified Specialty: No
GEMMIE S DEVERA

 386 E H ST STE 202
CHULA VISTA, CA 91910

 Phone: (858) 966-1720

 After Hours Phone: (858)
966-1720

Provider Gender: Female

NPI: 1366622078

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

GORHAM, LAURA


Provider ID: 275787

Board Certified Specialty: No
LAURA M GORHAM

 386 E H ST STE 202
CHULA VISTA, CA 91910

 Phone: (858) 966-1720

Fax: (858) 966-1725

 After Hours Phone: (858)
966-1720

Provider Gender: Female

NPI: 1316162324

 Provider English Spoken: Y
Cultural Competency: N


D3. 专科提供者名录

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A

PEDIATRIC EMERGENCY


MEDICINE

GROSS, MATTHEW

Provider ID: 297176

Board Certified Specialty: No
MATTHEW F GROSS

 386 E H ST STE 202
CHULA VISTA, CA 91910

 Phone: (858) 966-1720
Fax: (858) 966-1725

 After Hours Phone: (858)
966-1720

Provider Gender: Male

NPI: 1942223664


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY


MEDICINE

MENDES, CHANTAL

Provider ID: 295669

Board Certified Specialty: No
CHANTAL M MENDES

 386 E H ST STE 202
CHULA VISTA, CA 91910

 Phone: (858) 966-1720
Fax: (858) 966-1725

 After Hours Phone: (858)
966-1720

Provider Gender: Female

NPI: 1134681265

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A

PEDIATRIC EMERGENCY


MEDICINE

VAIDYA, KAMALA

Provider ID: 289411

Board Certified Specialty: No
KAMALA VAIDYA

 386 E H ST STE 202
CHULA VISTA, CA 91910

 Phone: (858) 966-1720
Fax: (858) 966-1725

 After Hours Phone: (858)
966-1720

Provider Gender: Female

NPI: 1083840920

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


PEDIATRICS

ROWHANI, NAGHMEH

Provider ID: 306065

Board Certified Specialty: No
NAGHMEH ROWHANI

 280 E ST
CHULA VISTA, CA 91910

 Phone: (619) 662-4100
Fax: (619) 426-2170

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1992876759

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Persian

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\17

American Sign Language (ASL):

D3. 专科提供者名录

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

PHYSICAL MEDICINE /


REHABILITATION

RICHARDSON, HENRY

Provider ID: 295275

*Board Certified Specialty: No
HENRY A RICHARDSON*

 340 4TH AVE STE 19
CHULA VISTA, CA 91910

 *Phone: (760) 607-5350*
Fax: (760) 607-5365

 *After Hours Phone: (760)
607-5350*

Provider Gender: Male

NPI: 1407052459

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL
CENTER*


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


PHYSICIANS ASSISTANT

GI, HUNG

Provider ID: 302126

*Board Certified Specialty: No
HUNG GI*



 280 E ST
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*
Fax: (619) 662-4196

 *After Hours Phone: (619)
662-4100*

Provider Gender: Male

NPI: 1023207404

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Chinese, French,
Spanish*


Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


PHYSICIANS ASSISTANT

GUTH, CARA

Provider ID: 299110

*Board Certified Specialty: No
CARA A GUTH*

 480 4TH AVE STE 501
CHULA VISTA, CA 91910

 *Phone: (619) 425-9510*
Fax: (858) 455-7197

 *After Hours Phone: (619)
425-9510*

Provider Gender: Female


NPI: 1992177182


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 21\999

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
9:00AM-5:00PM*

 *Website: N/A*


PHYSICIANS ASSISTANT


INDA, PRISCILLA

Provider ID: 309072

*Board Certified Specialty: No
PRISCILLA S INDA*

 429 BROADWAY
CHULA VISTA, CA 91910

 *Phone: (619) 434-0204*
Fax: (619) 337-0191

 *After Hours Phone: (619)
434-0204*

Provider Gender: Female

NPI: 1679008379

 *Provider English Spoken: Y*
 *Provider Language(s)*

*Spoken: Arabic, Russian,
Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:30AM-5:00PM*

 *Website: N/A*

PHYSICIANS ASSISTANT

INDA, PRISCILLA

Provider ID: 265072

D3. 专科提供者名录

Board Certified Specialty: No
PRISCILLA S INDA

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Phone: (619) 434-0204

Fax: (619) 337-0191

After Hours Phone: (619)
434-0204

Provider Gender: Female

NPI: 1679008379

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Russian,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\110

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

MARISCAL, MIGUEL

Provider ID: 308408

Board Certified Specialty: No
MIGUEL A MARISCAL

855 THIRD AVESTE 2200
CHULA VISTA, CA 91911

Phone: (619) 662-4100

Fax: (619) 662-4196

After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1760508923

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

VARGAS, CHRISTOPHER

Provider ID: 295945

Board Certified Specialty: No
CHRISTOPHER B VARGAS

2452 FENTON ST STE C101
CHULA VISTA, CA 91914

Phone: (619) 600-5309

Fax: (619) 655-4700

After Hours Phone: (619)
600-5309

Provider Gender: Male

NPI: 1922505775

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

VARGAS, CHRISTOPHER

Provider ID: 295828

Board Certified Specialty: No
CHRISTOPHER B VARGAS

2452 FENTON ST STE C203
CHULA VISTA, CA 91914

Phone: (619) 600-5309

Fax: (619) 655-4700

After Hours Phone: (619)
600-5309

Provider Gender: Male

NPI: 1922505775

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

VARGAS, CHRISTOPHER

Provider ID: 268744

Board Certified Specialty: No
CHRISTOPHER B VARGAS

2452 FENTON ST STE C203
CHULA VISTA, CA 91914

Phone: (619) 600-5309

Fax: (619) 655-4700

After Hours Phone: (619)
600-5309

D3. 专科提供者名录

Provider Gender: Male

NPI: 1922505775

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

WRIGHT, DEREK

Provider ID: 302389

Board Certified Specialty: No
DEREK J WRIGHT

340 FOURTH AVE STE 19
CHULA VISTA, CA 91910

Phone: (619) 761-5308

Fax: (619) 591-1910

After Hours Phone: (619)
761-5308

Provider Gender: Male

NPI: 1629674858

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PODIATRIST

BRAZIER, SETH

Provider ID: 306399

Board Certified Specialty: No
SETH J BRAZIER

855 THIRD AVE STE 1100
CHULA VISTA, CA 91911

Phone: (619) 880-5057

Fax: (858) 485-1515

After Hours Phone: (619)
880-5057

Provider Gender: Male

NPI: 1033554324

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: KAWEAH
DELTA DISTRICT HOSP, SELMA

COMMUNITY HOSPITAL,
ADVENTIST MEDICAL CENTER,

ADVENTIST MED CTR

REEDLEY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

PODIATRIST

CAINE, SAMUEL

Provider ID: 308211

Board Certified Specialty: No
SAMUEL CAINE

345 F ST STE 100

CHULA VISTA, CA 91910

Phone: (619) 727-3481

Fax: (619) 420-7087

After Hours Phone: (619)
727-3481

Provider Gender: Male

NPI: 1396230298

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp
Grossmont Hospital, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, SHARP MEMORIAL

HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PODIATRIST

CAINE, SAMUEL

Provider ID: 308636

Board Certified Specialty: No
SAMUEL CAINE

345 F ST STE 100

CHULA VISTA, CA 91910

Phone: (619) 727-3481


Fax: (619) 420-7087

After Hours Phone: (619)
727-3481

Provider Gender: Male


NPI: 1396230298

D3. 专科提供者名录

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SHARP CHULA
VISTA MED CTR, SHARP
CORONADO HOSP AND
HEALTHCARE CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


PODIATRIST

DAVIDSONIII, JOHN


Provider ID: 129545

Board Certified Specialty: No
JOHN A DAVIDSONIII III

 *345 F ST STE 100*
CHULA VISTA, CA 91910


 *Phone: (619) 427-3481*


Fax: (619) 420-7807

 *After Hours Phone: (619)*
427-3481

Provider Gender: Male

NPI: 1689069874

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA


VISTA, SHARP CHULA VISTA
MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
9:00AM-4:30PM

 *Website: N/A*


PODIATRIST

READ, TRENTON

Provider ID: 296655

Board Certified Specialty: No
TRENTON READ

 *855 3RD AVE STE 1100*
CHULA VISTA, CA 91911

 *Phone: (619) 631-4033*


Fax: (619) 880-5057

 *After Hours Phone: (619)*
631-4033

Provider Gender: Male

NPI: 1952963431

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
9:00AM-5:00PM

 *Website: N/A*


PSYCHOLOGIST

BAYLON, ALDO

Provider ID: 290243

Board Certified Specialty: No
ALDO BAYLON

 *678 3RD AVE*
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*


Fax: (619) 425-1184

 *After Hours Phone: (619)*
662-4100

Provider Gender: Male

NPI: 1649429150

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-8:00PM

SA 8:00AM-4:00PM

 *Website: N/A*


PSYCHOLOGIST

CELAYA, PATRICIA


Provider ID: 294875

Board Certified Specialty: No
PATRICIA E CELAYA

 *678 3RD AVE*
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*


Fax: (619) 425-1184

 *After Hours Phone: (619)*
662-4100

Provider Gender: Female

NPI: 1952656902

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N

D3. 专科提供者名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-8:00PM

SA 8:00AM-4:00PM

 Website: N/A

PSYCHOLOGIST


GALLO, LINDA

Provider ID: 296782

Board Certified Specialty: No

LINDA C GALLO

 780 BAY BLVD STE 200
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 240-7852

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1427773621

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

GOULD, HILARY


Provider ID: 290467

Board Certified Specialty: No


HILARY GOULD

 678 3RD AVE

CHULA VISTA, CA 91910


 Phone: (619) 662-4100

Fax: (619) 271-0260

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1104297696

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 10:00AM-4:00PM

M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

 Website: N/A

PSYCHOLOGIST


WIJAYARATNE, IMANIE

Provider ID: 290092


Board Certified Specialty: No

IMANIE S WIJAYARATNE

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 245-1184

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1932358355

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

RADIATION ONCOLOGY


CARMONA, RUBEN

Provider ID: 303101


Board Certified Specialty: No

RUBEN CARMONA

 769 MEDICAL CENTER CT
CHULA VISTA, CA 91911

 Phone: (858) 939-5010

Fax: (619) 740-8499

 After Hours Phone: (858)
939-5010

Provider Gender: Male

NPI: 1275929242

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp

Grossmont Hospital, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

RADIATION ONCOLOGY


COLEMAN, LORI

Provider ID: 206393

Board Certified Specialty: No

LORI A COLEMAN

 769 MEDICAL CENTER CT
CHULA VISTA, CA 91911

 Phone: (619) 502-5851

D3. 专科提供者名录

Fax: (619) 502-5865

☎ After Hours Phone: (619) 502-5851

Provider Gender: Female

NPI: 1053348920

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
PALOMAR MEDICAL CENTER,

Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

RADIATION ONCOLOGY

VOLPP, PAUL

Provider ID: 221102

Board Certified Specialty: No

PAUL B VOLPP

📍 769 MEDICAL CENTER CT
CHULA VISTA, CA 91911

☎ Phone: (619) 502-5851

Fax: (619) 502-5865

☎ After Hours Phone: (619) 502-5851

Provider Gender: Male

NPI: 1225186232

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,
GROSSMONT HOSPITAL,
PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

CHENG, BRANDON

Provider ID: 304529

Board Certified Specialty: No

BRANDON G CHENG

📍 1392 E PALOMAR ST STE
503

CHULA VISTA, CA 91913

☎ Phone: (619) 482-3000

Fax: (619) 482-3001

☎ After Hours Phone: (619) 482-3000

Provider Gender: Male

NPI: 1336894724

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH
7:00AM-7:00PM
F 7:00AM-5:00PM

SA 8:00AM-1:00PM

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON

Provider ID: 307786

Board Certified Specialty: No

BRANDON G CHENG

📍 1392 E PALOMAR ST STE
503

CHULA VISTA, CA 91913

☎ Phone: (619) 482-3000

Fax: (619) 482-3001

☎ After Hours Phone: (619) 482-3000

Provider Gender: Male

NPI: 1336894724

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH
7:00AM-7:00PM

F 7:00AM-5:00PM

SA 8:00AM-1:00PM

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

JAIN, ALEXANDRA

Provider ID: 305150

Board Certified Specialty: No

ALEXANDRA F JAIN

📍 880 THIRD AVESTE A
CHULA VISTA, CA 91911

☎ Phone: (619) 205-4585

Fax: (619) 271-3183

☎ After Hours Phone: (619)

D3. 专科提供者名录

205-4585
Provider Gender: Female
NPI: 1063170603

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 55\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA

Provider ID: 299889
Board Certified Specialty: No
ANDREA L JIMENEZ

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
 Phone: (619) 482-3000
Fax: (619) 482-3001
 After Hours Phone: (619)
482-3000

Provider Gender: Female
NPI: 1407440670

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Hours: M-F 7:00AM-7:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI

Provider ID: 287100
Board Certified Specialty: No
PRACHI KARANDE

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
 Phone: (619) 482-3000
Fax: (619) 482-3001
 After Hours Phone: (619)
482-3000

Provider Gender: Female
NPI: 1699357525

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI

Provider ID: 301380
Board Certified Specialty: No
PRACHI KARANDE

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
 Phone: (619) 482-3000
Fax: (619) 482-3001
 After Hours Phone: (619)

482-3000
Provider Gender: Female
NPI: 1699357525

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA

Provider ID: 305013
Board Certified Specialty: No
TIA NGUYEN

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
 Phone: (619) 482-3000
Fax: (619) 482-3001
 After Hours Phone: (619)
482-3000

Provider Gender: Female
NPI: 1457136269

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Hours: M-TH
7:00AM-7:00PM
F 7:00AM-4:00PM
 Website: N/A

D3. 专科提供者名录

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA

Provider ID: 305014

Board Certified Specialty: No
TIA NGUYEN

1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000

Provider Gender: Female
NPI: 1457136269

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-TH
7:00AM-7:00PM
F 7:00AM-4:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW

Provider ID: 286782

Board Certified Specialty: No
ANDREW NOVENCIDO

1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000

Provider Gender: Male

NPI: 1447723937

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW

Provider ID: 301994

Board Certified Specialty: No
ANDREW NOVENCIDO

1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000

Provider Gender: Male
NPI: 1447723937

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST

THERAPIST

SPARKS, TODD

Provider ID: 129142

Board Certified Specialty: No
TODD M SPARKS

1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Phone: (619) 482-3000
Fax: (619) 482-3001

After Hours Phone: (619) 482-3000

Provider Gender: Male
NPI: 1265481139

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M 7:00AM-7:00PM
TU 7:00AM-0:00PM
W-TH 7:00AM-7:00PM
F 7:00AM-0:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST

SPARKS, TODD

Provider ID: 301108

Board Certified Specialty: No
TODD M SPARKS

1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Phone: (619) 482-3000
Fax: (619) 482-3001

After Hours Phone: (619)

D3. 专科提供者名录

482-3000
Provider Gender: Male
NPI: 1265481139
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M 7:00AM-7:00PM
TU 7:00AM-0:00PM
W-TH 7:00AM-7:00PM
F 7:00AM-0:00PM
🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

STAHL, KEVIN
Provider ID: 305424
Board Certified Specialty: No
KEVIN STAHL
📍 1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
☎ Phone: (619) 482-3000
Fax: (619) 482-3001
🕒 After Hours Phone: (619)
482-3000
Provider Gender: Male
NPI: 1760194302
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

STAHL, KEVIN
Provider ID: 301418
Board Certified Specialty: No
KEVIN STAHL
📍 1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
☎ Phone: (619) 482-3000
Fax: (619) 482-3001
🕒 After Hours Phone: (619)
482-3000
Provider Gender: Male
NPI: 1760194302

☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

VILLANUEVA, GIOVANNI
Provider ID: 301532
Board Certified Specialty: No
GIOVANNI X VILLANUEVA
📍 1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
☎ Phone: (619) 482-3000
Fax: (619) 482-3001

🕒 After Hours Phone: (619)
482-3000
Provider Gender: Male
NPI: 1063046878
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 7:00AM-7:00PM
🌐 Website: N/A


RHEUMATOLOGY


CHITKARA, PUJA
Provider ID: 262358
Board Certified Specialty: No
PUJA CHITKARA
📍 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
☎ Phone: (619) 623-3000
Fax: (619) 623-3001
🕒 After Hours Phone: (619)
623-3000
Provider Gender: Female
NPI: 1871718189
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Hindi, Russian,
Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL
Medi-Cal Open Panel: Yes

D3. 专科提供者名录

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A

RHEUMATOLOGY


CHWA, JEFFREY

Provider ID: 268780

Board Certified Specialty: No
JEFFREY K CHWA

 765 MEDICAL CENTER CT
STE 216

CHULA VISTA, CA 91911

 Phone: (619) 623-3000

Fax: (619) 623-3001

 After Hours Phone: (619)
623-3000

Provider Gender: Male

NPI: 1285989236

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SPEECH PATHOLOGIST


AROCHO-SALGADO, MIRELIS

Provider ID: 296928

Board Certified Specialty: No

MIRELIS AROCHO-SALGADO

 333 H ST STE 5000
CHULA VISTA, CA 91910

 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1063660165


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


SPEECH PATHOLOGIST

CLARK, MELISSA

Provider ID: 296923

Board Certified Specialty: No
MELISSA A CLARK

 333 H ST STE 5000
CHULA VISTA, CA 91910



 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1760546428

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Arabic, Armenian,
Farsi, Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: SU 7:00AM-7:00PM
M-F 7:00AM-7:00PM

 Website: N/A


SPEECH PATHOLOGIST

DURNAN, CASSANDRA

Provider ID: 307884

Board Certified Specialty: No
CASSANDRA L DURNAN

 333 H ST STE 5000
CHULA VISTA, CA 91910

 Phone: (877) 757-8353


Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1073873501

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 7:00AM-7:00PM

 Website: N/A


SURGERY GENERAL

CASILLAS BERUMEN, SERGIO

Provider ID: 304607

Board Certified Specialty: No
SERGIO G CASILLAS
BERUMEN

 1111 BROADWAY STE 305
CHULA VISTA, CA 91911

 Phone: (619) 576-7007

Fax: (619) 567-7775

 After Hours Phone: (619)

D3. 专科提供者名录

576-7007
Provider Gender: Male
NPI: 1437470762
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR
HEALTH, PARADISE VALLEY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MERCY HOSPITAL,
PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY ORTHOPEDIC

ANDRY, JAMES

Provider ID: 302084
Board Certified Specialty: No
JAMES P ANDRY
 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
 Phone: (858) 824-1703
Fax: (858) 455-6473
 After Hours Phone: (858)
824-1703
Provider Gender: Male
NPI: 1679726103
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS MERCY
HOSPITAL, SHARP CHULA
VISTA MED CTR, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, Sharp
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

SURGERY ORTHOPEDIC

KUSNEZOV, NICHOLAS

Provider ID: 303195
Board Certified Specialty: No
NICHOLAS A KUSNEZOV
 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
 Phone: (858) 824-1703
Fax: (858) 455-6473
 After Hours Phone: (858)
824-1703
Provider Gender: Male
NPI: 1396185161
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TWIN
CITIES COMMUNITY
HOSPITAL, TRI CITY MEDICAL

CTR, PARADISE VALLEY
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SHARP CHULA
VISTA MED CTR, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, Sharp
Grossmont Hospital, Sharp
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A



CMP PENDLETON


CERTIFIED NURSE PRACTITIONER

FREEMAN, WANDA

Provider ID: 298117
Board Certified Specialty: No
WANDA FREEMAN
 619 CROUCH ST
CMP PENDLETON, CA
92054
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
Provider Gender: Female
NPI: 1659504264
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

D3. 专科提供者名录

American Sign Language (ASL):  Phone: (619) 437-8154
N  Fax: (310) 989-3092

 Accessibility: CONTACT PROVIDER

 Website: N/A

CORONADO


CERTIFIED NURSE


PRACTITIONER


LANE, KIMBERLY

Provider ID: 301599

Board Certified Specialty: No
KIMBERLY A LANE

 230 PROSPECT PL STE 210
CORONADO, CA 92118

 Phone: (619) 299-0670

 Fax: (858) 429-7929

 After Hours Phone: (619)
299-0670

Provider Gender: Female

NPI: 1457670119

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

HEARING AID DEALER /

SUPPLIER

DAVIS, KELLE

Provider ID: 268655

Board Certified Specialty: No
KELLE L DAVIS

 801 ORANGE AVE
CORONADO, CA 92118

 After Hours Phone: (619)
437-8154

Provider Gender: Female
NPI: 1902853344

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC


ANDRY, JAMES

Provider ID: 302087

Board Certified Specialty: No
JAMES P ANDRY

 230 PROSPECT PL STE 230
CORONADO, CA 92118


 Phone: (619) 435-7282

 Fax: (619) 435-3723

 After Hours Phone: (619)
435-7282

Provider Gender: Male

NPI: 1679726103

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, Sharp
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC


PALLIA, CHRISTOPHER


Provider ID: 302102

Board Certified Specialty: No
CHRISTOPHER S PALLIA

 230 PROSPECT PL STE 230
CORONADO, CA 92118

 Phone: (619) 435-7282

 Fax: (619) 435-3723

 After Hours Phone: (619)
435-7282

Provider Gender: Male

NPI: 1497751457

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

D3. 专科提供者名录

American Sign Language (ASL): Provider ID: 290945

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

Email: INFO@PALLIAMD.COM

EL CAJON


CARDIOVASCULAR DISEASE

LERNER, JONATHAN

Provider ID: 303446

Board Certified Specialty: No
JONATHAN H LERNER

 1625 E MAIN ST STE 201
EL CAJON, CA 92021


 Phone: (619) 486-6512

Fax: (619) 616-2104

 After Hours Phone: (619)
486-6512

Provider Gender: Male

NPI: 1962899823

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

CERTIFIED ACUPUNCTURIST

CRAFT, KEVIN

Board Certified Specialty: No
KEVIN E CRAFT

 855 E MADISON AVE
EL CAJON, CA 92020


 Phone: (619) 440-2751

Fax: (360) 462-2746

 After Hours Phone: (619)
440-2751

Provider Gender: Male

NPI: 1659745610

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: TU-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

HAMID, WAHIDA

Provider ID: 302295

Board Certified Specialty: No
WAHIDA N HAMID

 875 EL CAJON BLVD
EL CAJON, CA 92020


 Phone: (619) 662-4100


Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1164812293

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Persian, Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE


PRACTITIONER

MANRIQUEZ, LISETTE

Provider ID: 307102

Board Certified Specialty: No
LISETTE MANRIQUEZ

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1760058911

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN


DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 专科提供者名录

CERTIFIED NURSE

PRACTITIONER

PIRTLE, KEYSHONE

Provider ID: 284244

Board Certified Specialty: No
KEYSHONE D PIRTLE

📍 5442 SYCUAN RD
EL CAJON, CA 92019

☎ Phone: (619) 445-0707

Fax: (619) 445-9764

🕒 After Hours Phone: (619)
445-0707

Provider Gender: Male

NPI: 1417567827

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, SHANTRICE

Provider ID: 296007

Board Certified Specialty: No
SHANTRICE M WILLIAMS

📍 855 E MADISON AVE
EL CAJON, CA 92020

☎ Phone: (619) 440-2751

Fax: (360) 462-2746

🕒 After Hours Phone: (619)
440-2751

Provider Gender: Female

NPI: 1578865549

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 8:00AM-2:00PM
TU-F 8:00AM-5:00PM

🌐 Website: N/A

DERMATOLOGY

LIN, SHINKO

Provider ID: 308218

Board Certified Specialty: No
SHINKO K LIN

📍 222 W MADISON AVE
EL CAJON, CA 92020

☎ Phone: (619) 579-5115

Fax: (619) 749-6174

🕒 After Hours Phone: (619)
579-5115

Provider Gender: Female

NPI: 1205130036

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-4:30PM

🌐 Website: N/A

DERMATOLOGY

LIN, SHINKO

Provider ID: 306321

Board Certified Specialty: No
SHINKO K LIN

📍 222 W MADISON AVE
EL CAJON, CA 92020

☎ Phone: (619) 579-5115

Fax: (619) 749-6174

🕒 After Hours Phone: (619)
579-5115

Provider Gender: Female

NPI: 1205130036

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-4:30PM

🌐 Website: N/A

GASTROENTEROLOGY

NOVO, MEGAN

Provider ID: 296067

Board Certified Specialty: No
MEGAN E NOVO

📍 2732 NAVAJO RD STE 200
EL CAJON, CA 92020

☎ Phone: (619) 266-3332

Fax: (619) 266-6000




🕒 After Hours Phone: (619)
266-3332

Provider Gender: Female





NPI: 1770961971

☐ Provider English Spoken: Y

D3. 专科提供者名录


Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL CHULA VISTA, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*


HEARING AID DEALER / SUPPLIER




ANDERSON, ELAINE
Provider ID: 268692
Board Certified Specialty: No
ELAINE ANDERSON
 1767 E MAIN ST
EL CAJON, CA 92021
 *Phone: (619) 440-6516*
Fax: (619) 440-6547
 *After Hours Phone: (619) 440-6516*
Provider Gender: Female
NPI: 1063558856
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*



HEARING AID DEALER / SUPPLIER



DAVIS, KELLE
Provider ID: 268650
Board Certified Specialty: No
KELLE L DAVIS
 1767 E MAIN ST
EL CAJON, CA 92021
 *Phone: (619) 440-6516*
Fax: (619) 440-6547
 *After Hours Phone: (619) 440-6516*
Provider Gender: Female
NPI: 1902853344



 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:30AM-5:00PM*
 *Website: N/A*






INTERNAL MEDICINE

AWDISHO, ALAN
Provider ID: 291282
Board Certified Specialty: No
ALAN AWDISHO
 875 EL CAJON BLVD
EL CAJON, CA 92020
 *Phone: (619) 662-4100*
Fax: (619) 205-6305

 *After Hours Phone: (619) 662-4100*
Provider Gender: Male
NPI: 1164795498
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Assyrian, Syriac*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*


INTERNAL MEDICINE

MAY, LOUIS
Provider ID: 294916
Board Certified Specialty: No
LOUIS M MAY
 875 EL CAJON BLVD
EL CAJON, CA 92020
 *Phone: (619) 662-4100*
Fax: (619) 205-6305
 *After Hours Phone: (619) 662-4100*
Provider Gender: Male
NPI: 1720497514
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

D3. 专科提供者名录

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


INTERNAL MEDICINE

MICHAEL, RAMI

Provider ID: 294908

*Board Certified Specialty: No
RAMI Y MICHAEL*

 875 EL CAJON BLVD
EL CAJON, CA 92020


 *Phone: (619) 662-4100*


Fax: (619) 205-6305

 *After Hours Phone: (619)
662-4100*

Provider Gender: Male

NPI: 1467871673

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic*

Cultural Competency: N


*Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL*


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:30AM-5:00PM*

 *Website: N/A*

INTERVENTIONAL

CARDIOLOGY


MOHAMEDALI, BURHAN

Provider ID: 309247

Board Certified Specialty: No

BURHAN MOHAMEDALI

 1625 E MAIN ST STE 201
EL CAJON, CA 92021


 *Phone: (619) 486-6512*


Fax: (619) 486-6470

 *After Hours Phone: (619)
486-6512*

Provider Gender: Male

NPI: 1831393289

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish, Swahili*

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

Adventist Health and Rideout


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
9:00AM-5:00PM*

 *Website: N/A*

INTERVENTIONAL

CARDIOLOGY


SHEREV, DIMITRI


Provider ID: 302988

Board Certified Specialty: No

DIMITRI A SHEREV


 1380 EL CAJON BLVD
EL CAJON, CA 92020


 *Phone: (619) 867-0557*

 *After Hours Phone: (619)
867-0557*

Provider Gender: Male

NPI: 1154323996

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Bulgarian, Russian,*

Spanish

Cultural Competency: N

*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL*

*HOSPITAL, ALVARADO
HOSPITAL LLC, SHARP CHULA*

VISTA MED CTR, TRI CITY

MEDICAL CTR, TRI CITY

MEDICAL CTR, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, Sharp Grossmont

Hospital, SHARP CORONADO

HOSP AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*

INTERVENTIONAL

CARDIOLOGY


SUDHAKAR, DEEPTHI

Provider ID: 309095

Board Certified Specialty: No

DEEPTHI SUDHAKAR

 1625 E MAIN ST STE 201
EL CAJON, CA 92021

 *Phone: (619) 486-6512*

Fax: (619) 616-2104

 *After Hours Phone: (619)
486-6512*

Provider Gender: Female

NPI: 1811307051

 *Provider English Spoken: Y*

Cultural Competency: N


D3. 专科提供者名录

*Hospital Affiliation: Sharp
Grossmont Hospital, SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 15\99*

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 295843

*Board Certified Specialty: No
DEEPTHI SUDHAKAR*

 *1625 E MAIN ST STE 201
EL CAJON, CA 92021*

 *Phone: (619) 486-6512
Fax: (619) 616-2104*

 *After Hours Phone: (619)
486-6512*

Provider Gender: Female

NPI: 1811307051


 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation: Sharp
Grossmont Hospital, SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 15\999*

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

OPTOMETRIST

AOTO, KIM


Provider ID: 268721

Board Certified Specialty: No


KIM N AOTO

 *450 FLETCHER PKWY STE
112*

EL CAJON, CA 92020


 *Phone: (800) 898-2020*

Fax: (844) 897-3788

 *After Hours Phone: (800)
898-2020*

Provider Gender: Female

NPI: 1780935650

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Vietnamese*

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

OPTOMETRIST


KOO, ANITA

Provider ID: 306904

Board Certified Specialty: No

ANITA K KOO

 *231 W MAIN ST
EL CAJON, CA 92020*

 *Phone: (619) 425-7755*

Fax: (619) 425-2138

 *After Hours Phone: (619)
425-7755*

Provider Gender: Female

NPI: 1669825667

 *Provider English Spoken: Y
Cultural Competency: N*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

PHYSICIANS ASSISTANT

INDA, PRISCILLA


Provider ID: 265073

Board Certified Specialty: No


PRISCILLA S INDA

 *328 HIGHLAND AVE STE
200*

EL CAJON, CA 92020

 *Phone: (619) 930-9404*


Fax: (619) 930-9426

 *After Hours Phone: (619)
930-9404*

Provider Gender: Female

NPI: 1679008379

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Arabic, Russian,
Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

*MERCY HOSPITAL CHULA
VISTA*


Medi-Cal Open Panel: Yes

Min/Max Age: 18\110

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:30AM-5:00PM*

D3. 专科提供者名录


 Website: N/A


PHYSICIANS ASSISTANT

LE, TAYLOR

Provider ID: 304574

Board Certified Specialty: No
TAYLOR T LE

 855 E MADISON AVE
EL CAJON, CA 92020


 Phone: (619) 440-2751

Fax: (360) 462-2746

 After Hours Phone: (619)
440-2751

Provider Gender: Female

NPI: 1396478400

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

RAMOS, JACQUELYN

Provider ID: 301106

Board Certified Specialty: No
JACQUELYN RAMOS

 855 E MADISON AVE
EL CAJON, CA 92020


 Phone: (619) 440-2751

Fax: (360) 462-2746

 After Hours Phone: (619)
440-2751

Provider Gender: Female

NPI: 1003515131

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

ROSENBLATT, SHERILYN

Provider ID: 305449

Board Certified Specialty: No
SHERILYN ROSENBLATT

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1114041621

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PSYCHOLOGIST

ARAIZA, ERNESTINA

Provider ID: 290286

Board Certified Specialty: No
ERNESTINA ARAIZA

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

Fax: (619) 785-3356

 After Hours Phone: (619)
662-4100

Provider Gender: Female


NPI: 1568608636

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST

CASEY, SHANNON

Provider ID: 306785

Board Certified Specialty: No
SHANNON K CASEY

 215 W MADISON AVE
EL CAJON, CA 92020

 Phone: (760) 737-6935


Fax: (760) 741-2782

 After Hours Phone: (760)
737-6935

Provider Gender: Female

NPI: 1548873755

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Sign Language

Cultural Competency: N


Medi-Cal Open Panel: No


Min/Max Age: 0\999

American Sign Language (ASL):

D3. 专科提供者名录

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
9:00AM-7:00PM*

 *Website: N/A*


PSYCHOLOGIST

CASEY, SHANNON

Provider ID: 290309

*Board Certified Specialty: No
SHANNON K CASEY*

 215 W MADISON AVE
EL CAJON, CA 92020


 *Phone: (760) 737-6935*

Fax: (760) 741-2782

 *After Hours Phone: (760)
737-6935*

Provider Gender: Female

NPI: 1548873755

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Sign Language*

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
9:00AM-7:00PM*

 *Website: N/A*


PSYCHOLOGIST

GUARDADO-SOTO, RAQUEL

Provider ID: 290342

*Board Certified Specialty: No
RAQUEL GUARDADO-SOTO*

 855 E MADISON AVE
EL CAJON, CA 92020

 *Phone: (619) 440-2751*

Fax: (360) 462-2746

 *After Hours Phone: (619)
440-2751*

Provider Gender: Female

NPI: 1194999276

 *Provider English Spoken: Y
Cultural Competency: N*


Medi-Cal Open Panel: Yes

Min/Max Age: 13\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


PSYCHOLOGIST

WHEELER, KIM

Provider ID: 302144

*Board Certified Specialty: No
KIM N WHEELER*

 875 EL CAJON BLVD
EL CAJON, CA 92020

 *Phone: (619) 662-4100*

Fax: (619) 785-3356

 *After Hours Phone: (619)
662-4100*

Provider Gender: Female

NPI: 1700577434

 *Provider English Spoken: Y
Cultural Competency: N*


Medi-Cal Open Panel: Yes


Min/Max Age: 11\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


REGISTERED PHYSICAL THERAPIST

CAMPA, PATRICIA

Provider ID: 302398

*Board Certified Specialty: No
PATRICIA CAMPA*

 860 JAMACHA RD STE 203
EL CAJON, CA 92019


 *Phone: (619) 573-6373*

Fax: (619) 378-6578

 *After Hours Phone: (619)
573-6373*

Provider Gender: Female

NPI: 1528079357

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


REGISTERED PHYSICAL THERAPIST

MORRIS, CHAD

Provider ID: 302403

*Board Certified Specialty: No
CHAD R MORRIS*

 860 JAMACHA RD STE 203
EL CAJON, CA 92019

 *Phone: (619) 573-6373*

Fax: (619) 378-6578

 *After Hours Phone: (619)
573-6373*

Provider Gender: Male

NPI: 1841307063

 *Provider English Spoken: Y
Cultural Competency: N*

D3. 专科提供者名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

ENCINITAS

CARDIOVASCULAR DISEASE

DURAN, EDWARD

Provider ID: 310052

Board Certified Specialty: No

EDWARD K DURAN

 477 N EL CAMINO REAL
STE D300

ENCINITAS, CA 92024


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1578903936

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304139

Board Certified Specialty: No

JACQUELINE ARELLANO

 1200 GARDEN VIEW RD

ENCINITAS, CA 92024


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


CERTIFIED ACUPUNCTURIST

GONZALEZ, ANDRES


Provider ID: 298659

Board Certified Specialty: No

ANDRES D GONZALEZ

 1130 2ND ST

ENCINITAS, CA 92024


 Phone: (760) 736-6767


Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1841857729

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304133

Board Certified Specialty: No

FIDES Q JULIAN

 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


CARDINELL, ANNA

Provider ID: 291412

Board Certified Specialty: No

ANNA C CARDINELL

 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

 Phone: (800) 926-8273

Fax: (888) 539-8781

D3. 专科提供者名录

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1306978614

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHAMBERS, KATRINA

Provider ID: 303521

Board Certified Specialty: No
KATRINA N CHAMBERS

📍 781 GARDEN VIEW CT STE 100

ENCINITAS, CA 92024

☎ Phone: (760) 183-0441

Fax: (760) 635-5972

☎ After Hours Phone: (760) 183-0441

Provider Gender: Female

NPI: 1710695143

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

DWYER, ERIN

Provider ID: 301447

Board Certified Specialty: No
ERIN DWYER

📍 320 SANTA FE DR STE 108
ENCINITAS, CA 92024

☎ Phone: (760) 436-4558

Fax: (858) 429-7926

☎ After Hours Phone: (760) 436-4558

Provider Gender: Female

NPI: 1003260894

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HEAD, KRISTIN

Provider ID: 268657

Board Certified Specialty: No
KRISTIN N HEAD

📍 477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

☎ Phone: (760) 944-5545

Fax: (760) 944-3927

☎ After Hours Phone: (760) 944-5545

Provider Gender: Female

NPI: 1699078923

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HOOPER, BONNIE

Provider ID: 275253

Board Certified Specialty: No
BONNIE J HOOPER

📍 477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024

☎ Phone: (760) 436-2300

Fax: (760) 436-5482

☎ After Hours Phone: (760) 436-2300

Provider Gender: Female

NPI: 1821062878

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

D3. 专科提供者名录

CERTIFIED NURSE

PRACTITIONER

KORMANIK, PATRICIA

Provider ID: 282071

Board Certified Specialty: No

PATRICIA A KORMANIK

1200 GARDEN VIEW RD
STE 200

ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093895047

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

LANE, KIMBERLY

Provider ID: 301602

Board Certified Specialty: No

KIMBERLY A LANE

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Phone: (760) 436-4558

Fax: (858) 429-7926

After Hours Phone: (760)

436-4558

Provider Gender: Female

NPI: 1457670119

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

PAKENHAM, KATE

Provider ID: 296268

Board Certified Specialty: No

KATE E PAKENHAM

1130 2ND ST

ENCINITAS, CA 92024

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1578299343

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 8:00AM-8:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

SRILASAK, MICHELE

Provider ID: 281856

Board Certified Specialty: No

MICHELE SRILASAK

1200 GARDEN VIEW RD
STE 200

ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265487326

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

YEO, ALEXANDRIA

Provider ID: 299940

Board Certified Specialty: No

ALEXANDRIA YEO

1505 ENCINITAS BLVD
ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

D3. 专科提供者名录

926-8273
Provider Gender: Female
NPI: 1902368319
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

HUPFELD, CHRISTOPHER

Provider ID: 277111
Board Certified Specialty: No
CHRISTOPHER J HUPFELD
📍 1200 GARDEN VIEW RD
STE 100
ENCINITAS, CA 92024
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1568429165
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

GASTROENTEROLOGY

PATEL, JANKI

Provider ID: 305301
Board Certified Specialty: No
JANKI R PATEL
📍 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
☎ Phone: (760) 354-9697
Fax: (760) 635-5972
🕒 After Hours Phone: (760) 354-9697
Provider Gender: Female
NPI: 1548606668
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Gujarati, Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

HOSPICE AND PALLIATIVE MEDICINE

RUBENZI, TAMARA

Provider ID: 282127
Board Certified Specialty: No
TAMARA T RUBENZI
📍 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1811200652
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

HOSPICE AND PALLIATIVE MEDICINE

RUBENZI, TAMARA


Provider ID: 245575
Board Certified Specialty: No
TAMARA T RUBENZI
📍 1200 GARDEN VIEW RD
STE 100
ENCINITAS, CA 92024
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1811200652
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


D3. 专科提供者名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


MATERNAL AND FETAL MEDICINE


BALLAS, JERASIMOS

Provider ID: 209562

Board Certified Specialty: No
JERASIMOS BALLAS

 781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1871767384

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,


EISENHOWER MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


HULL, ANDREW


Provider ID: 209483

Board Certified Specialty: No
ANDREW D HULL

 781 GARDEN VIEW CT STE
200

ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1902862121

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

PALOMAR MEDICAL CENTER,

SCRIPPS MEMORIAL

HOSPITAL, UCSD LA JOLLA

JOHN SALLY THORNTON,


UCSD LA JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE

LAURENT, LOUISE


Provider ID: 208641


Board Certified Specialty: No

LOUISE C LAURENT

 781 GARDEN VIEW CT STE
200


ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Female

NPI: 1770532707

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

PALOMAR MEDICAL CENTER,

SCRIPPS MEMORIAL


HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE

MOORE, THOMAS


Provider ID: 208645

Board Certified Specialty: No
THOMAS R MOORE

 781 GARDEN VIEW CT STE
200

ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Male

D3. 专科提供者名录

NPI: 1184682379

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE

Provider ID: 277315

Board Certified Specialty: No
ALVIE C RICHARDSON

 477 N EL CAMINO REAL
BLDG D STE 302
ENCINITAS, CA 92024

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1154305977

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, Sharp Grossmont
Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


MATERNAL AND FETAL MEDICINE


WOELKERS, DOUGLAS

Provider ID: 209384

Board Certified Specialty: No
DOUGLAS A WOELKERS



 781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1013965748

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, PALOMAR
MEDICAL CENTER, UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


MATERNAL AND FETAL MEDICINE


WOLF, RICHARD

Provider ID: 209254

Board Certified Specialty: No
RICHARD B WOLF

 781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1497713846

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, PALOMAR
MEDICAL CENTER, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

D3. 专科提供者名录

 Website: N/A


NEONATAL / PERINATAL MEDICINE


BAI-TONG, SHIYU

Provider ID: 283286

Board Certified Specialty: No
SHIYU S BAI-TONG


 354 SANTA FE DR
ENCINITAS, CA 92024

 Phone: (760) 633-6120

 After Hours Phone: (760)
633-6120

Provider Gender: Female

NPI: 1528454188

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301821

Board Certified Specialty: No
KATHERINE N NYMAN

 354 SANTA FE DR
ENCINITAS, CA 92024

 Phone: (760) 633-6120


Fax: (760) 633-7385

 After Hours Phone: (760)

633-6120

Provider Gender: Female

NPI: 1003260951

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES

Provider ID: 303905

Board Certified Specialty: No
CHARLES W SAUER

 354 SANTA FE DR
ENCINITAS, CA 92024


 Phone: (760) 633-6120

Fax: (760) 633-7385

 After Hours Phone: (760)
633-6120

Provider Gender: Male

NPI: 1538388988

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,


SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


BUI, JONATHAN

Provider ID: 269966

Board Certified Specialty: No
JONATHAN D BUI

 477 N EL CAMINO REAL
STE 302

ENCINITAS, CA 92024

 Phone: (760) 944-6377


Fax: (760) 944-3927

 After Hours Phone: (760)
944-6377

Provider Gender: Male

NPI: 1730247974

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

D3. 专科提供者名录


DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


NEUROLOGY

JINDAL, ANUJA


Provider ID: 206264

Board Certified Specialty: No
ANUJA V JINDAL

 477 N EL CAMINO REAL
STE 302
ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1194046581

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY


SCHORR, EMILY

Provider ID: 305022

Board Certified Specialty: No
EMILY M SCHORR

 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255862041

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

NEUROLOGY CHILD

KIMMCMANUS, OLIVIA


Provider ID: 206258

Board Certified Specialty: No
OLIVIA S KIMMCMANUS

 477 N EL CAMINO REAL
BLDG D STE 302
ENCINITAS, CA 92024


 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1174870067

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, CHILDRENS
HOSPITAL OF ORANGE

COUNTY, RADY CHILDRENS


HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


NEUROLOGY CHILD

SAHAGIAN, MICHELLE

Provider ID: 206073

Board Certified Specialty: No
MICHELLE L SAHAGIAN

 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1275604035

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA

D3. 专科提供者名录

Provider ID: 282167
Board Certified Specialty: No
PRATIBHA S BINDER

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174758031

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291325

Board Certified Specialty: No
LAURA M DELCORE

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291336

Board Certified Specialty: No
AMY M DRIEBE

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730507567

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 293447

Board Certified Specialty: No
AMY M DRIEBE

781 GARDEN VIEW CT STE

200

ENCINITAS, CA 92024

Phone: (800) 926-8372
Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

Provider Gender: Female

NPI: 1730507567

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 293448

Board Certified Specialty: No
AMY M DRIEBE

1505 ENCINITAS BLVD
ENCINITAS, CA 92024

Phone: (800) 926-8372
Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

Provider Gender: Female

NPI: 1730507567

Provider English Spoken: Y
Cultural Competency: N



Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

D3. 专科提供者名录

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OBSTETRICS / GYNECOLOGY


LAMALE-SMITH, LEAH


Provider ID: 208682

Board Certified Specialty: No
LEAH M LAMALE-SMITH

 781 GARDEN VIEW CT STE 200


ENCINITAS, CA 92024

 *Phone: (858) 657-7200*

 *After Hours Phone: (858) 657-7200*

Provider Gender: Female

NPI: 1396904876

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR, EISENHOWER MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

OBSTETRICS / GYNECOLOGY


MACKAY, GILLIAN

Provider ID: 303061

Board Certified Specialty: No
GILLIAN MACKAY

 1200 GARDEN VIEW RD

ENCINITAS, CA 92024

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1770702177

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

OPHTHALMOLOGY


BANSAL, PREETI

Provider ID: 205617

Board Certified Specialty: No
PREETI BANSAL

 477 N EL CAMINO REAL STE D302

ENCINITAS, CA 92024

 *Phone: (858) 309-7702*


Fax: (760) 944-3927

 *After Hours Phone: (858) 309-7702*

Provider Gender: Female

NPI: 1871664631

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Hindi*

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT

HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

OPHTHALMOLOGY


BHATIA, SHAGUN

Provider ID: 267315

Board Certified Specialty: No
SHAGUN K BHATIA

 477 N EL CAMINO REAL STE D302

ENCINITAS, CA 92024

 *Phone: (760) 944-5545*

Fax: (760) 944-3927

 *After Hours Phone: (760) 944-5545*

Provider Gender: Female

NPI: 1104237353

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

D3. 专科提供者名录

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*

OPHTHALMOLOGY


HENNEIN, LAUREN

Provider ID: 297012

*Board Certified Specialty: No
LAUREN M HENNEIN*

 *477 N EL CAMINO REAL
STE D302*

ENCINITAS, CA 92024

 *Phone: (760) 944-5545*

Fax: (760) 944-3927

 *After Hours Phone: (760)
944-5545*

Provider Gender: Female

NPI: 1699216010

 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

OPHTHALMOLOGY

MOLL, ANGELA


Provider ID: 205507

*Board Certified Specialty: No
ANGELA M MOLL*

 *477 N EL CAMINO REAL*

STE D302

ENCINITAS, CA 92024

 *Phone: (760) 944-5545*

Fax: (760) 944-3927

 *After Hours Phone: (760)
944-5545*

Provider Gender: Female

NPI: 1861648602

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT*

*HOSPITAL, SHARP MEMORIAL
HOSPITAL, UCSF BENIOFF*

*CHILDREN'S HOSPITAL
OAKLAND, SCRIPPS MERCY*

*HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

OPHTHALMOLOGY


MOVAGHAR, MANSOOR


Provider ID: 216413

*Board Certified Specialty: No
MANSOOR MOVAGHAR*

 *477 N EL CAMINO REAL
BLD D STE 302*

ENCINITAS, CA 92024

 *Phone: (760) 944-5545*

 *After Hours Phone: (760)
944-5545*

Provider Gender: Male

NPI: 1497792220

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

OPHTHALMOLOGY


OHALLORAN, HENRY

Provider ID: 205886

*Board Certified Specialty: No
HENRY S OHALLORAN*

 *477 N EL CAMINO REAL
STE D302*

ENCINITAS, CA 92024

 *Phone: (760) 944-5545*

Fax: (760) 944-3927

 *After Hours Phone: (760)
944-5545*

Provider Gender: Male

NPI: 1235287947

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA*

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

D3. 专科提供者名录

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


OPTOMETRIST

AOTO, KIM


Provider ID: 296797

*Board Certified Specialty: No
KIM N AOTO*

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024


 *Phone: (760) 943-7141*

Fax: (760) 943-0371

 *After Hours Phone: (760)
943-7141*

Provider Gender: Female

NPI: 1780935650

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Vietnamese*


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M 9:00AM-5:00PM*

TU 8:30AM-4:30PM

W 7:30AM-4:30PM

TH 9:30AM-5:00PM

F 8:30AM-4:00PM

 *Website: N/A*

OTOLARYNGOLOGY


BLISS, MORGAN

Provider ID: 206085

*Board Certified Specialty: No
MORGAN R BLISS*

 477 N EL CAMINO REAL
STE 302

ENCINITAS, CA 92024


 *Phone: (760) 944-5545*

Fax: (760) 944-3927

 *After Hours Phone: (760)
944-5545*

Provider Gender: Female

NPI: 1760707657

 *Provider English Spoken: Y*

Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

OTOLARYNGOLOGY

FRIESEN, TZYYNONG


Provider ID: 244900


Board Certified Specialty: No

TZYYNONG L FRIESEN

 477 N EL CAMINO REAL
STE D302


ENCINITAS, CA 92024

 *Phone: (760) 944-5545*

 *After Hours Phone: (760)
944-5545*

Provider Gender: Female

NPI: 1952740177

 *Provider English Spoken: Y*

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

OTOLARYNGOLOGY


LEUIN, SHELBY

Provider ID: 206112

*Board Certified Specialty: No
SHELBY C LEUIN*

 477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

 *Phone: (760) 944-5545*

Fax: (760) 944-3927

 *After Hours Phone: (760)
944-5545*

Provider Gender: Female

NPI: 1124230909

 *Provider English Spoken: Y*

Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN*

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL


OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

OTOLARYNGOLOGY

PATEL, VIJAY

Provider ID: 297035

Board Certified Specialty: No

D3. 专科提供者名录

VIJAY PATEL

477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)
944-5545

Provider Gender: Male

NPI: 1508250747

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY

GREINER, ALEXANDER

Provider ID: 205696

Board Certified Specialty: No

ALEXANDER N GREINER

477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

Phone: (858) 966-4900

Fax: (760) 944-3927

After Hours Phone: (858)
966-4900

Provider Gender: Male

NPI: 1609801299

Provider English Spoken: Y

Provider Language(s)
Spoken: French, German,
Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

HALEY, JESSICA

Provider ID: 205688

Board Certified Specialty: No

JESSICA E HALEY

477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1023329885

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

NARAYAN, HARI

Provider ID: 239115

Board Certified Specialty: No

HARI K NARAYAN

477 N EL CAMINO REAL
BLDG D STE 302

ENCINITAS, CA 92024

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)
944-5545

Provider Gender: Male

NPI: 1376705707

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

SILVASEPULVEDA, JOSE

Provider ID: 206299

Board Certified Specialty: No

JOSE A SILVASEPULVEDA

477 N EL CAMINO REAL
BLDG D STE 302

ENCINITAS, CA 92024

D3. 专科提供者名录

☎ Phone: (760) 944-5545
Fax: (760) 944-3927

📞 After Hours Phone: (760) 944-5545

Provider Gender: Male

NPI: 1417222472

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC

GASTROENTEROLOGY

CHU, CHRISTOPHER

Provider ID: 301641

Board Certified Specialty: No
CHRISTOPHER CHU

📍 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

☎ Phone: (760) 944-5545
Fax: (760) 944-3927

📞 After Hours Phone: (760) 944-5545

Provider Gender: Male

NPI: 1912369273

🗉 Provider English Spoken: Y

🗉 Provider Language(s)
Spoken: Spanish, Yue
Chinese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC

GASTROENTEROLOGY

YOUNG, JOCELYN

Provider ID: 294676

Board Certified Specialty: No
JOCELYN A YOUNG

📍 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

☎ Phone: (760) 944-5545
Fax: (760) 944-3927

📞 After Hours Phone: (760) 944-5545

Provider Gender: Female

NPI: 1306227491

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UC DAVIS
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC PULMONOLOGY **CERNELC-KOHAN, MATEJKA**

Provider ID: 243043

Board Certified Specialty: No
MATEJKA CERNELC-KOHAN

📍 477 N EL CAMINO REAL
STE 302 BLDG D
ENCINITAS, CA 92024

☎ Phone: (760) 944-5545
Fax: (760) 944-3927

📞 After Hours Phone: (760) 944-5545

Provider Gender: Female

NPI: 1871752451

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC PULMONOLOGY **LENHART-PENDERGRASS,**

PATRICIA

Provider ID: 294642

Board Certified Specialty: No
PATRICIA M

LENHART-PENDERGRASS

📍 477 N EL CAMINO REAL

D3. 专科提供者名录

STE D302
ENCINITAS, CA 92024
☎ Phone: (760) 944-5545
☎ Fax: (760) 944-3927
🕒 After Hours Phone: (760) 944-5545
Provider Gender: Female
NPI: 1144615659
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC RHEUMATOLOGY

CHANG, JOHANNA

Provider ID: 246395
Board Certified Specialty: No
JOHANNA C CHANG

📍 477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024
☎ Phone: (760) 944-5545
☎ After Hours Phone: (760) 944-5545

Provider Gender: Female
NPI: 1821242199
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

PHYSICAL MEDICINE / REHABILITATION

LEE, HAEWON

Provider ID: 256227
Board Certified Specialty: No
HAEWON LEE

📍 477 N EL CAMINO REAL STE C100
ENCINITAS, CA 92024
☎ Phone: (800) 926-8273
☎ After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1447661657
🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Korean

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

HIGGINS, JOSHUA

Provider ID: 287134
Board Certified Specialty: No
JOSHUA B HIGGINS

📍 1505 ENCINITAS BLVD
ENCINITAS, CA 92024
☎ Phone: (800) 926-8273
☎ Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1861624181
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

PELIO, DARREN

Provider ID: 293443
Board Certified Specialty: No
DARREN A PELIO

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024
☎ Phone: (800) 926-8273
☎ Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273


Provider Gender: Male
NPI: 1386791028
🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

D3. 专科提供者名录

Min/Max Age: 0\999

American Sign Language (ASL): BRIAN C SUTTON

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE


Provider ID: 302454

Board Certified Specialty: No
ANNETTE A RODRIGUES

 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-5545

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1205381845

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL


Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


SUTTON, BRIAN

Provider ID: 272241

Board Certified Specialty: No

BRIAN C SUTTON

 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024

 Phone: (760) 598-1776

Fax: (760) 598-5744

 After Hours Phone: (760)
598-1776

Provider Gender: Male

NPI: 1629174727

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


VANETSKY, GARY

Provider ID: 269152

Board Certified Specialty: No

GARY E VANETSKY

 477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

 Phone: (760) 436-2300

Fax: (760) 436-5482

 After Hours Phone: (760)
436-2300

Provider Gender: Male

NPI: 1417034489

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PODIATRIST

DUSTIN, ADAM

Provider ID: 275800

Board Certified Specialty: No
ADAM F DUSTIN

 326 ENCINITAS BLVD STE
100
ENCINITAS, CA 92024



 Phone: (760) 436-5533

Fax: (760) 436-0611

 After Hours Phone: (760)
436-5533

Provider Gender: Male

NPI: 1043389026

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST

D3. 专科提供者名录

GOMEZ, JUANITA

Provider ID: 291423

Board Certified Specialty: No

JUANITA GOMEZ

1505 ENCINITAS BLVD
ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790915759

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY COLON SURGERY

PARRY, LISA

Provider ID: 278552

Board Certified Specialty: No

LISA A PARRY

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1235369067

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

ARMANI, AVA

Provider ID: 282143

Board Certified Specialty: No

AVA ARMANI

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861759383

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSF

MEDICAL CENTER, UCSF

Medical Center At Mission Bay,

UCSF MEDICAL CENTER AT

MOUNT ZION, UCSD LA JOLLA

JOHN SALLY THORNTON,

UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

JACOBSEN, GARTH

Provider ID: 201730

Board Certified Specialty: No

GARTH R JACOBSEN

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Phone: (858) 657-8860

After Hours Phone: (858)
657-8860

Provider Gender: Male

NPI: 1265649966

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

SURGERY PEDIATRIC

FAIRBANKS, TIMOTHY

Provider ID: 205497

Board Certified Specialty: No

TIMOTHY J FAIRBANKS

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)
944-5545

D3. 专科提供者名录

Provider Gender: Male

NPI: 1407010556

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY PEDIATRIC

KLING, KAREN

Provider ID: 206128

Board Certified Specialty: No
KAREN M KLING

📍 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

☎ Phone: (760) 944-5545

Fax: (760) 944-3927

📞 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1982775144

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,

SHARP MARY BIRCH HOSP
FOR WOMEN AND

NEWBORNS, NATIONAL
NAVAL MED CTR, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY PLASTIC

REID, CHRISTOPHER

Provider ID: 238130

Board Certified Specialty: No
CHRISTOPHER M REID

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

☎ Phone: (800) 926-8273

📞 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982964276

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

ESCONDIDO

ANESTHESIOLOGY PAIN

MANAGEMENT

BROWNLOW, ROY

Provider ID: 308112

Board Certified Specialty: No
ROY C BROWNLOW

📍 637 E GRAND AVE
ESCONDIDO, CA 92025

☎ Phone: (760) 610-0522

Fax: (760) 610-0523

📞 After Hours Phone: (760)
610-0522

Provider Gender: Male

NPI: 1205949914

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

ANESTHESIOLOGY PAIN

MANAGEMENT

BROWNLOW, ROY

Provider ID: 308401

Board Certified Specialty: No

D3. 专科提供者名录

ROY C BROWNLOW

637 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (760) 610-0522
Fax: (760) 610-0523

After Hours Phone: (760)
610-0522

Provider Gender: Male

NPI: 1205949914

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON

Provider ID: 300090

Board Certified Specialty: No
BRANDON DAIRO

1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029

Phone: (760) 738-5533
Fax: (760) 738-3835

After Hours Phone: (760)
738-5533

Provider Gender: Male

NPI: 1689092470

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON

Provider ID: 299881

Board Certified Specialty: No
BRANDON DAIRO

1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029

Phone: (760) 738-5533
Fax: (760) 738-3835

After Hours Phone: (760)
738-5533

Provider Gender: Male

NPI: 1689092470

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\100

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY PAIN MANAGEMENT

ROBINSON, COLE

Provider ID: 300171

Board Certified Specialty: No
COLE W ROBINSON

160 N DATE ST
ESCONDIDO, CA 92025

Phone: (888) 873-6220
Fax: (888) 873-6220

After Hours Phone: (888)
873-6220

Provider Gender: Male

NPI: 1871799528

Provider English Spoken: Y
Provider Language(s)

Spoken: German
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 21\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
7:00AM-4:00PM

SA 7:00AM-4:00PM
Website: N/A

CARDIOVASCULAR DISEASE

LERNER, JONATHAN

Provider ID: 309268

Board Certified Specialty: No

D3. 专科提供者名录

JONATHAN H LERNER

488 E VALLEY PKWY STE 107

ESCONDIDO, CA 92025

Phone: (760) 294-0480

Fax: (760) 294-0481

After Hours Phone: (760) 294-0480

Provider Gender: Male

NPI: 1962899823

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HEAD, KRISTIN

Provider ID: 277866

Board Certified Specialty: No KRISTIN N HEAD

2125 CITRACADO PKWY STE 100

ESCONDIDO, CA 92029

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760) 294-9260

Provider Gender: Female

NPI: 1699078923

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

JANNESARI, ROYA

Provider ID: 302339

Board Certified Specialty: No ROYA JANNESARI

625 CITRACADO PKWY STE 108

ESCONDIDO, CA 92025

Phone: (760) 743-1431

Fax: (760) 743-6455

After Hours Phone: (760) 743-1431

Provider Gender: Female

NPI: 1063585099

Provider English Spoken: Y

Provider Language(s) Spoken: Farsi, Persian

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

KESHAVARZI, SARA

Provider ID: 305938

Board Certified Specialty: No

SARA KESHAVARZI

488 E VALLEY PKWY STE 411

ESCONDIDO, CA 92025

Phone: (760) 466-9800

Fax: (360) 462-2741

After Hours Phone: (760) 466-9800

Provider Gender: Female

NPI: 1457996126

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

KESHAVARZI, SARA

Provider ID: 309748

Board Certified Specialty: No SARA KESHAVARZI

488 E VALLEY PKWY STE 411

ESCONDIDO, CA 92025

Phone: (760) 466-9800

Fax: (360) 462-2741

After Hours Phone: (760) 466-9800

Provider Gender: Female

D3. 专科提供者名录

NPI: 1457996126


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Provider ID: 269203

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

WALDRUP, LARHONDA

Provider ID: 299259

Board Certified Specialty: No
LARHONDA M WALDRUP

 2185 CITRACADO PKWY
ESCONDIDO, CA 92029

 Phone: (442) 281-3193

Fax: (442) 281-3197

 After Hours Phone: (442)
281-3193

Provider Gender: Female

NPI: 1831627181

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST


SEILNACHT-BERNARD, KAREN

Provider ID: 269203

Board Certified Specialty: No
KAREN M

SEILNACHT-BERNARD

 488 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (877) 217-8505

Fax: (760) 735-6296

 After Hours Phone: (877)
217-8505

Provider Gender: Female

NPI: 1861562498


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

PHAM, LILY


Provider ID: 304936

Board Certified Specialty: No
LILY M PHAM

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 739-1543

Fax: (760) 294-9274

 After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1811423072

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES


REDDY, NAVYA

Provider ID: 302350

Board Certified Specialty: No
NAVYA M REDDY

 625 CITRACADO PKWY STE
108

ESCONDIDO, CA 92025

 Phone: (760) 743-1431

Fax: (760) 743-6455

 After Hours Phone: (760)
743-1431

Provider Gender: Female


NPI: 1083069611

 Provider English Spoken: Y
Cultural Competency: N



Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

D3. 专科提供者名录

 Hours: M-F
8:00AM-5:00PM
 Website: N/A


FAMILY PRACTICE

MATSHE, ZENZIWE

Provider ID: 306033

Board Certified Specialty: No
ZENZIWE MATSHE

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100
Fax: (760) 466-1373

 After Hours Phone: (760)
520-8100

Provider Gender: Female


NPI: 1285256073


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


GASTROENTEROLOGY

GARA, NAVEEN

Provider ID: 305691

Board Certified Specialty: No
NAVEEN GARA



 935 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025

 Phone: (760) 690-2800
Fax: (949) 404-6908

 After Hours Phone: (760)
690-2800

Provider Gender: Male

NPI: 1942406533

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Telugu
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, PALOMAR

MEDICAL CENTER, PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


GASTROENTEROLOGY

GARA, NAVEEN

Provider ID: 269145

Board Certified Specialty: No
NAVEEN GARA



 661 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025

 Phone: (760) 690-2800
Fax: (760) 690-2801

 After Hours Phone: (760)
690-2800

Provider Gender: Male

NPI: 1942406533

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Telugu
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, PALOMAR


MEDICAL CENTER, PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

HEARING AID DEALER /

SUPPLIER


ANDERSON, ELAINE


Provider ID: 268690

Board Certified Specialty: No
ELAINE ANDERSON

 330 W FELICITA AVE STE
A4

ESCONDIDO, CA 92025

 Phone: (760) 489-1323
Fax: (760) 489-0975

 After Hours Phone: (760)
489-1323

Provider Gender: Female

NPI: 1063558856


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

CHEN, ANDREW

Provider ID: 296830

Board Certified Specialty: No
ANDREW K CHEN

 2130 CITRACADO PKWYSTE
220

D3. 专科提供者名录

ESCONDIDO, CA 92029
Phone: (760) 743-4789
Fax: (760) 743-8005
After Hours Phone: (760) 743-4789
Provider Gender: Male
NPI: 1134357007
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

INTERNAL MEDICINE

MALEK, MIKHAIL

Provider ID: 296831
Board Certified Specialty: No
MIKHAIL R MALEK
2130 CITRACADO PKWY STE 220
ESCONDIDO, CA 92029
Phone: (760) 743-0546
Fax: (760) 317-9769
After Hours Phone: (760) 743-0546
Provider Gender: Male
NPI: 1467455212
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, PALOMAR HEALTH

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

INTERVENTIONAL

CARDIOLOGY

BAYAT, HAMED

Provider ID: 296843
Board Certified Specialty: No
HAMED BAYAT
2130 CITRACADO PKWY STE 220
ESCONDIDO, CA 92029
Phone: (760) 743-0546
Fax: (760) 743-8837
After Hours Phone: (760) 743-0546

Provider Gender: Male
NPI: 1356344196
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

INTERVENTIONAL

CARDIOLOGY

BAYAT, HAMED

Provider ID: 296842
Board Certified Specialty: No
HAMED BAYAT
2130 CITRACADO PKWY STE 220
ESCONDIDO, CA 92029
Phone: (760) 743-0546
Fax: (760) 743-8837
After Hours Phone: (760) 743-0546
Provider Gender: Male
NPI: 1356344196
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A



INTERVENTIONAL

CARDIOLOGY




MOHAMEDALI, BURHAN

Provider ID: 309248
Board Certified Specialty: No
BURHAN MOHAMEDALI
488 E VALLEY PKWY STE 107
ESCONDIDO, CA 92025
Phone: (760) 294-0480
Fax: (760) 294-0481
After Hours Phone: (760) 294-0480
Provider Gender: Male
NPI: 1831393289

D3. 专科提供者名录

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Swahili
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
Adventist Health and Rideout
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-5:00PM
 Website: N/A


INTERVENTIONAL



CARDIOLOGY

SAWHNEY, NAVINDER

Provider ID: 304784
Board Certified Specialty: No
NAVINDER S SAWHNEY

 2130 CITRACADO PKWY STE
320
ESCONDIDO, CA 92029
 Phone: (858) 485-0130
Fax: (858) 485-9424
 After Hours Phone: (858)
485-0130
Provider Gender: Male
NPI: 1619174133

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER, SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS GREEN
HOSPITAL, UCSD MEDICAL
CTR, SHARP MEMORIAL
HOSPITAL


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A


INTERVENTIONAL

CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 295845
Board Certified Specialty: No
DEEPTHI SUDHAKAR
 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
 Phone: (760) 294-0480
Fax: (619) 616-2104
 After Hours Phone: (760)
294-0480

Provider Gender: Female
NPI: 1811307051
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital, SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 15\999

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


INTERVENTIONAL




CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 309097
Board Certified Specialty: No
DEEPTHI SUDHAKAR
 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
 Phone: (760) 294-0480
Fax: (619) 616-2104
 After Hours Phone: (760)
294-0480

Provider Gender: Female
NPI: 1811307051




 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital, SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 15\99
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A



MATERNAL AND FETAL

MEDICINE

MELBER, DORA





Provider ID: 296996
Board Certified Specialty: No
DORA J MELBER
 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
 Phone: (858) 966-6710
Fax: (858) 966-6711
 After Hours Phone: (858)
966-6710
Provider Gender: Female
NPI: 1124413026



D3. 专科提供者名录

 Provider English Spoken: Y
 Provider Language(s) Spoken: Hungarian, Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294655
 Board Certified Specialty: No
 REBECCA M REIMERS
 2125 CITRACADO PKWY STE 200 ESCONDIDO, CA 92029
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
 Provider Gender: Female
 NPI: 1801207634
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE






LE, CRYSTAL

Provider ID: 283707
 Board Certified Specialty: No
 CRYSTAL N LE
 2185 CITRACADO PKWY ESCONDIDO, CA 92029
 Phone: (442) 281-3193
 Fax: (442) 281-3197
 After Hours Phone: (442) 281-3193
 Provider Gender: Female
 NPI: 1003028416
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F



8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES

Provider ID: 206163
 Board Certified Specialty: No
 CHARLES W SAUER
 2185 CITRACADO PKWY ESCONDIDO, CA 92029
 Phone: (442) 281-2850
 Fax: (442) 281-2999
 After Hours Phone: (442) 281-2850
 Provider Gender: Male
 NPI: 1538388988
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER



D3. 专科提供者名录

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE








SUTTNER, DENISE

Provider ID: 206137
Board Certified Specialty: No
DENISE M SUTTNER
 2185 CITRACADO PKWY
ESCONDIDO, CA 92029
 Phone: (442) 281-2850
Fax: (442) 281-2999
 After Hours Phone: (442)
281-2850
Provider Gender: Female
NPI: 1457433799
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

SWEENEY, NATHALY

Provider ID: 283801
Board Certified Specialty: No
NATHALY M SWEENEY
 2185 CITRACADO PKWY
ESCONDIDO, CA 92029
 Phone: (442) 281-3193
Fax: (442) 281-3197
 After Hours Phone: (442)
281-3193
Provider Gender: Female
NPI: 1164572632
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEPHROLOGY





AL-DAHAN, ZAID

Provider ID: 297898
Board Certified Specialty: No
ZAID G AL-DAHAN

 631 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (760) 294-1660
Fax: (760) 745-5016
 After Hours Phone: (760)
294-1660
Provider Gender: Male
NPI: 1740716828
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER, PALOMAR
HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-5:00PM
 Website: N/A

NEUROLOGY

GOLD, JEFFREY

Provider ID: 277870
Board Certified Specialty: No
JEFFREY J GOLD
 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 Phone: (760) 294-9260
Fax: (760) 294-9274
 After Hours Phone: (760)
294-9260
Provider Gender: Male
NPI: 1568773984
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

D3. 专科提供者名录


CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND, SHARP MEMORIAL
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


NEUROLOGY

JINDAL, ANUJA

Provider ID: 277838

Board Certified Specialty: No
ANUJA V JINDAL

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 294-9260
Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Female

NPI: 1194046581

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


NEUROLOGY


KIMMCMANUS, OLIVIA

Provider ID: 277873

Board Certified Specialty: No

OLIVIA S KIMMCMANUS

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (858) 966-5819
Fax: (760) 294-9274

 After Hours Phone: (858)
966-5819

Provider Gender: Female

NPI: 1174870067

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, CHILDRENS
HOSPITAL OF ORANGE
COUNTY, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY

ZIMBRIC, MICHAEL

Provider ID: 277891


Board Certified Specialty: No

MICHAEL R ZIMBRIC

 2125 CITRACADO PKWY

STE 100

ESCONDIDO, CA 92029

 Phone: (760) 294-9260
Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Male

NPI: 1487819546

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


NEUROLOGY CHILD

SAHAGIAN, MICHELLE

Provider ID: 206076

Board Certified Specialty: No
MICHELLE L SAHAGIAN

 625 CITRACADO PKWY STE
100
ESCONDIDO, CA 92025

 Phone: (760) 294-9260
Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Female

NPI: 1275604035

 Provider English Spoken: Y


D3. 专科提供者名录


Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
9:00AM-5:00PM


 *Website: N/A*


OBSTETRICS / GYNECOLOGY

HINSHAW, PAUL

Provider ID: 285628

Board Certified Specialty: No
PAUL W HINSHAW

 1955 CITRACADO PKWY
STE 302
ESCONDIDO, CA 92029

 *Phone: (760) 233-1896*
Fax: (760) 233-1899

 *After Hours Phone: (760) 233-1896*

Provider Gender: Male


NPI: 1215170717


 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH*
9:00AM-4:30PM
F 9:00AM-2:00PM


 *Website: N/A*


OBSTETRICS / GYNECOLOGY

HINSHAW, PAUL

Provider ID: 277040

Board Certified Specialty: No
PAUL W HINSHAW

 1955 CITRACADO PKWY
STE 302
ESCONDIDO, CA 92029

 *Phone: (760) 233-1896*

Fax: (760) 233-1899

 *After Hours Phone: (760) 233-1896*

Provider Gender: Male


NPI: 1215170717


 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH*
9:00AM-4:30PM
F 9:00AM-2:00PM


 *Website: N/A*


OBSTETRICS / GYNECOLOGY

HINSHAW, PAUL


Provider ID: 277041

Board Certified Specialty: No
PAUL W HINSHAW

 488 E VALLEY PKWY STE
400
ESCONDIDO, CA 92025

 *Phone: (760) 658-6101*

Fax: (760) 658-6106

 *After Hours Phone: (760) 658-6101*

Provider Gender: Male

NPI: 1215170717


 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH*
9:00AM-4:30PM
F 9:00AM-2:00PM


 *Website: N/A*


OBSTETRICS / GYNECOLOGY

HINSHAW, PAUL

Provider ID: 285629

Board Certified Specialty: No
PAUL W HINSHAW

 488 E VALLEY PKWY STE
400
ESCONDIDO, CA 92025

 *Phone: (760) 658-6101*

Fax: (760) 658-6106

 *After Hours Phone: (760) 658-6101*

Provider Gender: Male

NPI: 1215170717

 *Provider English Spoken: Y*
Cultural Competency: N



Hospital Affiliation: PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL): N







 *Accessibility: CONTACT PROVIDER*



D3. 专科提供者名录

 Hours: M-TH
9:00AM-4:30PM
F 9:00AM-2:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH









Provider ID: 285518
Board Certified Specialty: No
LEAH M LAMALE-SMITH
 2125 CITRACADO PKWY
STE 210
ESCONDIDO, CA 92029
 Phone: (760) 739-2921
Fax: (760) 739-3162
 After Hours Phone: (760)
739-2921
Provider Gender: Female
NPI: 1396904876
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, EISENHOWER MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY


BANSAL, PREETI







Provider ID: 277883
Board Certified Specialty: No

PREETI BANSAL
 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
 Phone: (760) 755-7600
Fax: (760) 755-7699
 After Hours Phone: (760)
755-7600
Provider Gender: Female
NPI: 1871664631
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL, TRI CITY MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY





BHATIA, SHAGUN

Provider ID: 277877
Board Certified Specialty: No
SHAGUN K BHATIA
 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029
 Phone: (760) 755-7600
Fax: (760) 755-7699
 After Hours Phone: (760)
755-7600
Provider Gender: Female
NPI: 1104237353
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

HENNEIN, LAUREN

Provider ID: 297014
Board Certified Specialty: No
LAUREN M HENNEIN
 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
 Phone: (760) 755-7600
Fax: (760) 755-7699
 After Hours Phone: (760)
755-7600
Provider Gender: Female
NPI: 1699216010
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

D3. 专科提供者名录

DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


MOLL, ANGELA


Provider ID: 205895

Board Certified Specialty: No
ANGELA M MOLL

 625 CITRACADO PKWY STE
206

ESCONDIDO, CA 92025

 Phone: (760) 755-7600

 After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1861648602

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL


OAKLAND, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


MOLL, ANGELA

Provider ID: 277824

Board Certified Specialty: No
ANGELA M MOLL

 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1861648602

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


MOVAGHAR, MANSOOR

Provider ID: 277833

Board Certified Specialty: No
MANSOOR MOVAGHAR

 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Male

NPI: 1497792220

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


OHALLORAN, HENRY

Provider ID: 277869

Board Certified Specialty: No
HENRY S OHALLORAN

 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Male

D3. 专科提供者名录

NPI: 1235287947

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 305307

Board Certified Specialty: No
CATHERINE R SHEILS

 700 W EL NORTE PKWY
ESCONDIDO, CA 92026

 Phone: (800) 765-2737
Fax: (619) 291-6577

 After Hours Phone: (800)
765-2737

Provider Gender: Female

NPI: 1932605649

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-TU
8:30AM-4:00PM
W-F 8:30AM-1:00PM

 Website: N/A

OPTOMETRIST


AOTO, KIM

Provider ID: 268719

Board Certified Specialty: No
KIM N AOTO

 830 W VALLEY PKWY STE
300



ESCONDIDO, CA 92025

 Phone: (800) 898-2020
Fax: (844) 897-3788

 After Hours Phone: (800)
898-2020

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPTOMETRIST


AOTO, KIM

Provider ID: 296796

Board Certified Specialty: No
KIM N AOTO

 700 W EL NORTE PKWY
STE 200



ESCONDIDO, CA 92026

 Phone: (760) 743-5872
Fax: (760) 743-5879

 After Hours Phone: (760)
743-5872

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 9:00AM-5:00PM
TU 8:30AM-4:30PM

W 7:30AM-4:30PM

TH 9:30AM-5:00PM

F 8:30AM-4:00PM

 Website: N/A


OPTOMETRIST

KOO, ANITA

Provider ID: 307411

Board Certified Specialty: No
ANITA K KOO

 1118 W VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (619) 425-7755
Fax: (619) 425-2138

 After Hours Phone: (619)
425-7755

Provider Gender: Female

NPI: 1669825667



 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

D3. 专科提供者名录


 Accessibility: CONTACT PROVIDER
 Website: N/A

OPTOMETRIST

KOO, ANITA


Provider ID: 307410
Board Certified Specialty: No
ANITA K KOO

 1118 W VALLEY PKWY
ESCONDIDO, CA 92025


 Phone: (619) 425-7755
Fax: (619) 425-2138

 After Hours Phone: (619)
425-7755

Provider Gender: Female
NPI: 1669825667

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


 Website: N/A

OTOLARYNGOLOGY

BLISS, MORGAN

Provider ID: 277537
Board Certified Specialty: No
MORGAN R BLISS

 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

 Phone: (760) 755-7600
Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Female
NPI: 1760707657


 Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


 Hours: M-F
8:00AM-5:00PM


 Website: N/A

OTOLARYNGOLOGY

FRIESEN, TZYYNONG


Provider ID: 277853
Board Certified Specialty: No
TZYYNONG L FRIESEN

 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

 Phone: (760) 755-7600
Fax: (760) 755-7699


 After Hours Phone: (760)
755-7600

Provider Gender: Female
NPI: 1952740177

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


 Hours: M-F
8:00AM-5:00PM


 Website: N/A

OTOLARYNGOLOGY

JIANG, WEN



Provider ID: 277860
Board Certified Specialty: No
WEN A JIANG

 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

 Phone: (760) 755-7600
Fax: (760) 755-7699


 After Hours Phone: (760)
755-7600

Provider Gender: Female
NPI: 1659305753

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


 Hours: M-F
8:00AM-5:00PM


 Website: N/A

OTOLARYNGOLOGY

LEUIN, SHELBY

Provider ID: 206110
Board Certified Specialty: No
SHELBY C LEUIN

 625 CITRACADO PKWY STE
206
ESCONDIDO, CA 92025


 Phone: (760) 755-7600
Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Female


D3. 专科提供者名录


NPI: 1124230909

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OTOLARYNGOLOGY

PATEL, VIJAY

Provider ID: 297038

Board Certified Specialty: No
VIJAY PATEL


 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

 Phone: (760) 755-7600
Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Male

NPI: 1508250747


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL


Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC CARDIOLOGY

DAVIS, CHRISTOPHER

Provider ID: 277811

Board Certified Specialty: No
CHRISTOPHER K DAVIS


 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 294-9260
Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Male

NPI: 1760691950

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT

HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC CARDIOLOGY

HALEY, JESSICA

Provider ID: 277867

Board Certified Specialty: No
JESSICA E HALEY


 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 294-9260
Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Female

NPI: 1023329885


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC CARDIOLOGY

HALEY, JESSICA

Provider ID: 205689

Board Certified Specialty: No
JESSICA E HALEY

 625 CITRACADO PKWY STE
100
ESCONDIDO, CA 92025

 Phone: (760) 294-9260
Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Female

NPI: 1023329885

 Provider English Spoken: Y
Cultural Competency: N


D3. 专科提供者名录

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC CARDIOLOGY

NARAYAN, HARI

Provider ID: 277846

Board Certified Specialty: No
HARI K NARAYAN

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 294-9260
Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Male

NPI: 1376705707


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC CARDIOLOGY

SILVASEPULVEDA, JOSE

Provider ID: 206298

Board Certified Specialty: No
JOSE A SILVASEPULVEDA

 625 CITRACADO PKWY STE
100
ESCONDIDO, CA 92025

 Phone: (760) 294-9260
Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Male

NPI: 1417222472

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY


MEDICINE


AGHILI, ROXANA

Provider ID: 303783

Board Certified Specialty: No
ROXANA AGHILI


 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 739-1543
Fax: (760) 294-9274

 After Hours Phone: (760)
739-1543

Provider Gender: Female
NPI: 1851927883

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi

Cultural Competency: N


Hospital Affiliation: KAISER
FOUNDATION HOSPITAL SAN
DIEGO, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM


 Website: N/A


PEDIATRIC EMERGENCY **MEDICINE**

GORHAM, LAURA

Provider ID: 277851

Board Certified Specialty: No
LAURA M GORHAM

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 739-1543
Fax: (760) 294-9274

 After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1316162324

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

D3. 专科提供者名录


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM


 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

GROSS, MATTHEW


Provider ID: 297178

Board Certified Specialty: No
MATTHEW F GROSS

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 739-1543

Fax: (760) 294-9274

 After Hours Phone: (760)
739-1543

Provider Gender: Male

NPI: 1942223664

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM


 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

MENDES, CHANTAL

Provider ID: 295670

Board Certified Specialty: No
CHANTAL M MENDES

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 739-1543

Fax: (760) 294-9274

 After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1134681265

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM


 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

PARKER, SHERINE


Provider ID: 277872

Board Certified Specialty: No
SHERINE B PARKER

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 739-1543


Fax: (760) 294-9274

 After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1477626513

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: GLENDALE
ADVENTIST MED CTR,
GLENDALE MEMORIAL HOSP
AND HEALTH CTR, TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM


 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

QUINONES-PEREZ, BIANCA


Provider ID: 277810

Board Certified Specialty: No
BIANCA N QUINONES-PEREZ

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 739-1543


Fax: (760) 294-9274

 After Hours Phone: (760)
739-1543

Provider Gender: Female


NPI: 1124360565

D3. 专科提供者名录

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC EMERGENCY


MEDICINE

TODD, SARAH

Provider ID: 302802


Board Certified Specialty: No
SARAH C TODD

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 739-1543
Fax: (760) 294-9274

 After Hours Phone: (760)
739-1543

Provider Gender: Female
NPI: 1407299787


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC EMERGENCY


MEDICINE

VAIDYA, KAMALA

Provider ID: 205812

Board Certified Specialty: No
KAMALA VAIDYA

 625 CITRACADO PKWY STE
100
ESCONDIDO, CA 92025

 Phone: (760) 739-1543
Fax: (760) 294-9274

 After Hours Phone: (760)
739-1543

Provider Gender: Female
NPI: 1083840920


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY


MEDICINE

VAIDYA, KAMALA

Provider ID: 289412


Board Certified Specialty: No
KAMALA VAIDYA

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 739-1543
Fax: (760) 294-9274

 After Hours Phone: (760)
739-1543


Provider Gender: Female
NPI: 1083840920


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC


GASTROENTEROLOGY

CHU, CHRISTOPHER

Provider ID: 301643






Board Certified Specialty: No
CHRISTOPHER CHU

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 294-9260
Fax: (760) 294-9274



 After Hours Phone: (760)




D3. 专科提供者名录

294-9260
Provider Gender: Male
NPI: 1912369273
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Yue
Chinese
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRICS

CAMERON, MELISSA



Provider ID: 205966
Board Certified Specialty: No
MELISSA A CAMERON
 2185 CITRACADO PKWY
ESCONDIDO, CA 92029
 Phone: (442) 281-2850
Fax: (442) 281-2999
 After Hours Phone: (442)
281-2850
Provider Gender: Female
NPI: 1902983752
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER
Medi-Cal Open Panel: Yes




Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRICS

FIGUEROA RODRIGUEZ, BRENDA





Provider ID: 306823
Board Certified Specialty: No
BRENDA L FIGUEROA
RODRIGUEZ
 425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (833) 867-4642
Fax: (858) 633-4693
 After Hours Phone: (833)
867-4642
Provider Gender: Female
NPI: 1134205214




 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PHYSICAL MEDICINE / REHABILITATION




RICHARDSON, HENRY

Provider ID: 295277
Board Certified Specialty: No
HENRY A RICHARDSON
 1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
 Phone: (760) 738-5533
Fax: (909) 204-7863
 After Hours Phone: (760)
738-5533
Provider Gender: Male
NPI: 1407052459
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL
CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PHYSICAL MEDICINE / REHABILITATION

RYAN, KYLE

Provider ID: 275660
Board Certified Specialty: No
KYLE J RYAN
 625 CITRACADO PKWY
ESCONDIDO, CA 92025
 Phone: (760) 294-9260
Fax: (760) 294-9274
 After Hours Phone: (760)

D3. 专科提供者名录

294-9260
Provider Gender: Male
NPI: 1447645742
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

CHATFIELD, ALEXANDRA

Provider ID: 276716
Board Certified Specialty: No
ALEXANDRA J CHATFIELD
📍 1955 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
☎ Phone: (760) 743-4789
Fax: (858) 673-5187
📞 After Hours Phone: (760)
743-4789
Provider Gender: Female
NPI: 1215584628
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

CORVINI, NICOLAS

Provider ID: 296999
Board Certified Specialty: No
NICOLAS A CORVINI
📍 425 N DATE ST
ESCONDIDO, CA 92025
☎ Phone: (760) 520-8300
Fax: (858) 633-4698
📞 After Hours Phone: (760)
520-8300
Provider Gender: Male

NPI: 1194242461
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

FUNARI, CHRISTOPHER

Provider ID: 301993
Board Certified Specialty: No
CHRISTOPHER P FUNARI
📍 625 CITRACADO PKWY STE
108
ESCONDIDO, CA 92025
☎ Phone: (760) 743-1431
Fax: (760) 743-6455
📞 After Hours Phone: (760)
743-1431
Provider Gender: Male

NPI: 1982365490
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

GANGJI, SHAZMIN

Provider ID: 298110
Board Certified Specialty: No
SHAZMIN GANGJI
📍 460 N ELM ST
ESCONDIDO, CA 92025
☎ Phone: (760) 520-8100
Fax: (360) 462-2745
📞 After Hours Phone: (760)
520-8100
Provider Gender: Female

NPI: 1346763638
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 14\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

NIAKAMAL, EVAN





Provider ID: 291250
Board Certified Specialty: No
EVAN J NIAKAMAL
📍 425 N DATE ST
ESCONDIDO, CA 92025

D3. 专科提供者名录

 Phone: (760) 520-8340
Fax: (858) 633-4698
 After Hours Phone: (760) 520-8340
Provider Gender: Male
NPI: 1639796873
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE

Provider ID: 302456
Board Certified Specialty: No
ANNETTE A RODRIGUES
 2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
 Phone: (760) 294-9260
Fax: (760) 294-9274
 After Hours Phone: (760) 294-9260
Provider Gender: Female
NPI: 1205381845
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0\19

American Sign Language (ASL): Fax: (909) 204-7863
N



 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

WALSH, JOHN

Provider ID: 301971
Board Certified Specialty: No
JOHN T WALSH
 625 CITRACADO PKWY STE 108
ESCONDIDO, CA 92025
 Phone: (760) 743-1431
Fax: (760) 743-6455


 After Hours Phone: (760) 743-1431

Provider Gender: Male
NPI: 1386893089

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

WRIGHT, DEREK

Provider ID: 302390
Board Certified Specialty: No
DEREK J WRIGHT
 1955 CITRACADO PKWY
ESCONDIDO, CA 92029
 Phone: (760) 738-5533

 After Hours Phone: (760) 738-5533

Provider Gender: Male
NPI: 1629674858

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Website: N/A

PODIATRIST

ALGHURAIBI, OHOUD



Provider ID: 295998
Board Certified Specialty: No
OHOUD E ALGHURAIBI

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100
Fax: (360) 462-2745


 After Hours Phone: (760) 520-8100


Provider Gender: Female
NPI: 1669842357

 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 专科提供者名录

PODIATRIST

READ, TRENTON

Provider ID: 300882

Board Certified Specialty: No
TRENTON READ

📍 215 S HICKORY ST STE 118
ESCONDIDO, CA 92025

☎ Phone: (760) 480-1189

Fax: (858) 485-1515

🕒 After Hours Phone: (760)
480-1189

Provider Gender: Male

NPI: 1952963431

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PODIATRIST

READ, TRENTON

Provider ID: 296654

Board Certified Specialty: No
TRENTON READ

📍 215 S HICKORY ST STE 118
ESCONDIDO, CA 92025

☎ Phone: (760) 480-1189

Fax: (858) 485-1515

🕒 After Hours Phone: (760)
480-1189

Provider Gender: Male

NPI: 1952963431

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PSYCHOLOGIST

CARLTON-PENN, CORNELIA

Provider ID: 290406

Board Certified Specialty: No
CORNELIA J CARLTON-PENN

📍 425 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8340

Fax: (858) 633-4698

🕒 After Hours Phone: (760)
520-8340

Provider Gender: Female

NPI: 1891720611

☐ Provider English Spoken: Y
☐ Provider Language(s)

Spoken: German

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PSYCHOLOGIST

ESTRADA PATINO, ANGELA

Provider ID: 296605

Board Certified Specialty: No
ANGELA J ESTRADA PATINO

📍 460 N ELM ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100

Fax: (360) 462-2745

🕒 After Hours Phone: (760)
520-8100

Provider Gender: Female

NPI: 1629339015

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

SA 8:00AM-0:00PM

🌐 Website: N/A

PSYCHOLOGIST

SUOZZO, JOSEPH

Provider ID: 290758

Board Certified Specialty: No
JOSEPH M SUOZZO

📍 425 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8340

Fax: (858) 633-4698

🕒 After Hours Phone: (760)
520-8340

Provider Gender: Male

NPI: 1821013228

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

D3. 专科提供者名录

American Sign Language (ASL): Provider English Spoken: Y
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

PSYCHOLOGIST **TEETER-WITT, ALYSSA**

Provider ID: 290891
Board Certified Specialty: No
ALYSSA TEETER-WITT

425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8300
Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Provider Gender: Female
NPI: 1932308442

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PSYCHOLOGIST **TEETER-WITT, ALYSSA**

Provider ID: 290779
Board Certified Specialty: No
ALYSSA TEETER-WITT

426 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 690-5900
Fax: (858) 633-4693

After Hours Phone: (760)
690-5900

Provider Gender: Female
NPI: 1932308442

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Website: N/A

PSYCHOLOGIST **VALLEZ-BARLAM, ANDREA**

Provider ID: 290630
Board Certified Specialty: No
ANDREA VALLEZ-BARLAM

426 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 690-5900
Fax: (858) 633-4693

After Hours Phone: (760)
690-5900

Provider Gender: Female
NPI: 1710902143

Provider English Spoken: Y
 Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PSYCHOLOGIST **VALLEZ-BARLAM, ANDREA**

Provider ID: 290631
Board Certified Specialty: No
ANDREA VALLEZ-BARLAM

488 E VALLEY PKWY STE

488 E VALLEY PKWY STE

404
ESCONDIDO, CA 92025
 Phone: (760) 466-9800
Fax: (858) 633-4693

After Hours Phone: (760)
466-9800

Provider Gender: Female
NPI: 1710902143

Provider English Spoken: Y
 Provider Language(s)

Spoken: German, Spanish
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST **VAQUERO, JUANA**

Provider ID: 290762
Board Certified Specialty: No
JUANA VAQUERO

425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8300
Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Provider Gender: Female
NPI: 1023459708

Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):

D3. 专科提供者名录

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PSYCHOLOGIST

WOODWORTH, JENNIFER


Provider ID: 290634

Board Certified Specialty: No
JENNIFER WOODWORTH

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8340

Fax: (858) 633-4698

 After Hours Phone: (760)
520-8340

Provider Gender: Female

NPI: 1639362494


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PULMONARY DISEASES


QUAN, MICHELE GRACE

Provider ID: 287097

Board Certified Specialty: No
MICHELE GRACE G QUAN

 2125 CITRACADO PKWY
STE 230

ESCONDIDO, CA 92029

 Phone: (760) 489-1458

Fax: (760) 489-1246

 After Hours Phone: (760)
489-1458

Provider Gender: Female

NPI: 1629462882

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: REDLANDS
COMMUNITY HOSP


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIATION ONCOLOGY


COLEMAN, LORI

Provider ID: 221090


Board Certified Specialty: No
LORI A COLEMAN

 2125 CITRACADO PKWY
STE 110

ESCONDIDO, CA 92029



 Phone: (760) 739-3371

Fax: (760) 739-3779

 After Hours Phone: (760)
739-3371

Provider Gender: Female

NPI: 1053348920

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,

PALOMAR MEDICAL CENTER,

Sharp Grossmont Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIATION ONCOLOGY


VOLPP, PAUL

Provider ID: 221103

Board Certified Specialty: No
PAUL B VOLPP

 2125 CITRACADO PKWY
STE 110

ESCONDIDO, CA 92029

 Phone: (760) 739-3371

Fax: (760) 739-3779

 After Hours Phone: (760)
739-3371

Provider Gender: Male

NPI: 1225186232

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

GROSSMONT HOSPITAL,


PALOMAR MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-4:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH

D3. 专科提供者名录

Provider ID: 283206

Board Certified Specialty: No
SIAVOSH VAKILIAN

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025

Phone: (619) 230-0400

Fax: (858) 429-7936

After Hours Phone: (619)
230-0400

Provider Gender: Male

NPI: 1427456151

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

MCGEE, JACQUELINE

Provider ID: 252473

Board Certified Specialty: No
JACQUELINE M MCGEE

1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027

Phone: (760) 233-9655

Fax: (760) 233-9648

After Hours Phone: (760)
233-9655

Provider Gender: Female

NPI: 1194217133

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 8\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
7:00AM-6:00PM

Website: N/A

SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS

Provider ID: 296931

Board Certified Specialty: No
MIRELIS AROCHO-SALGADO

500 LA TERRAZA BLVD STE
150

ESCONDIDO, CA 92025

Phone: (877) 757-8353

Fax: (818) 357-2505

After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1063660165

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

SPEECH PATHOLOGIST

CLARK, MELISSA

Provider ID: 296924

Board Certified Specialty: No
MELISSA A CLARK

500 LA TERRAZA BLVD STE
150

ESCONDIDO, CA 92025

Phone: (877) 757-8353

Fax: (818) 357-2505

After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1760546428

Provider English Spoken: Y
Provider Language(s)

Spoken: Arabic, Armenian,
Farsi, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 7:00AM-7:00PM
M-F 7:00AM-7:00PM

Website: N/A

SPEECH PATHOLOGIST

DURNAN, CASSANDRA

Provider ID: 307881

Board Certified Specialty: No
CASSANDRA L DURNAN

500 LA TERRAZA BLVD STE
150

ESCONDIDO, CA 92025

Phone: (877) 757-8353

Fax: (818) 357-2505

After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1073873501

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish




Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N


D3. 专科提供者名录


 Accessibility: CONTACT PROVIDER
 Hours: M-F 7:00AM-7:00PM
 Website: N/A

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO

Provider ID: 304606
Board Certified Specialty: No
SERGIO G CASILLAS
BERUMEN

 1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025

 Phone: (760) 884-4500

Fax: (619) 483-3997

 After Hours Phone: (760)
884-4500

Provider Gender: Male

NPI: 1437470762

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: PALOMAR
HEALTH, PARADISE VALLEY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MERCY HOSPITAL,
PALOMAR MEDICAL CENTER


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL

GROVE, JAY

Provider ID: 245226

Board Certified Specialty: No
JAY R GROVE

 2185 CITRACADO PKWY
ESCONDIDO, CA 92029


 Phone: (760) 300-3647

Fax: (760) 482-1316

 After Hours Phone: (760)
300-3647

Provider Gender: Male

NPI: 1912971334

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER, TRI CITY MEDICAL
CTR, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


SURGERY NEUROLOGICAL

HATEFI, DUSTIN

Provider ID: 310032

Board Certified Specialty: No
DUSTIN HATEFI

 2185 CITRACADO PKWY
ESCONDIDO, CA 92029

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790072106

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

SURGERY ORTHOPEDIC


EDMONDS, ERIC

Provider ID: 277831

Board Certified Specialty: No
ERIC W EDMONDS

 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

 Phone: (760) 480-8770

Fax: (760) 480-8811

 After Hours Phone: (760)
480-8770

Provider Gender: Male

NPI: 1013048412



 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

D3. 专科提供者名录

American Sign Language (ASL):  Phone: (760) 743-0546
N  Fax: (760) 317-9769

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


SURGERY ORTHOPEDIC

KNUTSON, THOMAS

Provider ID: 296851

Board Certified Specialty: No
THOMAS R KNUTSON

 2130 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029

 Phone: (760) 743-4789

Fax: (760) 743-4779

 After Hours Phone: (760)
743-4789

Provider Gender: Male

NPI: 1962409938

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


 Website: N/A

SURGERY ORTHOPEDIC

SHARP, LORRA

Provider ID: 304761


Board Certified Specialty: No
LORRA M SHARP

 2130 CITRACADO PKWY STE 220
ESCONDIDO, CA 92029

 After Hours Phone: (760)
743-0546

Provider Gender: Female

NPI: 1689689176

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: POMONA
VALLEY HOSP MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


 Website: N/A


SURGERY ORTHOPEDIC

SHARP, LORRA


Provider ID: 296808

Board Certified Specialty: No
LORRA M SHARP

 2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029


 Phone: (760) 743-4789

Fax: (858) 385-1690

 After Hours Phone: (760)
743-4789

Provider Gender: Female

NPI: 1689689176

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: POMONA
VALLEY HOSP MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


 Website: N/A


SURGERY PEDIATRIC

KLING, KAREN

Provider ID: 206130

Board Certified Specialty: No
KAREN M KLING

 625 CITRACADO PKWY STE 206
ESCONDIDO, CA 92025

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1982775144

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MARY BIRCH HOSP

FOR WOMEN AND
NEWBORNS, NATIONAL


NAVAL MED CTR, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

FALLBROOK

D3. 专科提供者名录

CERTIFIED ACUPUNCTURIST

CRAFT, KEVIN

Provider ID: 290943

Board Certified Specialty: No
KEVIN E CRAFT

📍 1309 S MISSION RD
FALLBROOK, CA 92028

☎ Phone: (760) 690-5900

Fax: (760) 731-1063

🕒 After Hours Phone: (760)
690-5900

Provider Gender: Male

NPI: 1659745610

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: TU-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

GUIDI, CASEY

Provider ID: 296010

Board Certified Specialty: No
CASEY L GUIDI

📍 1328 S MISSION RD
FALLBROOK, CA 92028

☎ Phone: (760) 451-4730

Fax: (760) 457-4700

🕒 After Hours Phone: (760)
451-4730

Provider Gender: Female

NPI: 1013349919

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 298086

Board Certified Specialty: No
BRIDGET M KELLEHER

📍 321 E ALVARADO ST
FALLBROOK, CA 92028

☎ Phone: (760) 723-6200

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
723-6200

Provider Gender: Female

NPI: 1245695006

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-8:00PM

F 8:00AM-5:00PM
SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 299775

Board Certified Specialty: No
BRIDGET M KELLEHER

📍 321 E ALVARADO ST
FALLBROOK, CA 92028

☎ Phone: (760) 723-6200

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
723-6200

Provider Gender: Female

NPI: 1245695006

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-8:00PM

F 8:00AM-5:00PM
SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

STOJANOVSKA, JOVANA

Provider ID: 301367

Board Certified Specialty: No
JOVANA STOJANOVSKA

📍 1328 S MISSION RD
FALLBROOK, CA 92028

☎ Phone: (760) 451-4720

Fax: (760) 457-4700

🕒 After Hours Phone: (760)

D3. 专科提供者名录

451-4720

Provider Gender: Female


NPI: 1215638499


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 299407

Board Certified Specialty: No
CHRISTOPHER TAYLOR

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

Fax: (760) 414-3892

 After Hours Phone: (760)
723-6200

Provider Gender: Male


NPI: 1851747166


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\100

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 302118

Board Certified Specialty: No
CHRISTOPHER TAYLOR

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

Fax: (760) 414-3892

 After Hours Phone: (760)
723-6200

Provider Gender: Male

NPI: 1851747166


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-4:00PM

 Website: N/A


CHIROPRACTOR

FARSHLER, ANTHONY

Provider ID: 290306

Board Certified Specialty: No
ANTHONY J FARSHLER

 1309 S MISSION RD
FALLBROOK, CA 92028

 Phone: (760) 690-5900

Fax: (760) 731-1063

 After Hours Phone: (760)
690-5900

Provider Gender: Male


NPI: 1841627759

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CHIROPRACTOR

HALVORSON, PAULA

Provider ID: 298338

Board Certified Specialty: No
PAULA HALVORSON

 1309 S MISSION RD
FALLBROOK, CA 92028

 Phone: (760) 690-5900

Fax: (760) 731-1063

 After Hours Phone: (760)
690-5900

Provider Gender: Female

NPI: 1275542193


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: TU 8:00AM-5:00PM
TH-F 8:00AM-5:00PM

 Website: N/A


FAMILY PRACTICE

CHRISTIE, PATRICIA


Provider ID: 299526

Board Certified Specialty: No
PATRICIA L CHRISTIE

 1328 S MISSION RD
FALLBROOK, CA 92028

 Phone: (760) 451-4720


Fax: (760) 457-4700

 After Hours Phone: (760)
451-4720

D3. 专科提供者名录

Provider Gender: Female

NPI: 1881625531

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:30PM

 Website: N/A

OPTOMETRIST


BULLUM, ANTHONY

Provider ID: 290329


Board Certified Specialty: No

ANTHONY J BULLUM

 1328 S MISSION RD
FALLBROOK, CA 92028

 Phone: (760) 451-4720

Fax: (760) 457-4700

 After Hours Phone: (760)
451-4720

Provider Gender: Male

NPI: 1992773956

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PEDIATRICS


ROBINSON, DAISY

Provider ID: 298311

Board Certified Specialty: No

DAISY A ROBINSON

 321 E ALVARADO ST
FALLBROOK, CA 92028


 Phone: (760) 723-6200

Fax: (760) 414-3892

 After Hours Phone: (760)
723-6200

Provider Gender: Female

NPI: 1659389740

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:00AM-4:00PM

 Website: N/A

PEDIATRICS


SMITH, LINDA

Provider ID: 308731

Board Certified Specialty: No

LINDA B SMITH

 1328 S MISSION RD
FALLBROOK, CA 92028

 Phone: (760) 451-4720

Fax: (760) 451-4700

 After Hours Phone: (760)
451-4720

Provider Gender: Female

NPI: 1881665800

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:30PM

 Website: N/A

HEMET

PHYSICIANS ASSISTANT

SMITH, KELLI


Provider ID: 272953


Board Certified Specialty: No

KELLI A SMITH

 3853 W STETSON AVE STE
200

HEMET, CA 92545

 Phone: (951) 225-6802

 After Hours Phone: (951)
225-6802

Provider Gender: Female

NPI: 1841771664

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

D3. 专科提供者名录

 Website: N/A

IMPERIAL BEACH

CERTIFIED NURSE PRACTITIONER


BORRAJERO, OBEL

Provider ID: 303242

Board Certified Specialty: No

OBEL M BORRAJERO

 949 PALM AVE
IMPERIAL BEACH, CA 91932


 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

Provider Gender: Male

NPI: 1093280588

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER


CUNNINGHAM, STEPHANIE

Provider ID: 301310

Board Certified Specialty: No

STEPHANIE L CUNNINGHAM

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1174223655

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER


O'CONNELL, STEFANY

Provider ID: 296845

Board Certified Specialty: No

STEFANY I O'CONNELL

 949 PALM AVE
IMPERIAL BEACH, CA 91932



 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1386378479

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER


THYGERSEN, ALAYSA

Provider ID: 297909

Board Certified Specialty: No

ALAYSA L THYGERSEN

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

Provider Gender: Female


NPI: 1760107767


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

FAMILY PRACTICE


SUMMERS-DAY, COURTNEY

Provider ID: 290977

Board Certified Specialty: No

COURTNEY A SUMMERS-DAY

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1124288873

 Provider English Spoken: Y

D3. 专科提供者名录

*Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 Website: N/A

INTERNAL MEDICINE

RYAN, DANA

Provider ID: 298099
Board Certified Specialty: No
DANA A RYAN
 949 PALM AVE
IMPERIAL BEACH, CA 91932
 Phone: (619) 429-3733
Fax: (619) 628-5550
 *After Hours Phone: (619)
429-3733*
Provider Gender: Female
NPI: 1780609990
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M 8:30AM-8:00PM
TU-W 8:30AM-5:00PM
TH 8:30AM-8:00PM
F 8:30AM-5:00PM*
 Website: N/A

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON

Provider ID: 304530
Board Certified Specialty: No
BRANDON G CHENG
 600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
 Phone: (619) 332-4200
Fax: (613) 332-4220
 *After Hours Phone: (619)
332-4200*
Provider Gender: Male
NPI: 1336894724

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-TH
7:00AM-7:00PM
F 7:00AM-5:00PM
SA 8:00AM-1:00PM*
 Website: N/A

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA

Provider ID: 301973
Board Certified Specialty: No
ANDREA L JIMENEZ
 600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
 Phone: (619) 482-3000
Fax: (619) 332-4220
 *After Hours Phone: (619)
482-3000*
Provider Gender: Female
NPI: 1407440670

Provider English Spoken: Y
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 Website: N/A

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA

Provider ID: 299890
Board Certified Specialty: No
ANDREA L JIMENEZ
 600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
 Phone: (619) 482-3000
Fax: (619) 332-4220
 *After Hours Phone: (619)
482-3000*
Provider Gender: Female
NPI: 1407440670
 Provider English Spoken: Y
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 Website: N/A

D3. 专科提供者名录

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI

Provider ID: 287101

Board Certified Specialty: No
PRACHI KARANDE

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1699357525

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
7:00AM-6:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA

Provider ID: 305016

Board Certified Specialty: No
TIA NGUYEN

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Phone: (619) 482-3000

Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1457136269

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
7:00AM-7:00PM

F 7:00AM-4:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA

Provider ID: 305015

Board Certified Specialty: No
TIA NGUYEN

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Phone: (619) 482-3000

Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1457136269

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
7:00AM-7:00PM

F 7:00AM-4:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW

Provider ID: 286783

Board Certified Specialty: No
ANDREW NOVENCIDO

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Phone: (619) 482-3000

Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1447723937

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW

Provider ID: 301995

Board Certified Specialty: No
ANDREW NOVENCIDO

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Phone: (619) 482-3000

Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1447723937




Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N




D3. 专科提供者名录

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST



SPARKS, TODD

Provider ID: 301109
Board Certified Specialty: No
TODD M SPARKS

 600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932 N
 Phone: (619) 482-3000
Fax: (619) 332-4220
 After Hours Phone: (619)
482-3000

Provider Gender: Male


NPI: 1265481139


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M 7:00AM-7:00PM
TU 7:00AM-0:00PM
W-TH 7:00AM-7:00PM
F 7:00AM-0:00PM


 Website: N/A

REGISTERED PHYSICAL THERAPIST

SUGGS, SARAH

Provider ID: 298365
Board Certified Specialty: No
SARAH SUGGS

 600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

 Phone: (619) 482-3000
Fax: (619) 332-4220

 After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1083353650


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7:00AM-7:00PM


 Website: N/A

REGISTERED PHYSICAL THERAPIST

SUGGS, SARAH

Provider ID: 301429
Board Certified Specialty: No
SARAH SUGGS

 600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

 Phone: (619) 482-3000
Fax: (619) 332-4220

 After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1083353650


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7:00AM-7:00PM


 Website: N/A

REGISTERED PHYSICAL THERAPIST

VILLANUEVA, GIOVANNI

Provider ID: 301531
Board Certified Specialty: No
GIOVANNI X VILLANUEVA

 600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

 Phone: (619) 482-3000
Fax: (619) 332-4220

 After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1063046878

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
7:00AM-7:00PM
F 7:00AM-5:00PM

 Website: N/A


LA JOLLA

ANESTHESIOLOGY

ALEXANDER, BRENTON

Provider ID: 242302
Board Certified Specialty: No
BRENTON S ALEXANDER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)

D3. 专科提供者名录

926-8273

Provider Gender: Male

NPI: 1811366644

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA

Provider ID: 300067

Board Certified Specialty: No
TOSHA D BECERRA SONGOLO

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1265938724

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


ANESTHESIOLOGY


BRUNO, KELLY

Provider ID: 238904

Board Certified Specialty: No
KELLY A BRUNO

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891130993

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY

CHAN, CHI-BEW

Provider ID: 310045

Board Certified Specialty: No
CHI-BEW CHAN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1205966264

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
TRI CITY MEDICAL CTR, SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
DAMERON HOSPITAL ASSOC,
DAMERON HOSPITAL ASSOC,
SHARP CHULA VISTA MED
CTR, SHARP CORONADO
HOSP AND HEALTHCARE CTR,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


ANESTHESIOLOGY


CURRAN, BRIAN

Provider ID: 239003

Board Certified Specialty: No
BRIAN P CURRAN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1710373642

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

D3. 专科提供者名录

MEDICAL CTR, UCSD LA JOLLA BRENT W FUNDINGSLAND
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY

FEJLEH, ASHLEY

Provider ID: 269503
Board Certified Specialty: No
ASHLEY N FEJLEH
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1609353465
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY

FUNDINGSLAND, BRENT

Provider ID: 280469
Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1831166560
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SADDLEBACK
MEMORIAL MED CTR, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY

HOSALKAR, HETAL

Provider ID: 243370
Board Certified Specialty: No
HETAL H HOSALKAR
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1861556821
Provider English Spoken: Y
Provider Language(s)

Spoken: Farsi, Gujarati,
Hindi
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY


HYLTON, DIANA

Provider ID: 241736
Board Certified Specialty: No
DIANA J HYLTON
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1932527751
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

D3. 专科提供者名录

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


ANESTHESIOLOGY


MEYER, MEGAN

Provider ID: 239608

*Board Certified Specialty: No
MEGAN S MEYER*


 *9300 CAMPUS POINT DR
LA JOLLA, CA 92037*

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1720473044

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


ANESTHESIOLOGY

NGUYEN, QUOC SY

Provider ID: 242189

*Board Certified Specialty: No
QUOC-SY NGUYEN*


 *9300 CAMPUS POINT DR
LA JOLLA, CA 92037*

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1871911644

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Vietnamese*

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

*THORNTON, UCSD MEDICAL
CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

ANESTHESIOLOGY


OKAMOTO, VINCENT


Provider ID: 245952

Board Certified Specialty: No

VINCENT R OKAMOTO


 *9415 CAMPUS POINT DR
LA JOLLA, CA 92093*

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1952338709

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, ALVARADO

HOSPITAL LLC, SOUTHWEST

HEALTHCARE INLAND VALLEY

HOSPITAL, UCSD LA JOLLA

*JOHN SALLY THORNTON,
UCSD MEDICAL CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

ANESTHESIOLOGY


OSWALD, JESSICA


Provider ID: 239601

Board Certified Specialty: No

JESSICA C OSWALD

 *9300 CAMPUS POINT DR
LA JOLLA, CA 92037*

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1427315118

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

*THORNTON, UCSD MEDICAL
CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

ANESTHESIOLOGY

D3. 专科提供者名录

SHAW, SUSANNA

Provider ID: 255317

Board Certified Specialty: No
SUSANNA J SHAW

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1063685477

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

ANESTHESIOLOGY

SORIA, CLAIRE

Provider ID: 243295

Board Certified Specialty: No
CLAIRE S SORIA

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447516414

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

ANESTHESIOLOGY

SUYDAM, STEVEN

Provider ID: 286570

Board Certified Specialty: No
STEPHEN M SUYDAM

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1386856821

🗣 Provider English Spoken: Y

🗣 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
TRI CITY MEDICAL CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP CHULA VISTA MED
CTR, SHARP CHULA VISTA
MED CTR, SHARP CORONADO

HOSP AND HEALTHCARE CTR,
RADY CHILDRENS HOSPITAL
SAN DIEGO, SCRIPPS GREEN
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

ANESTHESIOLOGY

TRIVEDI, SURAJ

Provider ID: 246750

Board Certified Specialty: No
SURAJ S TRIVEDI

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699057885

🗣 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

D3. 专科提供者名录

ANESTHESIOLOGY

TSUDA, PAIGE

Provider ID: 271683

Board Certified Specialty: No
PAIGE S TSUDA

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1003261595

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

TULLY, JEFFREY

Provider ID: 283690

Board Certified Specialty: No
JEFFREY L TULLY

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871912493

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UC DAVIS
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,
UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

TZENG, ERIC

Provider ID: 284578

Board Certified Specialty: No

ERIC TZENG

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1801258264

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

WANG, MICHELLE

Provider ID: 286139

Board Certified Specialty: No
MICHELLE Y WANG

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1659802965

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

YODER, ANDREA

Provider ID: 272805

Board Certified Specialty: No
ANDREA R YODER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

D3. 专科提供者名录

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1629463104

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

ANESTHESIOLOGY

YOUNAN, LAWRENCE

Provider ID: 240871

Board Certified Specialty: No
LAWRENCE J YOUNAN

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1922432475

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

ANESTHESIOLOGY PAIN

MANAGEMENT

CASTELLANOS, JOEL

Provider ID: 243554

Board Certified Specialty: No

JOEL P CASTELLANOS

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1700296514

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CARDIOVASCULAR DISEASE

KEEN, WILLIAM

Provider ID: 291303

Board Certified Specialty: No

WILLIAM D KEEN

📍 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8372

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8372

Provider Gender: Male

NPI: 1962561571

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CARDIOVASCULAR DISEASE

MIZZELL, ANNA

Provider ID: 214021

Board Certified Specialty: No

ANNA M MIZZELL

📍 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1851561021

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

D3. 专科提供者名录

CARDIOVASCULAR DISEASE

PHREANER, NICHOLAS

Provider ID: 224864

Board Certified Specialty: No

NICHOLAS J PHREANER

9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1023373040

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CARDIOVASCULAR DISEASE

SHAPIRO, HILARY

Provider ID: 300000

Board Certified Specialty: No

HILARY A SHAPIRO

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1811382815

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304140

Board Certified Specialty: No

JACQUELINE ARELLANO

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304141

Board Certified Specialty: No

JACQUELINE ARELLANO

9300 CAMPUS POINT DR

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304136

Board Certified Specialty: No

JACQUELINE ARELLANO

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

D3. 专科提供者名录

 Website: N/A


CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304130

Board Certified Specialty: No
FIDES Q JULIAN

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304135

Board Certified Specialty: No
FIDES Q JULIAN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304134

Board Certified Specialty: No
FIDES Q JULIAN

 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

AGYEMANG, ALBERTA

Provider ID: 265131

Board Certified Specialty: No
AGYEMANG A AGYEMANG

 8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037


 Phone: (858) 657-8000

Fax: (858) 657-8387

 After Hours Phone: (858)
657-8000

Provider Gender: Female

NPI: 1023400082

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

AGYEMANG, ALBERTA

Provider ID: 265130

Board Certified Specialty: No
AGYEMANG A AGYEMANG

 9350 CAMPUS POINT DR
STE 2B

D3. 专科提供者名录

LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1023400082
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

BOUELLE, AMY
Provider ID: 243485
Board Certified Specialty: No
AMY L BOUELLE
📄 8910 VILLA LA JOLLA DR STE 200
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1609117704
📄 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

BRADY, KATELYN
Provider ID: 209017
Board Certified Specialty: No
KATELYN A BRADY
📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1952797540

📄 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

BUENROSTRO, CHRISTINA
Provider ID: 243717
Board Certified Specialty: No
CHRISTINA BUENROSTRO
📄 8910 VILLA LA JOLLA DR STE 200
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1851749253
📄 Provider English Spoken: Y
📄 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

CAPOZZI, JENNIFER
Provider ID: 241030
Board Certified Specialty: No
JENNIFER E CAPOZZI
📄 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1336258276
📄 Provider English Spoken: Y
📄 Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes


D3. 专科提供者名录

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

CONNER, PAMELA

Provider ID: 299931

Board Certified Specialty: No
PAMELA M CONNER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770558967

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

CONNER, PAMELA

Provider ID: 299932

Board Certified Specialty: No
PAMELA M CONNER

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770558967

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


CONNOR, CAROLINE

Provider ID: 279834

Board Certified Specialty: No
CAROLINE L CONNOR

 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1609081710

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


CZYPULL, MONICA

Provider ID: 284662


Board Certified Specialty: No
MONICA CZYPULL

 9850 GENESEE AVE STE
320

LA JOLLA, CA 92037

 Phone: (858) 554-1212

Fax: (858) 795-1195

 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1831784842

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

DAVIES, SUMMER

Provider ID: 253691

Board Certified Specialty: No

D3. 专科提供者名录

SUMMER R DAVIES

8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

Phone: (858) 249-6800

Fax: (858) 657-6420

After Hours Phone: (858)
249-6800

Provider Gender: Female

NPI: 1679850671

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

DAVIES, SUMMER

Provider ID: 238922

Board Certified Specialty: No
SUMMER R DAVIES

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-7600

After Hours Phone: (858)
657-7600

Provider Gender: Female

NPI: 1679850671

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

DE DIOS, SARAH JANE

Provider ID: 300052

Board Certified Specialty: No
SARAH JANE J DE DIOS

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528632742

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

DIMAIRA, FRANCESCA

Provider ID: 245580

Board Certified Specialty: No
FRANCESCA DIMAIRA

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346670718

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

DIMAIRA, FRANCESCA

Provider ID: 245579

Board Certified Specialty: No
FRANCESCA DIMAIRA

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346670718

Provider English Spoken: Y

D3. 专科提供者名录


Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER


DRISCOLL, KARRIE

Provider ID: 286376

Board Certified Specialty: No

KARRIE A DRISCOLL

 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093

 *Phone: (858) 822-6277*

Fax: (858) 228-1731

 *After Hours Phone: (858) 822-6277*

Provider Gender: Female

NPI: 1396085098


 *Provider English Spoken: Y*
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER


GARTH, MELISSA

Provider ID: 268991

Board Certified Specialty: No

MELISSA A GARTH

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1689232977

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER


GARTH, MELISSA

Provider ID: 268992

Board Certified Specialty: No

MELISSA A GARTH

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)*

926-8273

Provider Gender: Female

NPI: 1689232977

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER


GIOVANNETTI, ERIN

Provider ID: 276002

Board Certified Specialty: No

ERIN R GIOVANNETTI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Male

NPI: 1013317767

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

D3. 专科提供者名录

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


CERTIFIED NURSE

PRACTITIONER


GOMEZ, LESLIE

Provider ID: 299469

*Board Certified Specialty: No
LESLIE N GOMEZ*

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093


 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1528578713

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER

GOMEZ, LESLIE

Provider ID: 299470

*Board Certified Specialty: No
LESLIE N GOMEZ*

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1528578713

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER

GOMEZ, LESLIE

Provider ID: 299464

*Board Certified Specialty: No
LESLIE N GOMEZ*

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093


 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1528578713

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER

GOMEZ, LESLIE

Provider ID: 299465

*Board Certified Specialty: No
LESLIE N GOMEZ*

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1528578713

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER

HANNA, LINDSAY

Provider ID: 284967

*Board Certified Specialty: No
LINDSAY D HANNA*

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*





Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1699257907




D3. 专科提供者名录






 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER

HARKNESS, RUMIKO




Provider ID: 208840
Board Certified Specialty: No
RUMIKO HARKNESS
 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1487785093






 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Japanese*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER

IYER, VICTORIA





Provider ID: 265624
Board Certified Specialty: No
VICTORIA G IYER
 9350 CAMPUS POINT DR
STE 2B
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1871738864

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Tagalog*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER

JONES, CHRISTA


Provider ID: 275564
Board Certified Specialty: No
CHRISTA E JONES
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (800) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1396371431
 *Provider English Spoken: Y*

Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*



CERTIFIED NURSE

PRACTITIONER

KORMANIK, PATRICIA

Provider ID: 282070
Board Certified Specialty: No
PATRICIA A KORMANIK
 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1093895047
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

D3. 专科提供者名录

 Hours: M-F
8:00AM-5:00PM
 Website: N/A


CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY

Provider ID: 301604
Board Certified Specialty: No
KIMBERLY A LANE

 9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

 Phone: (858) 453-5944

Fax: (858) 429-7925

 After Hours Phone: (858)
453-5944

Provider Gender: Female

NPI: 1457670119


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

CERTIFIED NURSE PRACTITIONER

MATTHESS, JANETTE

Provider ID: 287645
Board Certified Specialty: No
JANETTE E MATTHESS

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1457694549

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER


MATTHESS, JANETTE

Provider ID: 287644

Board Certified Specialty: No
JANETTE E MATTHESS

 8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1457694549

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

MICK, SHARON

Provider ID: 299650
Board Certified Specialty: No
SHARON L MICK

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891061966

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE PRACTITIONER

MICK, SHARON

Provider ID: 299645

Board Certified Specialty: No

D3. 专科提供者名录

SHARON L MICK

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891061966

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MICK, SHARON

Provider ID: 299646

Board Certified Specialty: No
SHARON L MICK

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891061966

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MICK, SHARON

Provider ID: 299651

Board Certified Specialty: No
SHARON L MICK

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891061966

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MOHEBBI, ATHENA

Provider ID: 282231

Board Certified Specialty: No
ATHENA MOHEBBI

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1952627176

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MULVEY, CAOILFHIONN

Provider ID: 291420

Board Certified Specialty: No
CAOILFHIONN M MULVEY

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (800) 926-8372




Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

Provider Gender: Female

NPI: 1184386864




D3. 专科提供者名录

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A





CERTIFIED NURSE PRACTITIONER

NACOSTE, LAKEISHA

Provider ID: 272935
Board Certified Specialty: No
LAKEISHA NACOSTE

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
 Phone: (858) 822-5210
 After Hours Phone: (858)
822-5210





Provider Gender: Female
NPI: 1194139634




 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

PAULSON, KERRY




Provider ID: 201269
Board Certified Specialty: No


KERRY L PAULSON
 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (619) 543-3000
 After Hours Phone: (619)
543-3000
Provider Gender: Female
NPI: 1518363407
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

RALEIGH, DEBORAH

Provider ID: 215016
Board Certified Specialty: No
DEBORAH J RALEIGH
 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1689006876
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, UCSD





MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

ROCHE, CHELSEA

Provider ID: 270706
Board Certified Specialty: No
CHELSEA E ROCHE
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1063040384

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

D3. 专科提供者名录

CERTIFIED NURSE

PRACTITIONER

ROSSI, CATHERINE

Provider ID: 291446

Board Certified Specialty: No

CATHERINE R ROSSI

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

Provider Gender: Female

NPI: 1649934126

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

SRILASAK, MICHELE

Provider ID: 281855

Board Certified Specialty: No

MICHELE SRILASAK

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265487326

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

STEVENS ON, REHEIA

Provider ID: 210795

Board Certified Specialty: No

REHEIA A STEVENSON

9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346696044

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

TOPPEN, LAURA

Provider ID: 215475

Board Certified Specialty: No

LAURA TOPPEN

9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1326563495

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

TOPPEN, LAURA

Provider ID: 215476

Board Certified Specialty: No

LAURA TOPPEN

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093


Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

D3. 专科提供者名录


NPI: 1326563495


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


TREJO, ANA

Provider ID: 307670

Board Certified Specialty: No
ANA C TREJO

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1033717194


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

TREJO, ANA


Provider ID: 307671


Board Certified Specialty: No

ANA C TREJO

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1033717194

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


TREJO, ANA

Provider ID: 307673

Board Certified Specialty: No
ANA C TREJO

 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1033717194


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


TRUJILLO, DALE

Provider ID: 278428

Board Certified Specialty: No
DALE M TRUJILLO

 9350 CAMPUS POINT DR
STE 2B

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1003104423

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


TUCKER, LANIKA

Provider ID: 307658

Board Certified Specialty: No
LANIKA A TUCKER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)

D3. 专科提供者名录

926-8273
Provider Gender: Female
NPI: 1477325181
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

YEO, ALEXANDRIA

Provider ID: 299942
Board Certified Specialty: No
ALEXANDRIA YEO
📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1902368319
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST

ALFONSO, ALVIN

Provider ID: 256375

Board Certified Specialty: No
ALVIN M ALFONSO
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
📞 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1952653404
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST

BAYLIS, CHRISTOPHER

Provider ID: 240764
Board Certified Specialty: No
CHRISTOPHER M BAYLIS
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1174893358
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A





CERTIFIED REGISTERED NURSE ANESTHETIST BURROWS, TERENCE




Provider ID: 256695
Board Certified Specialty: No
TERENCE J BURROWS
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1023194560
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST DOLLAND, STEVEN






Provider ID: 280553
Board Certified Specialty: No
STEVEN C DOLLAND
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

D3. 专科提供者名录

 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982059044
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: KERN MEDICAL CENTER, UCSD MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A




CERTIFIED REGISTERED NURSE ANESTHETIST

FERRITER, STACY
Provider ID: 265296
Board Certified Specialty: No
STACY K FERRITER
 9300 CAMPUS POINT DR LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1780725556
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A






CERTIFIED REGISTERED NURSE ANESTHETIST

GARCIA, CALVIN
Provider ID: 217366
Board Certified Specialty: No
CALVIN J GARCIA
 9300 CAMPUS POINT DR LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1427419944

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A





CERTIFIED REGISTERED NURSE ANESTHETIST


GONZALEZ, LISA
Provider ID: 299906
Board Certified Specialty: No

LISA A GONZALEZ
 9300 CAMPUS POINT DR LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1083254205
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST

POLIKOWSKI, SAMANTHA
Provider ID: 291443
Board Certified Specialty: No
SAMANTHA E POLIKOWSKI
 9300 CAMPUS POINT DR LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1194134114

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN

D3. 专科提供者名录

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST


RAMIREZ, NICOLE

Provider ID: 291403


Board Certified Specialty: No

NICOLE A RAMIREZ

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1487213500

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST


SACKS, BRENT

Provider ID: 278004

Board Certified Specialty: No

BRENT A SACKS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982133591

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


CHOI, NATHALIE

Provider ID: 301713

Board Certified Specialty: No

NATHALIE L CHOI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073241618

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER,
SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

GOODWIN, RACHEL


Provider ID: 210017


Board Certified Specialty: No

RACHEL K GOODWIN

 8910 VILLA LA JOLLA DR
STE 200



LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1518274919

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

D3. 专科提供者名录

NURSE MIDWIFE

GREAR MANN, MELISSA

Provider ID: 210051

Board Certified Specialty: No
MELISSA P GREAR MANN

8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255384475

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

GUNTHER, HOPE

Provider ID: 210040

Board Certified Specialty: No
HOPE R GUNTHER

8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

Phone: (858) 657-8745

After Hours Phone: (858)
657-8745

Provider Gender: Female

NPI: 1285667741

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:00AM-5:00PM
W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM

Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

HIRSCH, JENNIFER

Provider ID: 210057

Board Certified Specialty: No
JENNIFER S HIRSCH

8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

Phone: (858) 657-8745

After Hours Phone: (858)
657-8745

Provider Gender: Female

NPI: 1891752069

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:00AM-5:00PM
W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM

Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

HIRSCH, JENNIFER

Provider ID: 210056

Board Certified Specialty: No
JENNIFER S HIRSCH

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-8745

After Hours Phone: (858)
657-8745

Provider Gender: Female

NPI: 1891752069

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

NATHAN, CARLY

Provider ID: 301046

Board Certified Specialty: No
CARLY NATHAN

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1235670977

Provider English Spoken: Y
Cultural Competency: N

D3. 专科提供者名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


EMERGENCY MEDICINE

AMANN, CHRISTOPHER

Provider ID: 270914

Board Certified Specialty: No
CHRISTOPHER J AMANN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-7000

Fax: (888) 539-8781

 After Hours Phone: (858)
657-7000

Provider Gender: Male

NPI: 1134326895

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON, USC
KENNETH NORRIS JR CANCER

HOSPITAL, KECK HOSPITAL OF
USC, USC VERDUGO HILLS


HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

AUSTIN, ANDREA

Provider ID: 269292

Board Certified Specialty: No
ANDREA L AUSTIN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1811289093

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,
GROSSMONT HOSPITAL, Los

Angeles General Medical
Center, TEMECULA VALLEY


HOSPITAL INC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

BAGBY, JESSICA

Provider ID: 271138

Board Certified Specialty: No
JESSICA A BAGBY

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1093161473

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE


BAGBY, JESSICA

Provider ID: 271135

Board Certified Specialty: No
JESSICA A BAGBY

 8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

 Phone: (858) 249-6800

Fax: (858) 404-9226

 After Hours Phone: (858)
249-6800

Provider Gender: Female

NPI: 1093161473

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

D3. 专科提供者名录

American Sign Language (ASL):  9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

BARRY, JEFFREY

Provider ID: 271131

Board Certified Specialty: No
JEFFREY R BARRY

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1801207006


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY

Provider ID: 270335

Board Certified Specialty: No
AMY BELLINGHAUSEN

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1801206354

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


EMERGENCY MEDICINE

BLACK, NICHOLAS

Provider ID: 284415

Board Certified Specialty: No
NICHOLAS D BLACK


 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1154852689

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:


COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
UCSD MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-8:00PM


 Website: N/A


EMERGENCY MEDICINE

CASTELLANO, TIFFANY

Provider ID: 271611

Board Certified Specialty: No
TIFFANY M CASTELLANO

 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

 Phone: (858) 249-6800
Fax: (858) 404-9226

 After Hours Phone: (858)
249-6800


Provider Gender: Female


NPI: 1063893063

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

D3. 专科提供者名录

 Website: N/A


EMERGENCY MEDICINE

CHEN, ALICE

Provider ID: 287427

Board Certified Specialty: No
ALICE Y CHEN

 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427476597

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

CHEN, ALICE

Provider ID: 287429

Board Certified Specialty: No
ALICE Y CHEN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427476597

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

GALUST, HENRIK

Provider ID: 300053

Board Certified Specialty: No

HENRIK GALUST

 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1932696093

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, SAN

GORGONIO MEMORIAL HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

EMERGENCY MEDICINE

GOODRICH, ANDREW

Provider ID: 271625

Board Certified Specialty: No
ANDREW S GOODRICH

 8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1245688415

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

GUITTARD, JESSE

Provider ID: 239880


Board Certified Specialty: No
JESSE A GUITTARD

D3. 专科提供者名录

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 657-6400
 After Hours Phone: (858)
657-6400

Provider Gender: Male

NPI: 1770979890

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE


HERNANDEZ, CRISTINA

Provider ID: 242545

Board Certified Specialty: No
CRISTINA T HERNANDEZ


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1164765046

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE


HERNANDEZ, CRISTINA

Provider ID: 278988

Board Certified Specialty: No
CRISTINA T HERNANDEZ

 8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1164765046

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

HOGUE, BRENNAL

Provider ID: 300006

Board Certified Specialty: No
BRENNAL HOGUE

 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1043705296

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


EMERGENCY MEDICINE

HOGUE, BRENNAL

Provider ID: 301710

Board Certified Specialty: No
BRENNAL HOGUE

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781



 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1043705296








 Provider English Spoken: Y
Cultural Competency: N

D3. 专科提供者名录

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

EMERGENCY MEDICINE








HORNBEAK, KIRSTEN

Provider ID: 240023
Board Certified Specialty: No
KRISTEN B HORNBEAK
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1205214442
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE





KRESHAK, ALLYSON




Provider ID: 257564
Board Certified Specialty: No

ALLYSON A KRESHAK
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1194758219
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE







KUTZ, CRAIG

Provider ID: 283846
Board Certified Specialty: No
KUTZ CRAIG MD
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1598295925
 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

KUTZ, CRAIG

Provider ID: 283844
Board Certified Specialty: No
KUTZ CRAIG MD
 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1598295925
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F

D3. 专科提供者名录

8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE **LI, JINGHONG**

Provider ID: 255938
Board Certified Specialty: No
JINGHONG LI

9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
Phone: (858) 657-7125
Fax: (858) 657-7107
After Hours Phone: (858)
657-7125
Provider Gender: Female
NPI: 1619014479

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE **LI, JINGHONG**

Provider ID: 255937
Board Certified Specialty: No
JINGHONG LI

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 657-7125
Fax: (858) 657-7107
After Hours Phone: (858)

657-7125
Provider Gender: Female
NPI: 1619014479
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE **LIOTTA, BENJAMIN**

Provider ID: 283150
Board Certified Specialty: No
BENJAMIN I LIOTTA

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1396270278

Provider English Spoken: Y
Provider Language(s)
Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-8:00PM
Website: N/A

EMERGENCY MEDICINE **MCDANIEL, MICHELE**

Provider ID: 246900
Board Certified Specialty: No
MICHELE A MCDANIEL

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1366761959
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

D3. 专科提供者名录

EMERGENCY MEDICINE

NOSTE, ERIN

Provider ID: 239796

Board Certified Specialty: No
ERIN E NOSTE

8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

Phone: (858) 249-6800

After Hours Phone: (858)
249-6800

Provider Gender: Female

NPI: 1871732214

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

PARK, JAY

Provider ID: 285609

Board Certified Specialty: No
JAY H PARK

8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1366478372

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

EMERGENCY MEDICINE

PARK, JAY

Provider ID: 285608

Board Certified Specialty: No
JAY H PARK

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1366478372

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

QUENZER, FAITH

Provider ID: 243284

Board Certified Specialty: No
FAITH C QUENZER

8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295112670

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 8:00AM-8:00PM
M-F 8:00AM-5:00PM
SA 8:00AM-8:00PM

Website: N/A

EMERGENCY MEDICINE

RUDOLF, FRANCES

Provider ID: 240160

Board Certified Specialty: No
FRANCES E RUDOLPH

9300 CAMPUS POINT DR
LA JOLLA, CA 92037


Phone: (858) 657-7000

After Hours Phone: (858)
657-7000

Provider Gender: Female

D3. 专科提供者名录

NPI: 1821487430

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE


SABHA, MAHMOUD

Provider ID: 240450

Board Certified Specialty: No
MAHMOUD SABHA


 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

 Phone: (858) 249-6800

 After Hours Phone: (858)
249-6800

Provider Gender: Male

NPI: 1457747883

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 8:00AM-8:00PM

M-F 8:00AM-5:00PM

SA 8:00AM-8:00PM

 Website: N/A

EMERGENCY MEDICINE


SELTZER, JUSTIN


Provider ID: 283135

Board Certified Specialty: No
JUSTIN A SELTZER

 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1447791843

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE


SMITH, CASEY

Provider ID: 300008

Board Certified Specialty: No
CASEY L SMITH

 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871099333

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


EMERGENCY MEDICINE


SUPAT, BENJAMIN

Provider ID: 299907

Board Certified Specialty: No
BENJAMIN R SUPAT

 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1376772905

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

EMERGENCY MEDICINE

WINKLER, GARRET

D3. 专科提供者名录

Provider ID: 271416

Board Certified Specialty: No
GARRET A WINKLER

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1336502095

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

YOU, ALAN

Provider ID: 269938

Board Certified Specialty: No
ALAN X YOU

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225425697

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

YOU, ALAN

Provider ID: 269937

Board Certified Specialty: No
ALAN X YOU

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225425697

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

YU, ELAINE

Provider ID: 301707

Board Certified Specialty: No
ELAINE YU

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528564150

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

EMERGENCY MEDICINE

YU, ELAINE

Provider ID: 299985

Board Certified Specialty: Yes
ELAINE YU

8910 VILLA LA JOLLA DR
STE A
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528564150


Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

D3. 专科提供者名录

Min/Max Age: 0\999

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

ENDOCRINOLOGY


METABOLISM DIABETES

JUANG, PATRICIA

Provider ID: 255606

Board Certified Specialty: No
PATRICIA S JUANG

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265695795

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): JODI B NAGELBERG
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY


METABOLISM DIABETES

KULASA, KRISTEN

Provider ID: 255623

Board Certified Specialty: No
KRISTEN M KULASA

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 962-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
962-8273

Provider Gender: Female

NPI: 1932324175

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES


NAGELBERG, JODI

Provider ID: 287778

Board Certified Specialty: No

JODI B NAGELBERG

 8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1720474141

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY


METABOLISM DIABETES

PETTUS, JEREMY

Provider ID: 303286

Board Certified Specialty: No
JEREMY H PETTUS

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225234982

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES


SANTOS CAVAIOLA, TRICIA


Provider ID: 256092

D3. 专科提供者名录

Board Certified Specialty: No
TRICIA SANTOS CAVAIOLA

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1518163799

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

FAMILY PRACTICE

CHEN, ALICE


Provider ID: 207166


Board Certified Specialty: No

ALICE I CHEN

 9300 MEDICAL CENTER
DR

LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265810337

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

FAMILY PRACTICE


CHEN, ALICE


Provider ID: 207165

Board Certified Specialty: No

ALICE I CHEN


 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265810337

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

FAMILY PRACTICE


JOLICOEUR, MEGAN


Provider ID: 300056

Board Certified Specialty: Yes

MEGAN E JOLICOEUR

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1114366192

 *Provider English Spoken: Y*
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER

 *Website: N/A*

GASTROENTEROLOGY


ANAND, GOBIND

Provider ID: 272836


Board Certified Specialty: No

GOBIND S ANAND

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (619) 543-2347

Fax: (858) 657-7259

 After Hours Phone: (619)
543-2347

Provider Gender: Male

NPI: 1861626814

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR




Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

D3. 专科提供者名录

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

GASTROENTEROLOGY


DAVE, SHRAVAN

Provider ID: 270448
Board Certified Specialty: No
SHRAVAN S DAVE

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 925-8273
Fax: (888) 539-8781


 After Hours Phone: (800)
925-8273

Provider Gender: Male
NPI: 1588081814

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

GASTROENTEROLOGY

DAVE, SHRAVAN


Provider ID: 270449
Board Certified Specialty: No
SHRAVAN S DAVE

 9300 CAMPUS POINT DR
STE 2C
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800)

926-8273
Provider Gender: Male
NPI: 1588081814

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


GASTROENTEROLOGY

FEJLEH, MOHAMMAD


Provider ID: 271043
Board Certified Specialty: No
MOHAMMAD P FEJLEH

 9300 CAMPUS POINT DR
STE 2C
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1205240959

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

GASTROENTEROLOGY

FEJLEH, MOHAMMAD


Provider ID: 271042
Board Certified Specialty: No
MOHAMMAD P FEJLEH

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (800) 926-8273


 After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1205240959

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

GASTROENTEROLOGY

HASAN, AWS

Provider ID: 299953
Board Certified Specialty: No
AWS K HASAN

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

D3. 专科提供者名录


NPI: 1780047597

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


GASTROENTEROLOGY

HASAN, AWS

Provider ID: 299952

Board Certified Specialty: No
AWS K HASAN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1780047597

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


GASTROENTEROLOGY

HOLMER, ARIELA

Provider ID: 273216

Board Certified Specialty: No
ARIELA K HOLMER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083032544


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GASTROENTEROLOGY

SHAH, SHAILJA

Provider ID: 283898

Board Certified Specialty: No
SHAILJA C SHAH

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073803243

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GASTROENTEROLOGY

SHAH, SHAILJA

Provider ID: 283897

Board Certified Specialty: No
SHAILJA C SHAH

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073803243

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

GASTROENTEROLOGY



TSAI, MATTHEW

Provider ID: 252369

Board Certified Specialty: No
MATTHEW TSAI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

D3. 专科提供者名录

 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1285051177

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

GASTROENTEROLOGY


TSAI, MATTHEW


Provider ID: 252368

Board Certified Specialty: No

MATTHEW TSAI

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1285051177

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

GASTROENTEROLOGY


YOUSSEF, FADY

Provider ID: 300025

Board Certified Specialty: No

FADY F YOUSSEF

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1265887723


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

GASTROENTEROLOGY


YOUSSEF, FADY

Provider ID: 300023

Board Certified Specialty: No

FADY F YOUSSEF

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1265887723

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

HEMATOLOGY / ONCOLOGY

ASIMAKOPOULOS, FOTIOS


Provider ID: 246594


Board Certified Specialty: No

FOTIOS A ASIMAKOPOULOS

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (858) 822-6100

 After Hours Phone: (858) 822-6100

Provider Gender: Male

NPI: 1518134923

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

HEMATOLOGY / ONCOLOGY

CHEN, YU-WEI

D3. 专科提供者名录

Provider ID: 303058

Board Certified Specialty: No
YU-WEI CHEN

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1245694801

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

HEMATOLOGY / ONCOLOGY

CHEN, YU-WEI

Provider ID: 303057

Board Certified Specialty: No
YU-WEI CHEN

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1245694801

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER
Website: N/A

HEMATOLOGY / ONCOLOGY

HAMDAN, AYAD

Provider ID: 241429

Board Certified Specialty: No
AYAD R HAMDAN

3960 HEALTH SCIENCES
DRIVE

LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1144431230

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, French

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

HEMATOLOGY / ONCOLOGY

HEYMAN, BENJAMIN

Provider ID: 202663

Board Certified Specialty: No
BENJAMIN M HEYMAN

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982995809

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

HEMATOLOGY / ONCOLOGY

HEYMAN, BENJAMIN

Provider ID: 202664

Board Certified Specialty: No
BENJAMIN M HEYMAN

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982995809

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT

D3. 专科提供者名录

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

HEMATOLOGY / ONCOLOGY

HEYMAN, BENJAMIN

Provider ID: 202662
Board Certified Specialty: No
BENJAMIN M HEYMAN
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1982995809
Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: SU-SA
8:00AM-5:00PM
Website: N/A

HEMATOLOGY / ONCOLOGY

PARK, SOO

Provider ID: 257202
Board Certified Specialty: No
SOO J PARK
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Phone: (800) 926-8273

Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1821351198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

HEMATOLOGY / ONCOLOGY

RICHARDSON, ANGELIQUE

Provider ID: 215010
Board Certified Specialty: No
ANGELIQUE E RICHARSON
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1700120102
Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

HEMATOLOGY / ONCOLOGY

STEWART, TYLER

Provider ID: 243920
Board Certified Specialty: No
TYLER F STEWART
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1699110676
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

HEMATOLOGY / ONCOLOGY

VU, PETER

Provider ID: 272717
Board Certified Specialty: No
PETER VU
3855 HEALTH SCIENCES
DR

D3. 专科提供者名录

LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1861810830
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

HOSPICE AND PALLIATIVE MEDICINE

RUBENZIK, TAMARA
Provider ID: 245574
Board Certified Specialty: No
TAMARA T RUBENZIK
📍 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1811200652
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

INFECTIOUS DISEASE

KUPPALLI, KRUTIKA
Provider ID: 301057
Board Certified Specialty: No
KRUTIKA KUPPALLI
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1538346317

🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, Stanford Health Care, STANFORD HEALTH CARE TRI-VALLEY
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

INFECTIOUS DISEASE

KUPPALLI, KRUTIKA

Provider ID: 301059
Board Certified Specialty: No
KRUTIKA KUPPALLI
📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1538346317
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, Stanford Health Care, STANFORD HEALTH CARE TRI-VALLEY
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

INFECTIOUS DISEASE

RAMIREZSANCHEZ, CLAUDIA
Provider ID: 299947
Board Certified Specialty: No
CLAUDIA C RAMIREZSANCHEZ
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1659720555
🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Spanish
Cultural Competency: N

D3. 专科提供者名录

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


INFECTIOUS DISEASE

TANG, MICHAEL

Provider ID: 300063

Board Certified Specialty: No
MICHAEL E TANG

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1982018545

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

INTERNAL MEDICINE


BORDIN-WOSK, TALYA

Provider ID: 273984

Board Certified Specialty: No
TALYA S BORDIN WOSK

 9300 CAMPUS POINT DR

LA JOLLA, CA 92037

 Phone: (760) 471-9186

Fax: (619) 543-8255

 After Hours Phone: (760)
471-9186

Provider Gender: Female

NPI: 1801184973

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE


BORDIN-WOSK, TALYA

Provider ID: 273985

Board Certified Specialty: No
TALYA S BORDIN WOSK

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1801184973

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE


CHENG, GEORGE

Provider ID: 247640

Board Certified Specialty: No
GEORGE Z CHENG



 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1316174568

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Chinese

Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

DJEKIC, KRISTINA

Provider ID: 286669

Board Certified Specialty: No

D3. 专科提供者名录

KRISTINA DJEKIC

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1417343732

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

HOGARTH, MICHAEL

Provider ID: 214385

Board Certified Specialty: No
MICHAEL A HOGARTH

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225019193

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON, UC

DAVIS MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

IVANOV, MARGARET

Provider ID: 272876

Board Certified Specialty: No
MARGARET A IVANOV

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1326427014

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

JABBOUR, MOUSSA

Provider ID: 256658

Board Certified Specialty: No

MOUSSA JABBOUR

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1255741633

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

KATZ, YISRAEL

Provider ID: 272937

Board Certified Specialty: No
YISRAEL KATZ

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

D3. 专科提供者名录

Provider Gender: Male

NPI: 1730507872

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

KVIATKOVSKY, MILLA

Provider ID: 274004

Board Certified Specialty: No
MILLA J KVIATKOVSKY

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1366855355

Provider English Spoken: Y

Provider Language(s)
Spoken: Finnish, French,
Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

KVIATKOVSKY, MILLA

Provider ID: 274002

Board Certified Specialty: No
MILLA J KVIATKOVSKY

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-7000

After Hours Phone: (858)
657-7000

Provider Gender: Female

NPI: 1366855355

Provider English Spoken: Y

Provider Language(s)
Spoken: Finnish, French,
Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

LAGO HERNANDEZ, CARLOS

Provider ID: 238624

Board Certified Specialty: No

CARLOS A LAGO-HERNANDEZ

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1558756270

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

LAGO HERNANDEZ, CARLOS

Provider ID: 238623

Board Certified Specialty: No
CARLOS A LAGO-HERNANDEZ

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1558756270

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

D3. 专科提供者名录

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

LAM, MICHAEL

Provider ID: 274409

Board Certified Specialty: No
MICHAEL T LAM


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1578974259

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE


MAJITHIA, AMIT


Provider ID: 255881

Board Certified Specialty: No
AMIT R MAJITHIA

 9350 CAMPUS POINT DR


LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1801091459

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

MARTINEZ, ARMANDO

Provider ID: 291422

Board Certified Specialty: No
ARMANDO R MARTINEZ


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8372
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

Provider Gender: Male

NPI: 1598261091

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


INTERNAL MEDICINE

NOKES, BRANDON

Provider ID: 287581

Board Certified Specialty: No
BRANDON T NOKES

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1487040051

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

POTOK, OLIVIA

Provider ID: 272707

Board Certified Specialty: No
OLIVIA A POTOK

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

D3. 专科提供者名录

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073951323

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

INTERNAL MEDICINE

SEBASKY, MEGHAN

Provider ID: 273963

Board Certified Specialty: No

MEGHAN M SEBASKY

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (619) 471-9186

☎ After Hours Phone: (619)
471-9186

Provider Gender: Female

NPI: 1538351408

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

INTERNAL MEDICINE

SEBASKY, MEGHAN

Provider ID: 273964

Board Certified Specialty: No

MEGHAN M SEBASKY

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1538351408

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

INTERNAL MEDICINE

SMITH, CHELSEY

Provider ID: 239921

Board Certified Specialty: No

CHELSEY J SMITH

📍 9350 CAMPUS POINT DR
STE 2B

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1013264506

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

INTERNAL MEDICINE

TAYLOR, DAVID

Provider ID: 274470

Board Certified Specialty: No

DAVID S TAYLOR

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033572995

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

D3. 专科提供者名录


N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE




WANG, ANGELA

Provider ID: 259536
Board Certified Specialty: No
ANGELA C WANG

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1730133976

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR



Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):


N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE




YADLAPATI, RENA

Provider ID: 238587
Board Certified Specialty: No
RENA H YADLAPATI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1548597784

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

YADLAPATI, RENA

Provider ID: 238586
Board Certified Specialty: No
RENA H YADLAPATI

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1548597784




 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):


N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE




YANG, JENNY

Provider ID: 283025
Board Certified Specialty: No
JENNY Z YANG

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1346636453

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

ZHANG, SHERRY

Provider ID: 272658

D3. 专科提供者名录

Board Certified Specialty: No
SHERRY S ZHANG

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1588198147

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERVENTIONAL

CARDIOLOGY

AL KHIAMI, BELAL

Provider ID: 275993

Board Certified Specialty: No
BELAL O AL KHIAMI

9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037

Phone: (858) 657-8530

After Hours Phone: (858)
657-8530

Provider Gender: Male

NPI: 1861623506

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, PIONEERS MEMORIAL

HOSPITAL, EL CENTRO
REGIONAL MEDICAL CENTER,

LOMA LINDA UNIVERSITY

MED CTR MURRIETA,

TEMECULA VALLEY HOSPITAL
INC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERVENTIONAL

CARDIOLOGY

CRUZ RODRIGUEZ, JOSE

Provider ID: 300062

Board Certified Specialty: No
JOSE B CRUZ RODRIGUEZ

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1457770240

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL, EL
CENTRO REGIONAL MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

INTERVENTIONAL

CARDIOLOGY

DAMANI, SAMIR

Provider ID: 303097

Board Certified Specialty: No
SAMIR B DAMANI

9850 GENESEE AVE STE
650

LA JOLLA, CA 92037

Phone: (858) 800-2480

Fax: (858) 216-1908

After Hours Phone: (858)
800-2480

Provider Gender: Male

NPI: 1457379372

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

SA 9:00AM-4:00PM

D3. 专科提供者名录

 Website: N/A


INTERVENTIONAL CARDIOLOGY

GOVEA, ALAYN

Provider ID: 300030

Board Certified Specialty: No
ALAYN GOVEA

 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1972997104

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:


LAKEWOOD REGIONAL MED
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

INTERVENTIONAL CARDIOLOGY


TAUB, PAM

Provider ID: 277682

Board Certified Specialty: No
PAM R TAUB

 9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1346355161

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, UCSD MEDICAL


CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERVENTIONAL CARDIOLOGY

TAUB, PAM

Provider ID: 277681

Board Certified Specialty: No
PAM R TAUB

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346355161

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, UCSD MEDICAL


CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL CARDIOLOGY


WETTERSTEN, NICHOLAS

Provider ID: 210604

Board Certified Specialty: No
NICHOLAS W WETTERSTEN

 9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

 Phone: (858) 657-8530

Fax: (858) 657-8814

 After Hours Phone: (858)
657-8530

Provider Gender: Male

NPI: 1063701068

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE

BALLAS, JERASIMOS

Provider ID: 209561

D3. 专科提供者名录

Board Certified Specialty: No
JERASIMOS BALLAS

9444 MEDICAL CENTER DR N
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871767384

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI

Provider ID: 300009

Board Certified Specialty: No
UKACHI N EMERUWA

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1245627421

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

MATERNAL AND FETAL MEDICINE

HULL, ANDREW

Provider ID: 209482

Board Certified Specialty: No
ANDREW D HULL

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-8745

After Hours Phone: (858)
657-8745

Provider Gender: Male

NPI: 1902862121

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MEMORIAL

HOSPITAL, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

LAURENT, LOUISE

Provider ID: 208639

Board Certified Specialty: No
LOUISE C LAURENT

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770532707

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 240599

Board Certified Specialty: No

D3. 专科提供者名录

DORA J MELBER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1124413026

Provider English Spoken: Y

Provider Language(s)

Spoken: Hungarian, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

MOORE, THOMAS

Provider ID: 208642

Board Certified Specialty: No

THOMAS R MOORE

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-8745

After Hours Phone: (858)
657-8745

Provider Gender: Male

NPI: 1184682379

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

WOELKERS, DOUGLAS

Provider ID: 209383

Board Certified Specialty: No

DOUGLAS A WOELKERS

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-7200

After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1013965748

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, PALOMAR

MEDICAL CENTER, UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

WOLF, RICHARD

Provider ID: 209252

Board Certified Specialty: No

RICHARD B WOLF

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497713846

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, PALOMAR

MEDICAL CENTER, UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

UCSD LA JOLLA JOHN SALLY

THORNTON




Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

D3. 专科提供者名录

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


NEONATAL / PERINATAL MEDICINE


BAI-TONG, SHIYU

Provider ID: 283287

Board Certified Specialty: No
SHIYU S BAI-TONG

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 249-5800

 After Hours Phone: (858)
249-5800

Provider Gender: Female

NPI: 1528454188

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

DELROSARIO, PAMELA

Provider ID: 295001

Board Certified Specialty: No
PAMELA G DELROSARIO

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 249-5800
Fax: (858) 249-5839

 After Hours Phone: (858)
249-5800

Provider Gender: Female

NPI: 1952691941

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, RADY


CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

HIETALATI, SAMANTHA

Provider ID: 294252

Board Certified Specialty: No
SAMANTHA M HIETALATI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 249-5800

Fax: (858) 249-5839

 After Hours Phone: (858)
249-5800

Provider Gender: Female

NPI: 1245617489

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

MARC-AURELE, KRISHELLE

Provider ID: 206207

Board Certified Specialty: No
KRISHELLE L MARC-AURELE

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (858) 249-5800

Fax: (858) 249-5839

 After Hours Phone: (858)
249-5800

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,

UCSD LA JOLLA JOHN SALLY
THORNTON, TRI CITY


MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

D3. 专科提供者名录

 Website: N/A


NEONATAL / PERINATAL MEDICINE

MARC-AURELE, KRISHELLE


Provider ID: 206209

Board Certified Specialty: No
KRISHELLE L MARC-AURELE

 9888 GENESEE AVE
LA JOLLA, CA 92037


 Phone: (858) 626-4123

Fax: (760) 633-7998

 After Hours Phone: (858)
626-4123

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEONATAL / PERINATAL MEDICINE


MATOBA, NANA

Provider ID: 297977

Board Certified Specialty: No
NANA MATOBA

 9300 CAMPUS POINT DR
STE 8

LA JOLLA, CA 92037


 Phone: (858) 657-7000


Fax: (858) 249-5839

 After Hours Phone: (858)
657-7000

Provider Gender: Female

NPI: 1801952197

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


NEONATAL / PERINATAL MEDICINE

MATOBA, NANA

Provider ID: 299893

Board Certified Specialty: No
NANA MATOBA

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (858) 249-5800

Fax: (858) 249-5839

 After Hours Phone: (858)
249-5800

Provider Gender: Female

NPI: 1801952197

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

MESTAN, KAREN

Provider ID: 285931

Board Certified Specialty: Yes
KAREN K MESTAN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 249-5800

Fax: (858) 249-5839

 After Hours Phone: (858)
249-5800

Provider Gender: Female

NPI: 1942253356

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 专科提供者名录

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301824

Board Certified Specialty: No
KATHERINE N NYMAN

9888 GENESEE AVE
LA JOLLA, CA 92037

Phone: (858) 626-4123

Fax: (760) 633-7998

After Hours Phone: (858)
626-4123

Provider Gender: Female

NPI: 1003260951

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL MEDICINE

RAMOS, CARLOS

Provider ID: 206062

Board Certified Specialty: No
CARLOS G RAMOS

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 249-5800

Fax: (619) 543-3812

After Hours Phone: (858)
249-5800

Provider Gender: Male

NPI: 1205047545

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, EL CENTRO
REGIONAL MEDICAL CENTER,
SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL

SAN DIEGO, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL MEDICINE

SAJTI, ENIKO

Provider ID: 206170

Board Certified Specialty: No
ENIKO C SAJTI

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 249-5800

Fax: (858) 249-5839

After Hours Phone: (858)
249-5800

Provider Gender: Female

NPI: 1649433103

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES

Provider ID: 303907

Board Certified Specialty: No
CHARLES W SAUER

9888 GENESEE AVE
LA JOLLA, CA 92037

Phone: (858) 626-4123

Fax: (760) 633-7998

After Hours Phone: (858)
626-4123

Provider Gender: Male

NPI: 1538388988




Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,

PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR

HEALTH, SCRIPPS MEMORIAL


D3. 专科提供者名录

HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE







SAUER, CHARLES


Provider ID: 303908
Board Certified Specialty: No
CHARLES W SAUER
 9300 CAMPUS POINT DR
FL 8
LA JOLLA, CA 92037
 Phone: (858) 249-5800
Fax: (858) 249-5839
 After Hours Phone: (858)
249-5800
Provider Gender: Male
NPI: 1538388988
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR

HEALTH, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

NEUROLOGY






BEVINS, ELIZABETH

Provider ID: 277726
Board Certified Specialty: No
ELIZABETH A BEVINS
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1013395151
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F

8:00AM-5:00PM
 Website: N/A





NEUROLOGY

COUGHLIN, DAVID

Provider ID: 240950
Board Certified Specialty: No
DAVID G COUGHLIN
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1740543784
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY

IRAGUIMADOZ, VICENTE

Provider ID: 246701
Board Certified Specialty: No
VICENTE J IRAGUIMADOZ
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 657-8540
 After Hours Phone: (858)
657-8540
Provider Gender: Male
NPI: 1053326710
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA

D3. 专科提供者名录

JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

NEUROLOGY

LEE, DAVID


Provider ID: 246264


Board Certified Specialty: No

DAVID J LEE

 9350 CAMPUS POINT DR
STE LLB

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871884130

Provider English Spoken: Y

Provider Language(s)
Spoken: Korean

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

NEUROLOGY

QAYOUMI, WALI


Provider ID: 284371

Board Certified Specialty: No

WALI Z QAYOUMI

 9350 CAMPUS POINT DR
STE LLB

LA JOLLA, CA 92037

 Phone: (619) 284-3746

Fax: (888) 579-8781

 After Hours Phone: (619)
284-3746

Provider Gender: Male

NPI: 1093178220

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

NEUROLOGY


QAYOUMI, WALI

Provider ID: 284369

Board Certified Specialty: No

WALI Z QAYOUMI

 9500 GILMAN DR STE 2069
LA JOLLA, CA 92093

 Phone: (858) 822-5881

Fax: (888) 539-8781

 After Hours Phone: (858)

822-5881

Provider Gender: Male

NPI: 1093178220

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

NEUROLOGY

SCHULTE, JESSICA


Provider ID: 284819

Board Certified Specialty: No

JESSICA D SCHULTE

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (858) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1467870576

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

MEDICAL CENTER AT MOUNT

ZION, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

D3. 专科提供者名录


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OBSTETRICS / GYNECOLOGY


BINDER, PRATIBHA

Provider ID: 273225

Board Certified Specialty: No
PRATIBHA S BINDER


 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


Provider Gender: Female


NPI: 1174758031

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291323

Board Certified Specialty: No
LAURA M DELCORE

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291324

Board Certified Specialty: No
LAURA M DELCORE

 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291335

Board Certified Specialty: No
AMY M DRIEBE

 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730507567

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291334

Board Certified Specialty: No
AMY M DRIEBE

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273
Fax: (888) 539-8781

D3. 专科提供者名录

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1730507567

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP


MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OBSTETRICS / GYNECOLOGY

GUPTA, PRATIMA


Provider ID: 257546

Board Certified Specialty: No

PRATIMA GUPTA

 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1891749842

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


HARVEY, SCOTT

Provider ID: 278918

Board Certified Specialty: No

SCOTT A HARVEY

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1457662868

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


HARVEY, SCOTT

Provider ID: 278916

Board Certified Specialty: No

SCOTT A HARVEY

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 923-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 923-8273

Provider Gender: Male

NPI: 1457662868

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY

HOANG, MAI


Provider ID: 208295


Board Certified Specialty: No

MAI P HOANG

 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1104143593

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes


D3. 专科提供者名录


Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OBSTETRICS / GYNECOLOGY


HOM-TEDLA, MARIANNE

Provider ID: 242752

Board Certified Specialty: No
MARIANNE S HOM-TEDLA


 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1972047397

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


KLEIN, DAVID


Provider ID: 271558

Board Certified Specialty: No

DAVID A KLEIN


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1780073635

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


KLEIN, DAVID


Provider ID: 271559

Board Certified Specialty: No
DAVID A KLEIN

 8910 VILLA LA JOLLA DR
STE 200


LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1780073635

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


LAMALE-SMITH, LEAH

Provider ID: 286230

Board Certified Specialty: No
LEAH M LAMALE-SMITH

 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1396904876

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, EISENHOWER MEDICAL

CTR




Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

D3. 专科提供者名录


 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


OBSTETRICS / GYNECOLOGY


MACKAY, GILLIAN

Provider ID: 200964

Board Certified Specialty: No
GILLIAN MACKAY

 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770702177

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN

Provider ID: 303062

Board Certified Specialty: No
GILLIAN MACKAY

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770702177

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER


 Website: N/A


OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA

Provider ID: 285740

Board Certified Specialty: No
AUDRA R MEADOWS

 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1467585521

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA

Provider ID: 285739

Board Certified Specialty: No
AUDRA R MEADOWS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-8745

Fax: (888) 539-8781

 After Hours Phone: (858)
657-8745

Provider Gender: Female

NPI: 1467585521

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY

MELLENDEZ, ARIANA

Provider ID: 299920

D3. 专科提供者名录

Board Certified Specialty: No
ARIANA L MELENDEZ

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295232973

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299976

Board Certified Specialty: No

CHARLOTTE M PICKETT

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447530696

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299977

Board Certified Specialty: No

CHARLOTTE M PICKETT

📍 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447530696

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

RIVAS, RENEE

Provider ID: 284296

Board Certified Specialty: No

RENEE N RIVAS

📍 9333 GENESEE AVE STE
340

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295263861

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

**THORNTON, UCSD MEDICAL
CTR**

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

RIVAS, RENEE

Provider ID: 284295

Board Certified Specialty: No

RENEE N RIVAS

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295263861

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

**THORNTON, UCSD MEDICAL
CTR**

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

D3. 专科提供者名录

OBSTETRICS / GYNECOLOGY

RIVAS, RENEE

Provider ID: 284297

Board Certified Specialty: No

RENEE N RIVAS

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295263861

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

SUYAMA, JULIE

Provider ID: 284289

Board Certified Specialty: No

JULIE A SUYAMA

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1306372800

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA

Provider ID: 285173

Board Certified Specialty: No

SAMANTHA L THOMSON

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689013468

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: CEDARS
SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA

Provider ID: 285175

Board Certified Specialty: No

SAMANTHA L THOMSON

8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689013468

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: CEDARS
SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OCCUPATIONAL THERAPIST

AMARAL, MARGARET

D3. 专科提供者名录

Provider ID: 258303

Board Certified Specialty: No
MARGARET L AMARAL

9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

Phone: (858) 657-6879

Fax: (858) 657-6873

After Hours Phone: (858)
657-6879

Provider Gender: Female

NPI: 1689874521

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OCCUPATIONAL THERAPIST **COLLINS, RESENIA**

Provider ID: 258356

Board Certified Specialty: No
RESENIA V COLLINS

9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

Phone: (858) 657-6879

Fax: (858) 657-6873

After Hours Phone: (858)
657-6879

Provider Gender: Female

NPI: 1184936718

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OCCUPATIONAL THERAPIST **MUNCADA, CAESAR**

Provider ID: 288724

Board Certified Specialty: No
CAESAR B MUNCADA

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790268100

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OCCUPATIONAL THERAPIST **SMITH, EMILY**

Provider ID: 258537

Board Certified Specialty: No
EMILY A SMITH

Phone: (855) 543-0333

Fax: (858) 657-6873

After Hours Phone: (855)
543-0333

Provider Gender: Female

NPI: 1417337403

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OCCUPATIONAL THERAPIST **SOROKIN, LISA**

Provider ID: 258362

Board Certified Specialty: No
LISA F SOROKIN

9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

Phone: (858) 657-6879

Fax: (858) 657-6873

After Hours Phone: (858)
657-6879

Provider Gender: Female

NPI: 1336445063




Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

D3. 专科提供者名录

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

BAXTER, SALLY

Provider ID: 272787
Board Certified Specialty: No
SALLY L BAXTER

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (858) 534-6290
Fax: (888) 539-8781


 After Hours Phone: (858)
534-6290


Provider Gender: Female
NPI: 1912325184

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
7:00AM-5:00PM
SA 7:45AM-2:00PM


 Website: N/A

OPHTHALMOLOGY

BEAZER, ALEX

Provider ID: 272802
Board Certified Specialty: No
ALEX P BEAZER

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


Provider Gender: Male
NPI: 1942662168

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM



 Website: N/A

OPHTHALMOLOGY



MOVAGHAR, MANSOOR

Provider ID: 215055
Board Certified Specialty: No
MANSOOR MOVAGHAR

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1497792220

 Provider English Spoken: Y
 Provider Language(s)


Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

OPHTHALMOLOGY

PUIG LLANO, MANUEL

Provider ID: 299965
Board Certified Specialty: No
MANUEL PUIG LLANO


 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1427102979

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, German,
Spanish, Tagalog


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OPHTHALMOLOGY

SATTERFIELD, KELLIE

D3. 专科提供者名录

Provider ID: 305303
Board Certified Specialty: No
KELLIE R SATTERFIELD

9834 GENESEE AVE STE
200
LA JOLLA, CA 92037

Phone: (858) 457-3050

Fax: (858) 457-0851

After Hours Phone: (858)
457-3050

Provider Gender: Female

NPI: 1629509336

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

SCHONBACH, ETIENNE

Provider ID: 284432

Board Certified Specialty: No
ETIENNE M SCHONBACH

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1073040580

Provider English Spoken: Y

Provider Language(s)
Spoken: German

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 299935

Board Certified Specialty: No
CATHERINE R SHEILS

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932605649

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 305309

Board Certified Specialty: No
CATHERINE R SHEILS

9834 GENESEE AVE STE
200
LA JOLLA, CA 92037

Phone: (858) 457-3050

Fax: (858) 457-0851

After Hours Phone: (858)
457-3050

Provider Gender: Female

NPI: 1932605649

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 299937

Board Certified Specialty: No
CATHERINE R SHEILS

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781



After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932605649









Provider English Spoken: Y
Cultural Competency: N

D3. 专科提供者名录








Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
 *Website:* N/A

OPHTHALMOLOGY

SONG, DELU



Provider ID: 284425
Board Certified Specialty: No
DELU SONG
 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
 *Phone:* (800) 926-8273
Fax: (888) 539-8781
 *After Hours Phone:* (800)
926-8273
Provider Gender: Male
NPI: 1437689536
 *Provider English Spoken:* Y
 *Provider Language(s)*
Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
 *Hours:* M-F
8:00AM-5:00PM
 *Website:* N/A




OPHTHALMOLOGY

TOPILOW, NICOLE
Provider ID: 284348
Board Certified Specialty: No
NICOLE TOPILOW
 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
 *Phone:* (800) 926-8273
Fax: (888) 539-8781
 *After Hours Phone:* (800)
926-8273
Provider Gender: Female
NPI: 1215468376
 *Provider English Spoken:* Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
 *Hours:* M-F
8:00AM-5:00PM
 *Website:* N/A

OPTOMETRIST








AOTO, KIM

Provider ID: 296798
Board Certified Specialty: No
KIM N AOTO
 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
 *Phone:* (800) 898-2020
Fax: (844) 897-3788
 *After Hours Phone:* (800)
898-2020
Provider Gender: Female
NPI: 1780935650
 *Provider English Spoken:* Y

 *Provider Language(s)*
Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
 *Hours:* M 9:00AM-5:00PM
TU 8:30AM-4:30PM
W 7:30AM-4:15PM
TH 9:30AM-5:00PM
F 8:30AM-4:00PM
 *Website:* N/A

OPTOMETRIST

HOO, PAMELA

Provider ID: 269621
Board Certified Specialty: No
PAMELA A HOO
 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
 *Phone:* (858) 534-6290
Fax: (858) 822-4438
 *After Hours Phone:* (858)
534-6290
Provider Gender: Female
NPI: 1275566010
 *Provider English Spoken:* Y
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
 *Hours:* M-F

D3. 专科提供者名录

8:00AM-5:00PM
Website: N/A

OPTOMETRIST

JOMOC, CAITLIN

Provider ID: 299914

Board Certified Specialty: No
CAITLIN JOMOC

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861164642

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

JOMOC, CAITLIN

Provider ID: 299915

Board Certified Specialty: No
CAITLIN JOMOC

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861164642

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

KIM, PHILIP

Provider ID: 287909

Board Certified Specialty: No
PHILIP KIM

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

Provider Gender: Male

NPI: 1376929034

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

MCCLEAN, ESMERALDA

Provider ID: 269907

Board Certified Specialty: No
ESMERALDA C MCCLEAN

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 534-8293

After Hours Phone: (858)

534-6290

Provider Gender: Female
NPI: 1962817981

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

VO, ANDREW

Provider ID: 304148

Board Certified Specialty: No
ANDREW M VO

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790291565

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD



MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

D3. 专科提供者名录

 Accessibility: CONTACT PROVIDER
 Website: N/A

OPTOMETRIST



VO, ANDREW

Provider ID: 201311
Board Certified Specialty: No
ANDREW M VO

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (858) 534-6290
 After Hours Phone: (858) 534-6290

Provider Gender: Male


NPI: 1790291565


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPTOMETRIST



YU, CAROL

Provider ID: 301682
Board Certified Specialty: No
CAROL Y YU

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)


926-8273
Provider Gender: Female
NPI: 1639697451

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OPTOMETRIST



YU, CAROL

Provider ID: 301681
Board Certified Specialty: No
CAROL Y YU

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1639697451

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OPTOMETRIST



YU, CAROL

Provider ID: 258078
Board Certified Specialty: No
CAROL Y YU

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1639697451

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


 Hours: M-F
8:00AM-5:00PM


 Website: N/A

OTOLARYNGOLOGY

BRUMUND, KEVIN


Provider ID: 299636
Board Certified Specialty: No
KEVIN T BRUMUND

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


Provider Gender: Male
NPI: 1033193669


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD

D3. 专科提供者名录

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY

BRUMUND, KEVIN

Provider ID: 299633

Board Certified Specialty: No
KEVIN T BRUMUND

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033193669

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OTOLARYNGOLOGY

BRUMUND, KEVIN

Provider ID: 299637

Board Certified Specialty: No
KEVIN T BRUMUND

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033193669

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299460

Board Certified Specialty: No
JOSEPH A CALIFANO III

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1881652972

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299463

Board Certified Specialty: No
JOSEPH A CALIFANO III

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1881652972


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OTOLARYNGOLOGY


CALIFANO, JOSEPH

Provider ID: 299458

Board Certified Specialty: No
JOSEPH A CALIFANO III

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093


 Phone: (858) 822-6197
Fax: (858) 822-6198

 After Hours Phone: (858)
822-6197

Provider Gender: Male



NPI: 1881652972

D3. 专科提供者名录

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A


OTOLARYNGOLOGY






CALIFANO, JOSEPH

Provider ID: 299459
Board Certified Specialty: No
JOSEPH A CALIFANO III
 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1881652972
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY





COFFEY, CHARLES



Provider ID: 299584
Board Certified Specialty: No
CHARLES S COFFEY
 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1932297330
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY




COFFEY, CHARLES

Provider ID: 299585
Board Certified Specialty: No
CHARLES S COFFEY
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1932297330
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY




COFFEY, CHARLES

Provider ID: 299580
Board Certified Specialty: No
CHARLES S COFFEY
 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1932297330

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

COFFEY, CHARLES

Provider ID: 299581
Board Certified Specialty: No
CHARLES S COFFEY
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male




D3. 专科提供者名录

NPI: 1932297330

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

DECONDE, ADAM

Provider ID: 299565
Board Certified Specialty: No
ADAM S DECONDE
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 657-8590
 After Hours Phone: (858)
657-8590


Provider Gender: Male

NPI: 1588988919

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




OTOLARYNGOLOGY

DECONDE, ADAM

Provider ID: 299570
Board Certified Specialty: No
ADAM S DECONDE
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273



Provider Gender: Male

NPI: 1588988919

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A


OTOLARYNGOLOGY



DECONDE, ADAM

Provider ID: 299566
Board Certified Specialty: No
ADAM S DECONDE
 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male




NPI: 1588988919


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A




OTOLARYNGOLOGY

DECONDE, ADAM

Provider ID: 299564
Board Certified Specialty: No
ADAM S DECONDE
 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
 Phone: (858) 657-8590
 After Hours Phone: (858)
657-8590
Provider Gender: Male
NPI: 1588988919


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299533
Board Certified Specialty: No
RICK A FRIEDMAN
 3855 HEALTH SCIENCES

D3. 专科提供者名录

DR
LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982708558
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PIH
HEALTH GOOD SAMARITAN HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTH COAST GLOBAL MEDICAL CENTER INC, ANAHEIM GLOBAL MEDICAL CENTER, ORANGE COUNTY GLOBAL MEDICAL CENTER INC, CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299528
Board Certified Specialty: No
RICK A FRIEDMAN
📍 9400 CAMPUS POINT DR

LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982708558
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PIH
HEALTH GOOD SAMARITAN HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTH COAST GLOBAL MEDICAL CENTER INC, ANAHEIM GLOBAL MEDICAL CENTER, ORANGE COUNTY GLOBAL MEDICAL CENTER INC, CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299529
Board Certified Specialty: No
RICK A FRIEDMAN
📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982708558
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PIH
HEALTH GOOD SAMARITAN HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTH COAST GLOBAL MEDICAL CENTER INC, ANAHEIM GLOBAL MEDICAL CENTER, ORANGE COUNTY GLOBAL MEDICAL CENTER INC, CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299534
Board Certified Specialty: No
RICK A FRIEDMAN
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273

D3. 专科提供者名录

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982708558

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN

HOSPITAL, CHILDRENS HOSP

OF LOS ANGELES, SOUTH

COAST GLOBAL MEDICAL

CENTER INC, ANAHEIM

GLOBAL MEDICAL CENTER,

ORANGE COUNTY GLOBAL

MEDICAL CENTER INC,

CHAPMAN GLOBAL MEDICAL

CENTER INC, UCSD LA JOLLA

JOHN SALLY THORNTON,

UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299562

Board Certified Specialty: No

SAPIDEH GILANI

📍 3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1003825571

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299557

Board Certified Specialty: Yes

SAPIDEH GILANI

📍 9400 CAMPUS POINT DR

LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1003825571

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299563

Board Certified Specialty: No

SAPIDEH GILANI

📍 9300 CAMPUS POINT DR

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1003825571

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299558

Board Certified Specialty: No

SAPIDEH GILANI

📍 9350 CAMPUS POINT DR

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)

926-8273

Provider Gender: Female

D3. 专科提供者名录

NPI: 1003825571

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY


GREENE, JACQUELINE

Provider ID: 298398

Board Certified Specialty: No
JACQUELINE J GREENE

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1144583931

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY


GREENE, JACQUELINE

Provider ID: 298395

Board Certified Specialty: No

JACQUELINE J GREENE

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1144583931

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

GREENE, JACQUELINE

Provider ID: 298394

Board Certified Specialty: No
JACQUELINE J GREENE

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1144583931

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY


GREENE, JACQUELINE

Provider ID: 272958

Board Certified Specialty: No
JACQUELINE J GREENE

 9300 CAMPUS POINT DR
STE LLA

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1144583931


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY


HARRIS, JEFFREY

Provider ID: 299577

Board Certified Specialty: No
JEFFREY P HARRIS

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1417988783






 Provider English Spoken: Y

D3. 专科提供者名录

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OTOLARYNGOLOGY







HARRIS, JEFFREY

Provider ID: 299574
Board Certified Specialty: No
JEFFREY P HARRIS
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1417988783
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OTOLARYNGOLOGY


HARRIS, JEFFREY



Provider ID: 299573

Board Certified Specialty: No
JEFFREY P HARRIS
 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1417988783
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OTOLARYNGOLOGY







HARRIS, JEFFREY

Provider ID: 299578
Board Certified Specialty: No
JEFFREY P HARRIS
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1417988783
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299512
Board Certified Specialty: No
DAVID B HOM
 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1659305027
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299517
Board Certified Specialty: No
DAVID B HOM
 9300 CAMPUS POINT DR

D3. 专科提供者名录

LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1659305027
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299513
Board Certified Specialty: No
DAVID B HOM
📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1659305027
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299516
Board Certified Specialty: No
DAVID B HOM
📍 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1659305027

📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

OTOLARYNGOLOGY

HUSSEMAN, JACOB

Provider ID: 301051
Board Certified Specialty: No
JACOB W HUSSEMAN
📍 9350 CAMPUS POINT DR

LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1124034053
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 294828
Board Certified Specialty: No
ELINA KARI
📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (858) 857-8590
📞 After Hours Phone: (858) 857-8590
Provider Gender: Female
NPI: 1780860536
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD LA JOLLA JOHN SALLY

D3. 专科提供者名录


THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY


KARI, ELINA

Provider ID: 299442

Board Certified Specialty: No
ELINA KARI

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 857-8590

 After Hours Phone: (858)
857-8590

Provider Gender: Female

NPI: 1780860536

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO



Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A


OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299444

Board Certified Specialty: No
ELINA KARI

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780860536

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL


CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY


KARI, ELINA

Provider ID: 299448

Board Certified Specialty: No
ELINA KARI

 9300 CAMPUS POINT DR

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780860536


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299447

Board Certified Specialty: No
ELINA KARI

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780860536

 Provider English Spoken: Y
Cultural Competency: N

D3. 专科提供者名录


Hospital Affiliation:


CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility:* CONTACT PROVIDER


 *Website:* N/A


OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299483

Board Certified Specialty: No ANTHONY E MAGIT

 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093

 *Phone:* (800) 926-8273

Fax: (888) 539-8781

 *After Hours Phone:* (800) 926-8273

Provider Gender: Male

NPI: 1891858379


 *Provider English Spoken:* Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility:* CONTACT PROVIDER

 *Website:* N/A


OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299478

Board Certified Specialty: No ANTHONY E MAGIT

 9400 CAMPUS POINT DR LA JOLLA, CA 92093

 *Phone:* (800) 926-8273

Fax: (888) 539-8781

 *After Hours Phone:* (800) 926-8273

Provider Gender: Male

NPI: 1891858379

 *Provider English Spoken:* Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility:* CONTACT PROVIDER

 *Website:* N/A


OTOLARYNGOLOGY

MAGIT, ANTHONY


Provider ID: 299479

Board Certified Specialty: No ANTHONY E MAGIT

 9350 CAMPUS POINT DR LA JOLLA, CA 92037


 *Phone:* (800) 926-8273

Fax: (888) 539-8781

 *After Hours Phone:* (800) 926-8273

Provider Gender: Male

NPI: 1891858379

 *Provider English Spoken:* Y
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility:* CONTACT PROVIDER

 *Website:* N/A


OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299484

Board Certified Specialty: No ANTHONY E MAGIT

 9300 CAMPUS POINT DR LA JOLLA, CA 92037

 *Phone:* (800) 926-8273

Fax: (888) 539-8781

 *After Hours Phone:* (800) 926-8273

Provider Gender: Male

NPI: 1891858379

 *Provider English Spoken:* Y
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility:* CONTACT PROVIDER

 *Website:* N/A

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

D3. 专科提供者名录

Provider ID: 299593
Board Certified Specialty: No
AKIHIRO MATSUOKA

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669630653

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299594

Board Certified Specialty: No
AKIHIRO MATSUOKA

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669630653

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299589

Board Certified Specialty: No
AKIHIRO MATSUOKA

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669630653

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299588

Board Certified Specialty: No
AKIHIRO MATSUOKA

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669630653

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

NGUYEN, QUYEN

Provider ID: 299609

Board Certified Specialty: No
QUYEN T NGUYEN

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477524452

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

NGUYEN, QUYEN


Provider ID: 299604


Board Certified Specialty: No

QUYEN T NGUYEN

D3. 专科提供者名录


 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-8590

 After Hours Phone: (858)
657-8590

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY

NGUYEN, QUYEN


Provider ID: 299608

Board Certified Specialty: No

QUYEN T NGUYEN

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY


NGUYEN, QUYEN

Provider ID: 299605

Board Certified Specialty: No

QUYEN T NGUYEN

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH,


ANDREW

Provider ID: 299504


Board Certified Specialty: No


ANDREW M

VAHABZADEH-HAGH

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (858) 822-6197

 After Hours Phone: (858)
822-6197

Provider Gender: Male

NPI: 1346506920

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RONALD

REAGAN UCLA MED CTR,

SANTA MONICA UCLA MED

CTR, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD


MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH,

ANDREW


Provider ID: 299506

Board Certified Specialty: No

ANDREW M

VAHABZADEH-HAGH

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

D3. 专科提供者名录

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1346506920

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED
CTR, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299510

Board Certified Specialty: No
ANDREW M

VAHABZADEH-HAGH

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346506920

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED

CTR, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299505

Board Certified Specialty: No
ANDREW M

VAHABZADEH-HAGH

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346506920

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED
CTR, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299644

Board Certified Specialty: No
DEBORAH WATSON

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346270816

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299643

Board Certified Specialty: No
DEBORAH WATSON

📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781



☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346270816








☑ Provider English Spoken: Y

D3. 专科提供者名录

Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OTOLARYNGOLOGY







WATSON, DEBORAH

Provider ID: 299638
Board Certified Specialty: No
DEBORAH WATSON
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (858) 657-8590*
Fax: (858) 657-8682
 *After Hours Phone: (858) 657-8590*
Provider Gender: Female
NPI: 1346270816
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

OTOLARYNGOLOGY





WATSON, DEBORAH




Provider ID: 299640

Board Certified Specialty: Yes
DEBORAH WATSON
 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1346270816
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OTOLARYNGOLOGY







WEISSBROD, PHILIP

Provider ID: 299612
Board Certified Specialty: No
PHILIP A WEISSBROD
 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
 *Phone: (858) 657-8590*
 *After Hours Phone: (858) 657-8590*
Provider Gender: Male
NPI: 1366590853
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*


OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299616
Board Certified Specialty: No
PHILIP A WEISSBROD
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1366590853
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299613
Board Certified Specialty: No
PHILIP A WEISSBROD
 9400 CAMPUS POINT DR

D3. 专科提供者名录

LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1366590853

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299611

Board Certified Specialty: No

PHILIP A WEISSBROD

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (858) 657-8590

🕒 After Hours Phone: (858) 657-8590

Provider Gender: Male

NPI: 1366590853

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298415

Board Certified Specialty: No

CAROL H YAN

📍 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1619237260

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: Stanford

Health Care, LUCILE SALTER

PACKARD CHILDRENS HOSP,

UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298416

Board Certified Specialty: No

CAROL H YAN

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1619237260

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: Stanford

Health Care, LUCILE SALTER

PACKARD CHILDRENS HOSP,

UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298411

Board Certified Specialty: No

CAROL H YAN

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1619237260

☑ Provider English Spoken: Y


☑ Provider Language(s)


D3. 专科提供者名录

Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY


YAN, CAROL

Provider ID: 242138

Board Certified Specialty: No
CAROL H YAN


 9350 CAMPUS POINT DR
STELLA
LA JOLLA, CA 92037


 Phone: (858) 657-8590

 After Hours Phone: (858)
657-8590

Provider Gender: Female

NPI: 1619237260

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Chinese

Cultural Competency: N


Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):  Hours: M-F
8:00AM-5:00PM

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PATHOLOGY ANATOMIC


CLINICAL

AISAGBONHI, OMONIGHO

Provider ID: 275750

Board Certified Specialty: No
OMONIGHO A AISAGBONHI

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1043571045

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,


SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,
SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PATHOLOGY ANATOMIC


CLINICAL

AISAGBONHI, OMONIGHO

Provider ID: 201304

Board Certified Specialty: No
OMONIGHO A AISAGBONHI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1043571045

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,


SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,


SCRIPPS GREEN HOSPITAL,
SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 专科提供者名录

PATHOLOGY ANATOMIC

CLINICAL

ALLEN, ELIZABETH

Provider ID: 275757

Board Certified Specialty: No

ELIZABETH S ALLEN

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174814065

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

UCSD MEDICAL CTR, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,

SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

BROOME, HELEN

Provider ID: 275722

Board Certified Specialty: No

HELEN E BROOME

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1184674145

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

BUI, JACK

Provider ID: 275746

Board Certified Specialty: No

JACK D BUI

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1942529821

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

DON, MICHELLE

Provider ID: 275816

Board Certified Specialty: No

MICHELLE D DON

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1205288396

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR




Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

D3. 专科提供者名录

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

PATHOLOGY ANATOMIC

CLINICAL


DON, MICHELLE

Provider ID: 247149

*Board Certified Specialty: No
MICHELLE D DON*

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (858) 249-4410*
 *After Hours Phone: (858)
249-4410*

*Provider Gender: Female
NPI: 1205288396*

 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL*




CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

PATHOLOGY ANATOMIC

CLINICAL

ELKIND, JAE


Provider ID: 284903

*Board Certified Specialty: No
JAE B ELKIND*

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1922497700




 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL
CTR*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*


PATHOLOGY ANATOMIC

CLINICAL

HU, JINGJING



Provider ID: 243965

*Board Certified Specialty: No
JINGJING HU*

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1538574744

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Chinese*

Cultural Competency: N


Hospital Affiliation: UCSD LA


*JOLLA JOHN SALLY
THORNTON*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*




PATHOLOGY ANATOMIC

CLINICAL

HU, JINGJING



Provider ID: 243966

*Board Certified Specialty: No
JINGJING HU*

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1538574744

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Chinese*

Cultural Competency: N


*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

D3. 专科提供者名录

PATHOLOGY ANATOMIC CLINICAL

ROMA, ANDRES

Provider ID: 275827

Board Certified Specialty: No
ANDRES A ROMA

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1295912657

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC CLINICAL

SHABAIK, AHMED

Provider ID: 275782

Board Certified Specialty: No
AHMED S SHABAIK

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1679521579

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC CLINICAL

VAVINSKAYA, VERA

Provider ID: 275840

Board Certified Specialty: No
VERA VAVINSKAYA

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174757181

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC CLINICAL

ZARE, SOMAYE

Provider ID: 275814

Board Certified Specialty: No
SOMAYE Y ZARE

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1700334802

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC CLINICAL

ZARE, SOMAYE

D3. 专科提供者名录

Provider ID: 203172

Board Certified Specialty: No
SOMAYE Y ZARE

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1700334802

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

ZHANG, HAIYAN

Provider ID: 203176

Board Certified Specialty: No
HAIYAN ZHANG

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1457617110

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,

SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

ZHANG, HAIYAN

Provider ID: 275841

Board Certified Specialty: No
HAIYAN ZHANG

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1457617110

Provider English Spoken: Y

Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,

SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

AINSWORTH, DELISSA

Provider ID: 243366

Board Certified Specialty: No
DELISSA M AINSWORTH

8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1750734893

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

D3. 专科提供者名录


SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
UCSD MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


ALBRIGHT, KELSEY

Provider ID: 284764

Board Certified Specialty: No
KELSEY A ALBRIGHT

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1235653148

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


ALLERS, JENNA

Provider ID: 301037

Board Certified Specialty: No

JENNA C ALLERS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730605486

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SALINAS
VALLEY MEMORIAL HOSP


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PHYSICIANS ASSISTANT


ARMEEN, GARY


Provider ID: 247036

Board Certified Specialty: No

GARY P ARMEEN JR

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1760774863

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


BOYD, LISA

Provider ID: 217650

Board Certified Specialty: No
LISA N BOYD

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1871859421

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 专科提供者名录


PHYSICIANS ASSISTANT


BRUECKNER, TAMMIE

Provider ID: 255557

Board Certified Specialty: No
TAMMIE N BRUECKNER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407212376

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PHYSICIANS ASSISTANT


CHERRY, REENA

Provider ID: 243349

Board Certified Specialty: No
REENA W CHERRY

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689729683

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

CHERRY, REENA

Provider ID: 269494

Board Certified Specialty: No
REENA W CHERRY

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689729683

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

COOKISH, DAVID

Provider ID: 286591

Board Certified Specialty: No
DAVID ANDREW COOKISH

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1215338884


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

CRIFE, TAYLOR


Provider ID: 210983

Board Certified Specialty: No
TAYLOR M CRIFE

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1659827087

 Provider English Spoken: Y
Cultural Competency: N

D3. 专科提供者名录

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


DEMASCO, MICHAEL

Provider ID: 278969

Board Certified Specialty: No

MICHAEL A DEMASCO

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1467926295

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


DEMOOR, PATRICIA


Provider ID: 212879

Board Certified Specialty: No

PATRICIA A DEMOOR

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477721702

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

HASEGAWA, CHRIS


Provider ID: 247205

Board Certified Specialty: No

CHRIS HASEGAWA


 8939 VILLA LA JOLLA DR
STE 110
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225698962

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


HIGGINS, JOSHUA

Provider ID: 287135

Board Certified Specialty: No

JOSHUA B HIGGINS

 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1861624181

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

HIGGINS, JOSHUA

D3. 专科提供者名录

Provider ID: 287136
Board Certified Specialty: No
JOSHUA B HIGGINS

9434 MEDICAL CENTER DR N
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1861624181

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 287450

Board Certified Specialty: No
JACOB A HUNTER

9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1114459765

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298432

Board Certified Specialty: No

JACOB A HUNTER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1114459765

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298429

Board Certified Specialty: No

JACOB A HUNTER

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1114459765

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298431

Board Certified Specialty: No
JACOB A HUNTER

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1114459765

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 279334

D3. 专科提供者名录

Board Certified Specialty: No
JACOB A HUNTER

8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

Phone: (800) 826-8273

Fax: (888) 539-8781

After Hours Phone: (800)
826-8273

Provider Gender: Male

NPI: 1114459765

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

LEE, JENNIFER

Provider ID: 309997

Board Certified Specialty: No
JENNIFER C LEE

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265081871

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

LEE, JENNIFER

Provider ID: 309996

Board Certified Specialty: No
JENNIFER C LEE

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265081871

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

LIN, JOYCE

Provider ID: 265147

Board Certified Specialty: No
LIN, JOYCE

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (858) 554-1212

After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1427681022

Provider English Spoken: Y
Provider Language(s)
Spoken: Taiwanese

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

LIN, JOYCE

Provider ID: 265146

Board Certified Specialty: No
LIN, JOYCE

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 888-9268

Fax: (888) 539-8781

After Hours Phone: (800)
888-9268

Provider Gender: Female

NPI: 1427681022

Provider English Spoken: Y

Provider Language(s)
Spoken: Taiwanese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

D3. 专科提供者名录

PHYSICIANS ASSISTANT

LUONG, TRAN

Provider ID: 279014

Board Certified Specialty: No

TRAN H LUONG

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1821532292

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish,
Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

LUONG, TRAN

Provider ID: 279015

Board Certified Specialty: No

TRAN H LUONG

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1821532292

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish,
Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

MARTIN, HALEY

Provider ID: 305027

Board Certified Specialty: No

HALEY R MARTIN

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093440836

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

MARTIN, HALEY

Provider ID: 305025

Board Certified Specialty: No

HALEY R MARTIN

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093440836

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

MARTIN, HALEY

Provider ID: 305024

Board Certified Specialty: No

HALEY R MARTIN

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093440836

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

MCADAMS, JOSEPH

D3. 专科提供者名录

Provider ID: 280612

Board Certified Specialty: No
JOSEPH MCADAMS

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1104371251

🗣 Provider English Spoken: Y

🗣 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

MERRILL, COREY

Provider ID: 258039

Board Certified Specialty: No
COREY M MERRILL

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1386032308

🗣 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

OKADA, MICHELLE

Provider ID: 278017

Board Certified Specialty: No
MICHELLE R OKADA

📍 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1497129860

🗣 Provider English Spoken: Y

🗣 Provider Language(s)
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

OKADA, MICHELLE

Provider ID: 278016

Board Certified Specialty: No
MICHELLE R OKADA

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1497129860

🗣 Provider English Spoken: Y

🗣 Provider Language(s)
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

PELIO, DARREN

Provider ID: 293442

Board Certified Specialty: No
DARREN A PELIO

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8276




Fax: (888) 539-8784

🕒 After Hours Phone: (800)
926-8276

Provider Gender: Male

NPI: 1386791028


D3. 专科提供者名录


 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

PHYSICIANS ASSISTANT

PELIO, DARREN


Provider ID: 293440
Board Certified Specialty: No
DARREN A PELIO

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

 Phone: (858) 822-7967
Fax: (858) 822-6395


 After Hours Phone: (858)
822-7967

Provider Gender: Male
NPI: 1386791028

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Website: N/A

PHYSICIANS ASSISTANT


PERREAULT, MARK

Provider ID: 283583
Board Certified Specialty: No
MARK R PERREAULT

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1356749451

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM



 Website: N/A

PHYSICIANS ASSISTANT


PERREAULT, MARK

Provider ID: 283584
Board Certified Specialty: No
MARK R PERREAULT

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093


 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273


Provider Gender: Male
NPI: 1356749451

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM



 Website: N/A

PHYSICIANS ASSISTANT



ROBERTS, AUDREY

Provider ID: 253254
Board Certified Specialty: No
AUDREY ELIZABETH
ZANZUCCHI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (619) 543-5540
 After Hours Phone: (619)
543-5540


Provider Gender: Female
NPI: 1265960256


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM



 Website: N/A

PHYSICIANS ASSISTANT



ROBERTS, AUDREY

Provider ID: 253255
Board Certified Specialty: No
AUDREY ELIZABETH
ZANZUCCHI




 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (858) 657-7876
 After Hours Phone: (858)
657-7876

Provider Gender: Female
NPI: 1265960256




 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

D3. 专科提供者名录

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PHYSICIANS ASSISTANT

ROMO, JORGE

Provider ID: 309983
Board Certified Specialty: No
JORGE ROMO
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*

Provider Gender: Male

NPI: 1275962383

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*





PHYSICIANS ASSISTANT

SAIKHON, TALIA

Provider ID: 293439


Board Certified Specialty: No
TALIA N SAIKHON

 8910 VILLA LA JOLLA DR

STE 100
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1699263905
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

PHYSICIANS ASSISTANT


SANCHEZ, MICHAEL


Provider ID: 206907

Board Certified Specialty: No
MICHAEL R SANCHEZ

 8939 VILLA LA JOLLA DR
STE 110

LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

Provider Gender: Male

NPI: 1184135006




 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PHYSICIANS ASSISTANT


SCHWARTZEL, KEVIN

Provider ID: 214276

Board Certified Specialty: No
KEVIN N SCHWARTZEL

 8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Male

NPI: 1104277847


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: SU 8:00AM-8:00PM*
M-F 8:00AM-5:00PM

SA 8:00AM-8:00PM

 *Website: N/A*

PHYSICIANS ASSISTANT

SHAUL, SHERA

Provider ID: 247976

Board Certified Specialty: No
SHERA M SHAUL

D3. 专科提供者名录

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8373

After Hours Phone: (800)
926-8373

Provider Gender: Female

NPI: 1336659507

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SHAUL, SHERA

Provider ID: 247975

Board Certified Specialty: No
SHERA M SHAUL

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1336659507

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SPEH, BRIAN

Provider ID: 305010

Board Certified Specialty: No
BRIAN A SPEH

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124593926

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

TESFAI, HELEN

Provider ID: 277072

Board Certified Specialty: No
HELEN S TESFAI

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1942724042

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299601

Board Certified Specialty: No
TAMARA A WAHLIN

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083823322

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299602

Board Certified Specialty: No
TAMARA A WAHLIN

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

D3. 专科提供者名录

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1083823322

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299596

Board Certified Specialty: No
TAMARA A WAHLIN

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1083823322

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PHYSICIANS ASSISTANT

WEIR, JACQUELINE

Provider ID: 278202

Board Certified Specialty: No
JACQUELINE R WEIR

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (800) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1932494499

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PSYCHOLOGIST

BAILIS, JESSICA

Provider ID: 300043

Board Certified Specialty: No
JESSICA R BAILIS

📍 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1760739049

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PSYCHOLOGIST

BOOTH, CHRISTOPHER

Provider ID: 209117

Board Certified Specialty: No
CHRISTOPHER R BOOTH

📍 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1568893162

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PSYCHOLOGIST

BOOTH, CHRISTOPHER

Provider ID: 209118

Board Certified Specialty: No
CHRISTOPHER R BOOTH

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800)

D3. 专科提供者名录

926-8273

Provider Gender: Male

NPI: 1568893162


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

BOUTELLE, KERRI

Provider ID: 302876

Board Certified Specialty: No
KERRI N BOUTELLE

 3344 N TORREY PINES CT
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1780620906


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PSYCHOLOGIST


BOUTELLE, KERRI


Provider ID: 240034

Board Certified Specialty: No
KERRI N BOUTELLE

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1780620906

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST


BOUTELLE, KERRI


Provider ID: 258988

Board Certified Specialty: No
KERRI N BOUTELLE

 8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037

 Phone: (858) 246-1654

 After Hours Phone: (858)
246-1654

Provider Gender: Male

NPI: 1780620906

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

CHESHER, NICHOLAS

Provider ID: 273812

Board Certified Specialty: No
NICHOLAS J CHESHER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124539697


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON



Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D3. 专科提供者名录


 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST

CRANDAL, BRENT

Provider ID: 291463
Board Certified Specialty: No
BRENT R CRANDAL

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037
 Phone: (800) 926-8372
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

Provider Gender: Male


NPI: 1588739452


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST


DUARTE, KRISTEN

Provider ID: 255479

Board Certified Specialty: No
KRISTEN L DUARTE


 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037
 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093119364

 Provider English Spoken: Y


Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



PSYCHOLOGIST

DUARTE, KRISTEN

Provider ID: 255480

Board Certified Specialty: No
KRISTEN L DUARTE

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
 After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1093119364

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

EICHEN, DAWN

Provider ID: 302888

Board Certified Specialty: No
DAWN M EICHEN

 3344 N TORREY PINES CT
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861043366

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST

EICHEN, DAWN

Provider ID: 259524

Board Certified Specialty: No
DAWN M EICHEN

 8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037
 Phone: (858) 246-1654

Fax: (858) 246-3181

 After Hours Phone: (858)
246-1654

D3. 专科提供者名录

Provider Gender: Female
NPI: 1861043366
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PSYCHOLOGIST

EICHEN, DAWN

Provider ID: 245715
Board Certified Specialty: No
DAWN M EICHEN
📍 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1861043366
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PSYCHOLOGIST

LASSWELL, EVE

Provider ID: 208260
Board Certified Specialty: No
EVE N LASSWELL
📍 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
📞 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1013483635

☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PSYCHOLOGIST

LINKE, SARAH

Provider ID: 273640
Board Certified Specialty: No
SARAH E LINKE
📍 8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)

926-8273
Provider Gender: Female
NPI: 1487026415
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PSYCHOLOGIST


MAGINOT-CESHER, TAMARA

Provider ID: 273224
Board Certified Specialty: No
TAMARA R MAGINOT
CESHER
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (858) 534-7792
Fax: (619) 471-9017
📞 After Hours Phone: (858)
534-7792
Provider Gender: Female
NPI: 1043441165
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

D3. 专科提供者名录

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST


MENDEZ, ANDRES

Provider ID: 279058

Board Certified Specialty: No
ANDRES G MENDEZ

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1841482692

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST


PELHAM, WILLIAM


Provider ID: 307681

WILLIAM E PELHAM

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1306629399

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PSYCHOLOGIST


REED, KRISTIE

Provider ID: 291395

Board Certified Specialty: No
KRISTIE L REED

 8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037

 Phone: (800) 926-8372

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

Provider Gender: Female

NPI: 1679869556

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PSYCHOLOGIST

REED, KRISTIE

Provider ID: 302867

Board Certified Specialty: No
KRISTIE L REED

 3344 N TORREY PINES CT
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1679869556


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PSYCHOLOGIST


TARLE, STEPHANIE

Provider ID: 303116

Board Certified Specialty: No
STEPHANIE J TARLE

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1659920403

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

D3. 专科提供者名录

Min/Max Age: 0\999

American Sign Language (ASL): NPI: 1497139059

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PSYCHOLOGIST

THOMAS, KELSEY

Provider ID: 310060

Board Certified Specialty: No
KELSEY R THOMAS

 8950 VILLA LA JOLLA DR
STE 101
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1700264264

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PSYCHOLOGIST

ZLATAR, ZVINKA


Provider ID: 272712

Board Certified Specialty: No
ZVINKA Z ZLATAR

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1497139059

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PULMONARY DISEASES

BAILEY, JACOB

Provider ID: 299925

Board Certified Specialty: No
JACOB A BAILEY

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1598150039


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PULMONARY DISEASES


JOSHUA, JISHA

Provider ID: 238060

Board Certified Specialty: No
JISHA K JOSHUA

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1023436417

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Hindi, Malayalam
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PULMONARY DISEASES

MCGUIRE, WILLIAM

Provider ID: 299987

Board Certified Specialty: No
WILLIAM C MCGUIRE

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273


Fax: (888) 539-8781



 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1841684081

D3. 专科提供者名录

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*



PULMONARY DISEASES

PEARCE, ALEX

Provider ID: 300054
Board Certified Specialty: No
ALEX K PEARCE
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273




Provider Gender: Female
NPI: 1265896856


 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N




 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

RADIOLOGY DIAGNOSTIC

BERMAN, ZACHARY

Provider ID: 269319
Board Certified Specialty: No
ZACHARY T BERMAN
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273
Provider Gender: Male
NPI: 1033521190

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

RADIOLOGY DIAGNOSTIC




BRANCH, CODY

Provider ID: 283676
Board Certified Specialty: No
CODY BRANCH
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273

Provider Gender: Male
NPI: 1851770622


 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*



RADIOLOGY DIAGNOSTIC

CARSWELL, AIMEE

Provider ID: 303056
Board Certified Specialty: No
AIMEE P CARSWELL
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (858) 554-1212*
Fax: (858) 795-1195
 *After Hours Phone: (858)*
554-1212

Provider Gender: Female
NPI: 1619156635

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation:
EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 283227

D3. 专科提供者名录

Board Certified Specialty: No
KAREN Y CHENG

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427430511

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

FAZELI, SOUDABEH

Provider ID: 299993

Board Certified Specialty: No
SOUDABEH FAZELI

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639553613

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

FORCIER, NANCY

Provider ID: 286955

Board Certified Specialty: No
NANCY J FORCIER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1497721724

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

Providence Mission Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

FOWLER, KATHRYN

Provider ID: 201290

Board Certified Specialty: No
KATHRYN J FOWLER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255457941

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,

SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

GRISSOM, MURRAY

Provider ID: 271568

Board Certified Specialty: No
MURRAY J GRISSOM

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1720465396

D3. 专科提供者名录

☐ *Provider English Spoken: Y* *N*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
Stanford Health Care,
STANFORD HEALTH CARE
TRI-VALLEY

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

♿ *Accessibility: CONTACT*
PROVIDER

🕒 *Hours: M-F*
8:00AM-5:00PM

🌐 *Website: N/A*

RADIOLOGY DIAGNOSTIC **HANNSUN, GEMMY**

Provider ID: 282790
Board Certified Specialty: No
GEMMY HANNSUN

📍 *9300 CAMPUS POINT DR*
LA JOLLA, CA 92037

☎ *Phone: (800) 926-8273*
Fax: (888) 539-8781

📞 *After Hours Phone: (800)*
926-8273

Provider Gender: Male
NPI: 1992120026

☐ *Provider English Spoken: Y*
☐ *Provider Language(s)*
Spoken: Khmer, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):

♿ *Accessibility: CONTACT*
PROVIDER

🕒 *Hours: M-F*
8:00AM-5:00PM

🌐 *Website: N/A*

RADIOLOGY DIAGNOSTIC **HORKY, LAURA**

Provider ID: 241854
Board Certified Specialty: No
LAURA L HORKY

📍 *9300 CAMPUS POINT DR*
LA JOLLA, CA 92037

☎ *Phone: (800) 926-8273*

📞 *After Hours Phone: (800)*
926-8273

Provider Gender: Female
NPI: 1598967812

☐ *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ *Accessibility: CONTACT*
PROVIDER

🕒 *Hours: M-F*
8:00AM-5:00PM

🌐 *Website: N/A*

RADIOLOGY DIAGNOSTIC **HORKY, LAURA**

Provider ID: 241855
Board Certified Specialty: No
LAURA L HORKY

📍 *9400 CAMPUS POINT DR*
LA JOLLA, CA 92093

☎ *Phone: (800) 926-8273*

📞 *After Hours Phone: (800)*
926-8273

Provider Gender: Female
NPI: 1598967812

☐ *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ *Accessibility: CONTACT*
PROVIDER

🕒 *Hours: M-F*
8:00AM-5:00PM

🌐 *Website: N/A*

RADIOLOGY DIAGNOSTIC **JAFFRAY, PAUL**

Provider ID: 299959
Board Certified Specialty: No
PAUL M JAFFRAY

📍 *9300 CAMPUS POINT DR*
LA JOLLA, CA 92037

☎ *Phone: (800) 926-8273*
Fax: (888) 539-8781

📞 *After Hours Phone: (800)*
926-8273

Provider Gender: Male
NPI: 1275700999

☐ *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: Los Angeles
General Medical Center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ *Accessibility: CONTACT*

D3. 专科提供者名录

PROVIDER
 Website: N/A


RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER

Provider ID: 271128

Board Certified Specialty: No
SAMMER JAZBEH

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1770825457

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

PROVIDENCE LITTLE CO OF

MARY MED CTR TORRANCE,

PROVIDENCE LITTLE CO OF

MARY MED CTR SAN PEDRO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC


KHURANA, AMAN

Provider ID: 307767

Board Certified Specialty: No

AMAN KHURANA

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1427496710

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER

Provider ID: 283144

Board Certified Specialty: No
DHIMITER KONDILI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699125450

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR



Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


RADIOLOGY DIAGNOSTIC

MARKS, ROBERT

Provider ID: 300066

Board Certified Specialty: No
ROBERT M MARKS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952389934

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: ST MARY

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

RITCHIE, DAVID

Provider ID: 300033

Board Certified Specialty: No
DAVID J RITCHIE

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

D3. 专科提供者名录


NPI: 1407201916

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC


SADAT, SAYED

Provider ID: 299967

Board Certified Specialty: No
SAYED W SADAT

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1679000806


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

SCHULTZ, HEATHER

Provider ID: 240343

Board Certified Specialty: No
HEATHER M SCHULTZ

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1871910810

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

SEARLEMAN, ADAM

Provider ID: 299950

Board Certified Specialty: No
ADAM C SEARLEMAN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1134570641


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

SLATER, JERRY

Provider ID: 283311

Board Certified Specialty: No
JERRY SLATER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1851746382

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

LOMA LINDA UNIVERSITY


MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

SPENGLER, NATHAN

Provider ID: 303050

Board Certified Specialty: No
NATHAN M SPENGLER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

D3. 专科提供者名录

Provider Gender: Male

NPI: 1992919666

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA


IRVINE MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

STEPENOSKY, JAMES

Provider ID: 309704

Board Certified Specialty: No
JAMES E STEPENOSKY

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1598738577


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC


TADDONIO, MICHAEL

Provider ID: 240406

Board Certified Specialty: No
MICHAEL A TADDONIO

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1386987261

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

TADROS, ANTHONY


Provider ID: 268545

Board Certified Specialty: No
ANTHONY S TADROS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1306112057

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

UNSDORFER, KYLE

Provider ID: 300036

Board Certified Specialty: No
KYLE M UNSDORFER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285165183


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC

VAHDAT, NOUSHIN

Provider ID: 300069

Board Certified Specialty: No

D3. 专科提供者名录

NOUSHIN VAHDAT

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1396700852

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

YORK, VINCENT

Provider ID: 283518

Board Certified Specialty: No
VINCENT M YORK

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790146611

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

ZAPALA, MATTHEW

Provider ID: 307677

Board Certified Specialty: No
MATTHEW A ZAPALA

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346482809

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S

HOSPITAL OAKLAND, UCSF

MEDICAL CENTER, UCSF

Medical Center At Mission Bay,

UCSF MEDICAL CENTER AT

MOUNT ZION

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

REGISTERED PHYSICAL

THERAPIST

BERGERON, PATRICK

Provider ID: 206533

Board Certified Specialty: No
PATRICK BERGERON

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285061390

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

BERGERON, PATRICK

Provider ID: 258296

Board Certified Specialty: No
PATRICK BERGERON

9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285061390

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

D3. 专科提供者名录

THERAPIST

BUNOSKY, ABIGAIL

Provider ID: 246021

Board Certified Specialty: No
ABIGAIL S BUNOSKY

9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780018416

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

CHIEN, PEI

Provider ID: 258324

Board Certified Specialty: No
PEI S CHIEN

9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891260238

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

CHIEN, PEI

Provider ID: 214699

Board Certified Specialty: No

PEI S CHIEN

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891260238

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

HOUSELY, ALEXIS

Provider ID: 299971

Board Certified Specialty: No
ALEXIS J HOUSELY

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689321416

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

REGISTERED PHYSICAL

THERAPIST

MAROLLA, ALICE

Provider ID: 241145

Board Certified Specialty: No
ALICE R MAROLLA

9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477018729

Provider English Spoken: Y

Cultural Competency: N

D3. 专科提供者名录

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


REGISTERED PHYSICAL THERAPIST


RUDD, CHRISTOPHER

Provider ID: 207559

Board Certified Specialty: No
CHRISTOPHER D RUDD

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1831539337

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


REGISTERED PHYSICAL THERAPIST

RUDD, CHRISTOPHER

Provider ID: 258372

Board Certified Specialty: No
CHRISTOPHER D RUDD

 9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

 Phone: (855) 543-0333

Fax: (858) 657-6873

 After Hours Phone: (855)
543-0333

Provider Gender: Male

NPI: 1831539337

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


REGISTERED PHYSICAL THERAPIST

SKINNER, NICOLE

Provider ID: 206546

Board Certified Specialty: No
NICOLE J SKINNER

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1386964997

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


REGISTERED PHYSICAL THERAPIST

TRIMM, CASSIDY

Provider ID: 258442

Board Certified Specialty: No
CASSIDY M TRIMM

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (855) 543-0333

Fax: (858) 657-6873

 After Hours Phone: (855)
543-0333

Provider Gender: Male

NPI: 1740708478

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

D3. 专科提供者名录

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL


THERAPIST

TRIMM, CASSIDY

Provider ID: 258443

Board Certified Specialty: No
CASSIDY M TRIMM

 9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037
 Phone: (855) 543-0333

Fax: (858) 657-6873

 After Hours Phone: (855)
543-0333

Provider Gender: Male

NPI: 1740708478

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST

VASQUEZ, BENJAMIN


Provider ID: 258480

Board Certified Specialty: No

BENJAMIN P VASQUEZ

 9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037

 Phone: (858) 657-6879

Fax: (858) 657-6873

 After Hours Phone: (858)
657-6879

Provider Gender: Male

NPI: 1568938413

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST


VASQUEZ, BENJAMIN


Provider ID: 200968

Board Certified Specialty: No

BENJAMIN P VASQUEZ

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1568938413

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST


WILLIAMS, STACY

Provider ID: 258496


Board Certified Specialty: No
STACY M WILLIAMS

 9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037

 Phone: (858) 657-6879

Fax: (858) 657-6873

 After Hours Phone: (858)
657-6879

Provider Gender: Female

NPI: 1689962169

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL

D3. 专科提供者名录

THERAPIST

YU, AUDRINE

Provider ID: 258481

Board Certified Specialty: No
AUDRINE A YU

9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

Phone: (858) 657-6879

Fax: (858) 657-6873

After Hours Phone: (858)
657-6879

Provider Gender: Female

NPI: 1639271208

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SPEECH PATHOLOGIST

SCHIEDERMAYER, BENJAMIN

Provider ID: 288939

Board Certified Specialty: No
BENJAMIN F

SCHIEDERMAYER

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1164979837

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SPEECH PATHOLOGIST

SCHIEDERMAYER, BENJAMIN

Provider ID: 288938

Board Certified Specialty: No
BENJAMIN F

SCHIEDERMAYER

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1164979837

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SPEECH PATHOLOGIST

UNGER, LINDSEY

Provider ID: 265338

Board Certified Specialty: No

LINDSEY A UNGER

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1972936813

Provider English Spoken: Y

Provider Language(s)
Spoken: Sign Language

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY COLON SURGERY

LIU, SHANGLEI

Provider ID: 273364

Board Certified Specialty: No
SHANGLEI LIU

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1043558653

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

D3. 专科提供者名录

JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

SURGERY COLON SURGERY

LOPEZ, NICOLE


Provider ID: 286388


Board Certified Specialty: No

NICOLE E LOPEZ

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (858) 822-6100

 After Hours Phone: (858)
822-6100

Provider Gender: Female

NPI: 1518163005

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

SURGERY COLON SURGERY

PARRY, LISA


Provider ID: 278551

Board Certified Specialty: No

LISA A PARRY

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1235369067

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

SURGERY COLON SURGERY


RAMAMOORTHY, SONIA

Provider ID: 286371

Board Certified Specialty: No

SONIA L RAMAMOORTHY

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1801812656

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

SURGERY GENERAL

AL-NOURI, OMAR


Provider ID: 211904


Board Certified Specialty: No

OMAR AL-NOURI

 9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1770742264

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL


CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

D3. 专科提供者名录

SURGERY GENERAL

AL-NOURI, OMAR

Provider ID: 211905

Board Certified Specialty: No
OMAR AL-NOURI

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1770742264

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

ARMANI, AVA

Provider ID: 282142

Board Certified Specialty: No
AVA ARMANI

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (858) 822-6100

After Hours Phone: (858)
822-6100

Provider Gender: Female

NPI: 1861759383

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
MEDICAL CENTER, UCSF
Medical Center At Mission Bay,
UCSF MEDICAL CENTER AT

MOUNT ZION, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

CLARY, BRYAN

Provider ID: 202568

Board Certified Specialty: No
BRYAN M CLARY

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982787131

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

HORGAN, SANTIAGO

Provider ID: 286380

Board Certified Specialty: No
SANTIAGO HORGAN

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (619) 471-0755

After Hours Phone: (619)
471-0755

Provider Gender: Male

NPI: 1932297231

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

JACOBSEN, GARTH

Provider ID: 201728

Board Certified Specialty: No
GARTH R JACOBSEN

9350 CAMPUS POINT DR

D3. 专科提供者名录

LA JOLLA, CA 92037
Phone: (619) 471-0755
After Hours Phone: (619) 471-0755
Provider Gender: Male
NPI: 1265649966
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL

SANTORELLI, JARRETT

Provider ID: 272304
Board Certified Specialty: No
JARRETT E SANTORELLI
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1033529201
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL

VASCULAR

BARLEBEN, ANDREW

Provider ID: 275373
Board Certified Specialty: No
ANDREW R BARLEBEN
9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1497936900
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL

VASCULAR

BARLEBEN, ANDREW

Provider ID: 275371
Board Certified Specialty: Yes
ANDREW R BARLEBEN
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1497936900
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A





SURGERY GENERAL

VASCULAR

GAFFEY, ANN

Provider ID: 287012
Board Certified Specialty: No
ANN GAFFEY MD
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1316232010


D3. 专科提供者名录

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

SURGERY GENERAL

VASCULAR






HOWE, STEVEN

Provider ID: 206760
Board Certified Specialty: No
STEVEN C HOWE
 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
 *Phone: (858) 657-7777*
Fax: (858) 657-5058
 *After Hours Phone: (858) 657-7777*
Provider Gender: Male
NPI: 1497702740
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

SURGERY NEUROLOGICAL


BARBA, DAVID

Provider ID: 275678
Board Certified Specialty: No
DAVID BARBA
 9350 CAMPUS POINT DR
STE 2A
LA JOLLA, CA 92037
 *Phone: (619) 543-5540*
Fax: (619) 287-7663
 *After Hours Phone: (619) 543-5540*
Provider Gender: Male
NPI: 1093730251



 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

SURGERY NEUROLOGICAL


BEAUMONT, THOMAS




Provider ID: 214126
Board Certified Specialty: No
THOMAS L BEAUMONT
 3855 HEALTH SCIENCES

DR

LA JOLLA, CA 92093
 *Phone: (858) 657-8540*
 *After Hours Phone: (858) 657-8540*




Provider Gender: Male
NPI: 1497067573

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

SURGERY NEUROLOGICAL

BEN-HAIM, SHARONA

Provider ID: 244070
Board Certified Specialty: No
SHARONA BEN-HAIM
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1942469663

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Hebrew, Spanish*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

D3. 专科提供者名录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): DUSTIN HATEFI

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY NEUROLOGICAL


BLASKIEWICZ, DONALD

Provider ID: 270282

Board Certified Specialty: No

DONALD J BLASKIEWICZ

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1215176839

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY NEUROLOGICAL


HATEFI, DUSTIN

Provider ID: 310034

Board Certified Specialty: No

DUSTIN HATEFI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790072106

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:


UNIVERSITY OF CALIFORNIA
IRVINE MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

SURGERY NEUROLOGICAL


MARSHALL, LAWRENCE


Provider ID: 244149

Board Certified Specialty: No

LAWRENCE F MARSHALL


 9350 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1750306171

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY NEUROLOGICAL


MURTHY, NIKHIL

Provider ID: 299994

Board Certified Specialty: No

NIKHIL K MURTHY

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1710371273


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

SURGERY NEUROLOGICAL


MURTHY, NIKHIL

Provider ID: 299995

Board Certified Specialty: No

NIKHIL K MURTHY

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (619) 543-5540

Fax: (888) 539-8781

 After Hours Phone: (619)
543-5540

D3. 专科提供者名录

Provider Gender: Male

NPI: 1710371273


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


SURGERY NEUROLOGICAL


OSORIO, JOSEPH

Provider ID: 242005

Board Certified Specialty: No
JOSEPH A OSORIO

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437416591

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY NEUROLOGICAL


OSORIO, JOSEPH

Provider ID: 242006

Board Certified Specialty: No
JOSEPH A OSORIO

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437416591

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY NEUROLOGICAL


PHAM, MARTIN

Provider ID: 244159

Board Certified Specialty: No
MARTIN H PHAM

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1609130921

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA


JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY NEUROLOGICAL


U, HOI

Provider ID: 244133

Board Certified Specialty: Yes
HOI S U

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1164468146

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 专科提供者名录

SURGERY ORTHOPEDIC

ANDRY, JAMES

Provider ID: 302085

Board Certified Specialty: No

JAMES P ANDRY

9834 GENESEE AVE STE
228

LA JOLLA, CA 92037

Phone: (858) 455-9942

Fax: (858) 455-6473

After Hours Phone: (858)
455-9942

Provider Gender: Male

NPI: 1679726103

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, Sharp

Grossmont Hospital, SHARP

MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL, TRI

CITY MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY ORTHOPEDIC

BUKATA, SUSAN

Provider ID: 277947

Board Certified Specialty: No

SUSAN V BUKATA

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932140639

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

CHIARAPPA, FRANK

Provider ID: 244460

Board Certified Specialty: No

FRANK E CHIARAPPA

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1932536828

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

CHOI, JIHOON

Provider ID: 284787

Board Certified Specialty: No

JIHOON CHOI

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285097741

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY ORTHOPEDIC

CHOI, JIHOON

Provider ID: 284786

Board Certified Specialty: No

D3. 专科提供者名录

JIHOON CHOI

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8181

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285097741

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

FLINT, JAMES

Provider ID: 203177

Board Certified Specialty: No
JAMES H FLINT

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1629239140

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): YANNICK L GOEB

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

GOEB, YANNICK

Provider ID: 284793

Board Certified Specialty: No
YANNICK L GOEB

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1730542747

Provider English Spoken: Y

Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

GOEB, YANNICK

Provider ID: 284792

Board Certified Specialty: No

YANNICK L GOEB

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1730542747

Provider English Spoken: Y

Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

KUSNEZOV, NICHOLAS

Provider ID: 303194

Board Certified Specialty: No

NICHOLAS A KUSNEZOV

9834 GENESEE AVE STE
228

LA JOLLA, CA 92037

Phone: (858) 455-9942

Fax: (858) 455-6473

After Hours Phone: (858)
455-9942

Provider Gender: Male




D3. 专科提供者名录

NPI: 1396185161

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TWIN
CITIES COMMUNITY
HOSPITAL, TRI CITY MEDICAL
CTR, PARADISE VALLEY
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SHARP CHULA
VISTA MED CTR, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, Sharp
Grossmont Hospital, Sharp
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


SURGERY ORTHOPEDIC

PALLIA, CHRISTOPHER

Provider ID: 302103


Board Certified Specialty: No
CHRISTOPHER S PALLIA




 9834 GENESEE AVE STE
228
LA JOLLA, CA 92037

 Phone: (858) 455-9942
Fax: (858) 455-6473

 After Hours Phone: (858)
455-9942

Provider Gender: Male
NPI: 1497751457

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


SURGERY ORTHOPEDIC

SULLIVAN, THOMAS

Provider ID: 285246


Board Certified Specialty: No
THOMAS B SULLIVAN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1437565488


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC

SULLIVAN, THOMAS

Provider ID: 285245


Board Certified Specialty: No
THOMAS B SULLIVAN

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


Provider Gender: Male
NPI: 1437565488

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY PLASTIC

HINCHCLIFF, KATHARINE

Provider ID: 277289

Board Certified Specialty: No
KATHARINE M HINCHCLIFF

D3. 专科提供者名录

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1346674561

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY PLASTIC

REID, CHRISTOPHER

Provider ID: 224796
Board Certified Specialty: No
CHRISTOPHER M REID

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1982964276

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY THORACIC

BOYS, JOSHUA

Provider ID: 243533
Board Certified Specialty: No
JOSHUA A BOYS

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 657-7777
After Hours Phone: (858)
657-7777
Provider Gender: Male
NPI: 1114368990

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY THORACIC

KEARNS, MARK

Provider ID: 274297
Board Certified Specialty: No
MARK J KEARNS

9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037
Phone: (858) 647-8817
Fax: (858) 853-9878
After Hours Phone: (858)
647-8817
Provider Gender: Male
NPI: 1033683719

Provider English Spoken: Y
Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: CEDARS
SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY THORACIC




KEARNS, MARK

Provider ID: 274296
Board Certified Specialty: No
MARK J KEARNS

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 657-8817
Fax: (888) 539-8781
After Hours Phone: (858)
657-8817
Provider Gender: Male
NPI: 1033683719

Provider English Spoken: Y
Provider Language(s)
Spoken: French



D3. 专科提供者名录

Cultural Competency: N
*Hospital Affiliation: CEDARS
SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

SURGERY THORACIC




POLLEMA, TRAVIS

Provider ID: 210576
Board Certified Specialty: No
TRAVIS L POLLEMA
 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)
926-8273*
Provider Gender: Male
NPI: 1871752956
 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT*

PROVIDER
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

SURGERY THORACIC

RAMIREZ, ALFREDO



Provider ID: 256390
Board Certified Specialty: No
ALFREDO R RAMIREZ
 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*



Provider Gender: Male
NPI: 1003829417

 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

SURGERY THORACIC

ZANDER, ASHLEY

Provider ID: 291383
Board Certified Specialty: No
ASHLEY L ZANDER
 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*
Provider Gender: Female
NPI: 1780940031
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Website: N/A*

SURGERY THORACIC

ZANDER, ASHLEY

Provider ID: 291382
Board Certified Specialty: No
ASHLEY L ZANDER
 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)
926-8273*
Provider Gender: Female
NPI: 1780940031
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Website: N/A*

SURGERY THORACIC

ZANDER, ASHLEY

Provider ID: 291381

D3. 专科提供者名录

Board Certified Specialty: No
ASHLEY L ZANDER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780940031

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

UROLOGY

CRAWFORD, ELWARD

Provider ID: 244131

Board Certified Specialty: No
ELWARD D CRAWFORD

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 657-7876

Fax: (888) 539-8781

After Hours Phone: (858)
657-7876

Provider Gender: Male

NPI: 1902814379

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

UROLOGY

HSIEH, TUNG CHIN

Provider ID: 294878

Board Certified Specialty: No
TUNG CHIN HSIEH

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 249-3534

After Hours Phone: (858)
249-3534

Provider Gender: Male

NPI: 1073758652

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

UROLOGY

KATZ, JONATHAN

Provider ID: 299917

Board Certified Specialty: No
JONATHAN E KATZ

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952756207

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

UROLOGY

WANG, LUKE

Provider ID: 299934

Board Certified Specialty: No
LUKE L WANG

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033630173

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

LA MESA

CARDIOVASCULAR DISEASE

KOTHA, PURUSHOTHAM

Provider ID: 32053

Board Certified Specialty: Yes

D3. 专科提供者名录

PURUSHOTHAM KOTHA
8860 CENTER DR STE 400
LA MESA, CA 91942
Phone: (619) 229-1995
Fax: (619) 229-1109
After Hours Phone: (619)
229-1995
Provider Gender: Male
NPI: 1093730814

Provider English Spoken: Y
Provider Language(s)
Spoken: Hindi, Spanish,
Telugu
Cultural Competency: N
Hospital Affiliation: ALVARADO
HOSPITAL LLC, GROSSMONT
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

CARDIOVASCULAR DISEASE **REDDY, REDDIWANDLA**

Provider ID: 265393
Board Certified Specialty: No
REDDIWANDLA S REDDY
5565 GROSSMONT
CENTER DR STE 202
LA MESA, CA 91942
Phone: (619) 461-6130
Fax: (619) 461-3108
After Hours Phone: (619)
461-6130
Provider Gender: Male
NPI: 1710996384
Provider English Spoken: Y

Provider Language(s)
Spoken: Kannada, Spanish,
Telugu
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:30AM-5:00PM
Website: N/A

CARDIOVASCULAR DISEASE **SHEREV, DIMITRI**

Provider ID: 290704
Board Certified Specialty: No
DIMITRI A SHEREV
8851 CENTER DR STE 304
LA MESA, CA 91942
Phone: (619) 867-0557
Fax: (619) 867-0558
After Hours Phone: (619)
867-0557
Provider Gender: Male
NPI: 1154323996

Provider English Spoken: Y
Provider Language(s)
Spoken: Bulgarian, Russian,
Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, ALVARADO
HOSPITAL LLC, SHARP CHULA

VISTA MED CTR, TRI CITY
MEDICAL CTR, TRI CITY
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, Sharp Grossmont
Hospital, SHARP CORONADO
HOSP AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:30AM-5:00PM
Website: N/A

CERTIFIED NURSE **PRACTITIONER** **LANE, KIMBERLY**

Provider ID: 295955
Board Certified Specialty: No
KIMBERLY A LANE
8851 CENTER DR STE 501
LA MESA, CA 91942
Phone: (619) 697-2456
Fax: (858) 429-7930
After Hours Phone: (619)
697-2456
Provider Gender: Female
NPI: 1457670119
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM

D3. 专科提供者名录


 Website: N/A


CERTIFIED NURSE PRACTITIONER


RESELLI, LYNDSEY

Provider ID: 217692

Board Certified Specialty: No
LYNDSEY RESELLI

 8881 FLETCHER PKWY STE
200
LA MESA, CA 91942

 Phone: (619) 464-6434

 After Hours Phone: (619)
464-6434

Provider Gender: Female

NPI: 1558854000


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


CERTIFIED NURSE PRACTITIONER


RESELLI, LYNDSEY

Provider ID: 217693

Board Certified Specialty: No
LYNDSEY RESELLI

 8881 FLETCHER PKWY STE
205
LA MESA, CA 91942

 Phone: (619) 464-6434

 After Hours Phone: (619)
464-6434

Provider Gender: Female

NPI: 1558854000


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


EMERGENCY MEDICINE

QUINONES-PEREZ, BIANCA

Provider ID: 206948

Board Certified Specialty: No
BIANCA N QUINONES-PEREZ

 5565 GROSSMONT
CENTER DR STE 2 STE 2
LA MESA, CA 91942


 Phone: (619) 713-5375

Fax: (619) 713-5379

 After Hours Phone: (619)
713-5375

Provider Gender: Female

NPI: 1124360565

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE

Provider ID: 268693

Board Certified Specialty: No
ELAINE ANDERSON

 5565 GROSSMONT
CENTER DR
LA MESA, CA 91942

 Phone: (619) 589-5414

Fax: (619) 589-7391

 After Hours Phone: (619)
589-5414

Provider Gender: Female

NPI: 1063558856


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERVENTIONAL CARDIOLOGY

TAGHIZADEH, BEHZAD

Provider ID: 269161

Board Certified Specialty: No
TAGHIZADEH, BEHZAD

 8851 CENTER DR STE 405
LA MESA, CA 91942

 Phone: (619) 582-2404

Fax: (619) 582-2915

 After Hours Phone: (619)
582-2404

Provider Gender: Male

D3. 专科提供者名录

NPI: 1275514986

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERVENTIONAL CARDIOLOGY

YELLEN, LAURENCE


Provider ID: 269173

Board Certified Specialty: No
LAURENCE G YELLEN

 8851 CENTER DR STE 405
LA MESA, CA 91942

 Phone: (619) 582-2404

Fax: (619) 582-2915

 After Hours Phone: (619)
582-2404

Provider Gender: Male

NPI: 1477680551

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC,

USC Arcadia Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

ADAMI, REBECCA

Provider ID: 272676

Board Certified Specialty: No
REBECCA R ADAMI

 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942


 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1992149447

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

MCCULLOUGH, DEIRDRE

Provider ID: 244873

Board Certified Specialty: No
DEIRDRE M MCCULLOUGH

 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1639153018

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
Sharp Grossmont Hospital,
SHARP MEMORIAL HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 296997

Board Certified Specialty: No
DORA J MELBER

 8851 CENTER DR STE 201
LA MESA, CA 91942

 Phone: (858) 966-6710

D3. 专科提供者名录

Fax: (858) 966-6711

☎ After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1124413026

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Hungarian, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294654

Board Certified Specialty: No
REBECCA M REIMERS

📍 5555 GROSSMONT CENTER DR

LA MESA, CA 91942

☎ Phone: (858) 966-6710

Fax: (858) 966-6711

☎ After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1801207634

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294656

Board Certified Specialty: No
REBECCA M REIMERS

📍 8851 CENTER DR STE 201
LA MESA, CA 91942

☎ Phone: (858) 966-6710

Fax: (858) 966-6711

☎ After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1801207634

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE

Provider ID: 277317

Board Certified Specialty: No
ALVIE C RICHARDSON

📍 5555 GROSSMONT CENTER DR

LA MESA, CA 91942

☎ Phone: (858) 966-6710

Fax: (858) 966-6711

☎ After Hours Phone: (858) 966-6710

Provider Gender: Male

NPI: 1154305977

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE






Provider ID: 277305

Board Certified Specialty: No
WADE D SCHWENDEMANN

📍 5555 GROSSMONT CENTER DR

LA MESA, CA 91942

D3. 专科提供者名录




 Phone: (858) 966-6710
Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
Provider Gender: Male
NPI: 1477563302
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, Sharp Grossmont Hospital, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE

WILLIAMS, KRISTIN




Provider ID: 277384
Board Certified Specialty: No
KRISTIN M WILLIAMS
 5555 GROSSMONT CENTER DR
LA MESA, CA 91942
 Phone: (858) 966-6710
Fax: (858) 966-6711
 After Hours Phone: (858)

966-6710
Provider Gender: Female
NPI: 1992847131
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, SAN MATEO MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, CALIFORNIA PACIFIC MED CTR, CALIFORNIA PACIFIC MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEUROLOGY





MOHAMMAD, AHMADSHAH

Provider ID: 39868
Board Certified Specialty: No
AHMADSHAH S MOHAMMAD
 8851 CENTER DR STE 307
LA MESA, CA 91942
 Phone: (619) 337-7900
Fax: (619) 337-7902
 After Hours Phone: (619) 337-7900
Provider Gender: Male
NPI: 1902973472

 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, Farsi, French, German, Pashto, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY


HAIGHT, BRUCE


Provider ID: 295984
Board Certified Specialty: No
BRUCE T HAIGHT
 5565 GROSSMONT CENTER DR STE 2-3
LA MESA, CA 91942
 Phone: (619) 465-2020
Fax: (619) 698-1189
 After Hours Phone: (619) 465-2020
Provider Gender: Male
NPI: 1427029628
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

D3. 专科提供者名录

American Sign Language (ASL): Provider ID: 305885

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:30AM-4:00PM
F 8:00AM-0:00PM

 Website: N/A


OPHTHALMOLOGY

HAIGHT, BRUCE

Provider ID: 269112

Board Certified Specialty: No
BRUCE T HAIGHT

 5565 GROSSMONT
CENTER DR BLDG 3 STE
551

 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619)
465-2020

Provider Gender: Male

NPI: 1427029628

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


 Hours: M 8:00AM-4:00PM
TU-W 8:30AM-4:00PM
TH 8:00AM-4:00PM
F 8:00AM-0:00PM

 Website: N/A


OPHTHALMOLOGY

HAIGHT, BRUCE

Board Certified Specialty: No
BRUCE T HAIGHT

 5565 GROSSMONT
CENTER DR BLDG 3 STE
551

LA MESA, CA 91942

 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619)
465-2020

Provider Gender: Male

NPI: 1427029628

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:
GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:00AM-4:00PM
TU-W 8:30AM-4:00PM
TH 8:00AM-4:00PM
F 8:00AM-0:00PM

 Website: N/A

OPHTHALMOLOGY


HAIGHT, BRUCE

Provider ID: 288660


Board Certified Specialty: No
BRUCE T HAIGHT

 7339 EL CAJON BLVD STE J
AND K

LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460

Provider Gender: Male

NPI: 1427029628

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:
GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


HUDSON, HENRY

Provider ID: 297578


Board Certified Specialty: No
HENRY L HUDSON

 7339 EL CAJON BLVD STE J
AND K

LA MESA, CA 91942

 Phone: (626) 412-4040

Fax: (760) 267-9160

 After Hours Phone: (626)
412-4040

Provider Gender: Male

NPI: 1851349195

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, TRI

CITY MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY
HOSPITAL, SCRIPPS


MEMORIAL HOSPITAL, Sharp
Grossmont Hospital


D3. 专科提供者名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-4:30PM


 Website: N/A


OPHTHALMOLOGY

HUDSON, HENRY

Provider ID: 306768

Board Certified Specialty: Yes
HENRY L HUDSON

 5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

 Phone: (626) 206-0633
Fax: (760) 267-9160

 After Hours Phone: (626)
206-0633

Provider Gender: Male

NPI: 1851349195

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, Sharp

Grossmont Hospital


Medi-Cal Open Panel: Yes


Min/Max Age: 6\99

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OPHTHALMOLOGY

HUDSON, HENRY

Provider ID: 297577

Board Certified Specialty: Yes
HENRY L HUDSON


 5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

 Phone: (626) 206-0633
Fax: (760) 267-9160

 After Hours Phone: (626)
206-0633

Provider Gender: Male

NPI: 1851349195

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, Sharp


Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPTOMETRIST


AOTO, KIM

Provider ID: 288652

Board Certified Specialty: No
KIM N AOTO

 7339 EL CAJON BLVD STE J
AND K

LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OTOLARYNGOLOGY

MOSHTAGHI, OMID

Provider ID: 302380

Board Certified Specialty: No
OMID MOSHTAGHI

 5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

 Phone: (619) 464-3353

Fax: (619) 464-6720

 After Hours Phone: (619)
464-3353

Provider Gender: Male




NPI: 1730675927

 Provider English Spoken: Y

D3. 专科提供者名录

Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, Sharp
Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*



OTOLARYNGOLOGY

SAEZ, NEIL

Provider ID: 302431
Board Certified Specialty: No
NEIL A SAEZ

 5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
 *Phone: (619) 464-3353*
Fax: (619) 464-6720
 *After Hours Phone: (619)*
464-3353




Provider Gender: Male
NPI: 1518456508

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N



 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

PEDIATRIC EMERGENCY

MEDICINE


GROSS, MATTHEW

Provider ID: 297177
Board Certified Specialty: No
MATTHEW F GROSS




 5565 GROSSMONT
CENTER DR STE 2 STE 2
LA MESA, CA 91942
 *Phone: (619) 713-5375*
Fax: (619) 713-5379

 *After Hours Phone: (619)*
713-5375

Provider Gender: Male
NPI: 1942223664

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: SU 1:00PM-10:00PM*
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Website: N/A*

PEDIATRIC EMERGENCY


MEDICINE

PARKER, SHERINE

Provider ID: 205786
Board Certified Specialty: No



SHERINE B PARKER

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

 *Phone: (619) 713-5375*
Fax: (619) 713-5379

 *After Hours Phone: (619)*
713-5375

Provider Gender: Female
NPI: 1477626513


 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Arabic, Spanish


Cultural Competency: N
Hospital Affiliation: GLENDALE
ADVENTIST MED CTR,
GLENDALE MEMORIAL HOSP
AND HEALTH CTR, TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


PEDIATRIC EMERGENCY

MEDICINE

VARGAS, JACLYN

Provider ID: 285936
Board Certified Specialty: No
JACLYN F VARGAS

 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

 *Phone: (858) 966-6710*

D3. 专科提供者名录

Fax: (858) 966-6711

☎ After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1619359718

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, Los Angeles General
Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRICS

CLAY, CORRIE

Provider ID: 278807

Board Certified Specialty: No
CORRIE T CLAY

📍 8881 FLETCHER PKWY STE
200
LA MESA, CA 91942

☎ Phone: (619) 464-6434

Fax: (619) 464-5109

☎ After Hours Phone: (619)
464-6434

Provider Gender: Female

NPI: 1437207750

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MARY

BIRCH HOSP FOR WOMEN
AND NEWBORNS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-6:00PM
SA 11:30AM-3:30PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

FERRARA, SAMANTHA

Provider ID: 309977

Board Certified Specialty: No
SAMANTHA L FERRARA

📍 5565 GROSSMONT
CENTER DR STE 444
LA MESA, CA 91942

☎ Phone: (619) 698-0606

Fax: (619) 698-0609

☎ After Hours Phone: (619)
698-0606

Provider Gender: Female

NPI: 1437822434

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

HINKLE, CORINNE

Provider ID: 309954

Board Certified Specialty: No
CORINNE C HINKLE

📍 5565 GROSSMONT
CENTER DR STE 444
LA MESA, CA 91942

☎ Phone: (619) 698-0606

☎ After Hours Phone: (619)
698-0606

Provider Gender: Female

NPI: 1508451949

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: Valleywise
Health Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

RAYMOND, ALAIN

Provider ID: 269057

Board Certified Specialty: No
ALAIN L RAYMOND

📍 8851 CENTER DR STE 505
LA MESA, CA 91942

☎ Phone: (619) 461-3880

Fax: (619) 461-3895


☎ After Hours Phone: (619)
461-3880

Provider Gender: Male

NPI: 1164729125

☑ Provider English Spoken: Y


D3. 专科提供者名录

 *Provider Language(s)*
Spoken: French, Haitian Creole

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):  *After Hours Phone: (619) 303-7130*

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


PHYSICIANS ASSISTANT


WHITE, KYLE

Provider ID: 302382

Board Certified Specialty: No

KYLE WHITE

 5565 GROSSMONT CENTER DR BLDG 3 STE 101 LA MESA, CA 91942

 *Phone: (619) 464-3353*

Fax: (619) 464-7509

 *After Hours Phone: (619) 464-3353*

Provider Gender: Male

NPI: 1922768860


 *Provider English Spoken: Y*
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

PODIATRIST


CAINE, SAMUEL

Provider ID: 308638

Board Certified Specialty: No

SAMUEL CAINE

 5565 GROSSMONT CENTER DR STE 510 LA MESA, CA 91942

 *Phone: (619) 303-7130*

Fax: (619) 303-7150

 *After Hours Phone: (619) 303-7130*

Provider Gender: Male

NPI: 1396230298

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, SHARP MEMORIAL

HOSPITAL, SHARP CHULA


VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):  *Website: N/A*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


PODIATRIST


CAINE, SAMUEL

Provider ID: 308213

Board Certified Specialty: No

SAMUEL CAINE

 5565 GROSSMONT CENTER DR STE 510 LA MESA, CA 91942

 *Phone: (619) 303-7130*

Fax: (619) 303-7150

 *After Hours Phone: (619) 303-7130*

Provider Gender: Male

NPI: 1396230298

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, SHARP MEMORIAL

HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

RADIATION ONCOLOGY


CARMONA, RUBEN

Provider ID: 303099

Board Certified Specialty: No

RUBEN CARMONA

 5555 GROSSMONT CENTER DR LA MESA, CA 91942

 *Phone: (619) 740-4500*

Fax: (619) 740-8499

 *After Hours Phone: (619) 740-4500*

Provider Gender: Male

NPI: 1275929242




 *Provider English Spoken: Y*

 *Provider Language(s)*

D3. 专科提供者名录

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999



American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

RADIATION ONCOLOGY



COLEMAN, LORI

Provider ID: 221089
Board Certified Specialty: No
LORI A COLEMAN

 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
 *Phone: (619) 740-4500*
Fax: (619) 740-8499

 *After Hours Phone: (619)*
740-4500

Provider Gender: Female
NPI: 1053348920


 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
PALOMAR MEDICAL CENTER,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM


 *Website: N/A*

RADIATION ONCOLOGY

VOLPP, PAUL



Provider ID: 221104
Board Certified Specialty: No
PAUL B VOLPP

 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

 *Phone: (619) 740-4500*
Fax: (619) 740-8499

 *After Hours Phone: (619)*
740-4500


Provider Gender: Male
NPI: 1225186232


 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,
GROSSMONT HOSPITAL,
PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM


 *Website: N/A*

RHEUMATOLOGY

KOTHA, ROSHAN



Provider ID: 63454
Board Certified Specialty: No
ROSHAN KOTHA

 8860 CENTER DR STE 400
LA MESA, CA 91942

 *Phone: (619) 229-1995*
Fax: (619) 229-1109


 *After Hours Phone: (619)*
229-1995

Provider Gender: Female
NPI: 1417117839

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Hindi, Spanish,
Telugu

Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:30AM-5:00PM


 *Website: N/A*

SURGERY ORTHOPEDIC

BALLARD, BROOKE

Provider ID: 262205
Board Certified Specialty: No
BROOKE L BALLARD

 8860 CENTER DR STE 350
LA MESA, CA 91942



 *Phone: (619) 286-9480*
Fax: (619) 286-4568




 *After Hours Phone: (619)*
286-9480

Provider Gender: Female

D3. 专科提供者名录

NPI: 1841447950




 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: ALVARADO
HOSPITAL LLC, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-5:00PM
 Website: N/A
Email:
tracy@alvaradoortho.com



LAKE ELSINORE



OBSTETRICS / GYNECOLOGY FRANCIS, LARRY

Provider ID: 290293
Board Certified Specialty: No
LARRY N FRANCIS

 30195 FRASER DR
LAKE ELSINORE, CA 92530
 Phone: (951) 252-2720
Fax: (760) 414-3892
 After Hours Phone: (951)
252-2720

Provider Gender: Male
NPI: 1215008552




 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:

SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SHARP MEMORIAL HOSPITAL,
POMONA VALLEY HOSP MED
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A



OPTOMETRIST

GEE, JENNIFER

Provider ID: 290211
Board Certified Specialty: No
JENNIFER W GEE

 30195 FRASER DR
LAKE ELSINORE, CA 92530
 Phone: (951) 252-2720
Fax: (760) 414-3892
 After Hours Phone: (951)
252-2720




Provider Gender: Female
NPI: 1336589332

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC
MEDICAL CENTER - D P APH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

 Website: N/A



OPTOMETRIST MORA, WENDY

Provider ID: 290239
Board Certified Specialty: No
WENDY A MORA

 30195 FRASER DR
LAKE ELSINORE, CA 92530
 Phone: (951) 252-2720
Fax: (760) 414-3892
 After Hours Phone: (951)
252-2720

Provider Gender: Female
NPI: 1376958389




 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A



OPTOMETRIST

TAM, EMILY

Provider ID: 290319
Board Certified Specialty: No
EMILY TAM

 30195 FRASER DR
LAKE ELSINORE, CA 92530
 Phone: (951) 252-2720
Fax: (760) 414-3892
 After Hours Phone: (951)
252-2720

Provider Gender: Female
NPI: 1497161236

 Provider English Spoken: Y
 Provider Language(s)

D3. 专科提供者名录

Spoken: Chinese, Mandarin, Yue Chinese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

LAKESIDE



CHIROPRACTOR

HOURIHAN, KEITH

Provider ID: 257549
Board Certified Specialty: No
KEITH M HOURIHAN
 10039 VINE ST
LAKESIDE, CA 92040
 *Phone: (619) 390-9975*
Fax: (858) 633-4690
 *After Hours Phone: (619) 390-9975*


Provider Gender: Male


NPI: 1306916994


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

PSYCHOLOGIST

BRUNETTO, HEIDI

Provider ID: 290407
Board Certified Specialty: No
HEIDI M BRUNETTO
 10039 VINE ST
LAKESIDE, CA 92040
 *Phone: (619) 390-9975*
Fax: (360) 462-2744
 *After Hours Phone: (619) 390-9975*


Provider Gender: Female


NPI: 1023250453


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH 8:00AM-5:00PM*

 *Website: N/A*


MENIFEE


CERTIFIED NURSE


PRACTITIONER

VAHDAT, VALERIE

Provider ID: 306581
Board Certified Specialty: No
VALERIE K VAHDAT

 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586




 *Phone: (951) 216-2200*
Fax: (858) 633-4699

 *After Hours Phone: (951) 216-2200*

Provider Gender: Female

NPI: 1093474090


 *Provider English Spoken: Y*
Cultural Competency: N



Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PHYSICIANS ASSISTANT

SMITH, KELLI


Provider ID: 272954
Board Certified Specialty: No
KELLI A SMITH

 30420 HAUN RD
MENIFEE, CA 92584

 *Phone: (951) 676-4193*
 *After Hours Phone: (951) 676-4193*


Provider Gender: Female


NPI: 1841771664

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

MURRIETA

ANESTHESIOLOGY

HYLTON, DIANA

Provider ID: 241738
Board Certified Specialty: No
DIANA J HYLTON

 25500 MEDICAL CENTER

D3. 专科提供者名录

DR
MURRIETA, CA 92562
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932527751
🗺 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

ANESTHESIOLOGY

KRAUSE, MARTIN

Provider ID: 287655
Board Certified Specialty: No
MARTIN KRAUSE
📍 25500 MEDICAL CENTER DR
MURRIETA, CA 92562
☎ Phone: (951) 696-6000
Fax: (951) 677-9757
🕒 After Hours Phone: (951) 696-6000
Provider Gender: Male
NPI: 1417243239
🗺 Provider English Spoken: Y

🗺 Provider Language(s)
Spoken: German
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HEAD, KRISTIN

Provider ID: 268658
Board Certified Specialty: No
KRISTIN N HEAD
📍 25170 HANCOCK AVE STE 1
MURRIETA, CA 92562
☎ Phone: (951) 600-1640
Fax: (951) 600-1760
🕒 After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1699078923
🗺 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MIRACLE, ANGELYN

Provider ID: 300259
Board Certified Specialty: No
ANGELYN M MIRACLE
📍 25170 HANCOCK AVE STE 200
MURRIETA, CA 92562
☎ Phone: (951) 461-9300
Fax: (951) 461-9399
🕒 After Hours Phone: (951) 461-9300
Provider Gender: Female
NPI: 1144539842
🗺 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: SU 8:30AM-0:00PM
M-F 8:00AM-5:00PM
SA 8:30AM-0:00PM
🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

SNYDER, MICHELLE

Provider ID: 210676
Board Certified Specialty: No
MICHELLE V SNYDER
📍 41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
☎ Phone: (800) 926-8273

D3. 专科提供者名录

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1851561054

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

STEVENSON, REHEIA

Provider ID: 210794

Board Certified Specialty: No
REHEIA A STEVENSON

📍 41011 CALIFORNIA OAKS
RD STE 104

MURRIETA, CA 92562

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346696044

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): JINGHONG LI

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

SYED-UDDIN, SUMIYAH

Provider ID: 297771

Board Certified Specialty: No
SUMIYAH SYED-UDDIN

📍 25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

☎ Phone: (951) 696-6124

Fax: (951) 696-6293

☎ After Hours Phone: (951)
696-6124

Provider Gender: Female

NPI: 1225606478

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Hindi, Urdu

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

EMERGENCY MEDICINE

LI, JINGHONG

Provider ID: 255941

Board Certified Specialty: No

JINGHONG LI

📍 25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

☎ Phone: (951) 696-6000

☎ After Hours Phone: (951)
696-6000

Provider Gender: Female

NPI: 1619014479

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

INTERVENTIONAL

CARDIOLOGY

AL KHIAMI, BELAL

Provider ID: 275994

Board Certified Specialty: No

BELAL O AL KHIAMI

📍 28062 BAXTER RD
MURRIETA, CA 92563

☎ Phone: (951) 290-4000

Fax: (888) 539-8781

☎ After Hours Phone: (951)
290-4000

Provider Gender: Male

NPI: 1861623506


☑ Provider English Spoken: Y

D3. 专科提供者名录

 *Provider Language(s)*
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL INC

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F*
8:00AM-5:00PM


 *Website: N/A*

INTERVENTIONAL **CARDIOLOGY**

WETTERSTEN, NICHOLAS


Provider ID: 210605
Board Certified Specialty: No
NICHOLAS W WETTERSTEN

 41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*


Provider Gender: Male
NPI: 1063701068


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


MATERNAL AND FETAL **MEDICINE**


MELBER, DORA

Provider ID: 296992
Board Certified Specialty: No
DORA J MELBER


 25500 MEDICAL CENTER DR


MURRIETA, CA 92562

 *Phone: (858) 966-6710*
Fax: (858) 966-6711

 *After Hours Phone: (858) 966-6710*

Provider Gender: Female
NPI: 1124413026

 *Provider English Spoken: Y*



 *Provider Language(s)*
Spoken: Hungarian, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT*


PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

MATERNAL AND FETAL **MEDICINE**

MELBER, DORA

Provider ID: 296988
Board Certified Specialty: No
DORA J MELBER


 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 *Phone: (858) 966-6710*
Fax: (858) 966-6711

 *After Hours Phone: (858) 966-6710*

Provider Gender: Female
NPI: 1124413026

 *Provider English Spoken: Y*


 *Provider Language(s)*
Spoken: Hungarian, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

MATERNAL AND FETAL **MEDICINE**

REIMERS, REBECCA

Provider ID: 294649

D3. 专科提供者名录

Board Certified Specialty: No
REBECCA M REIMERS

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294652

Board Certified Specialty: No
REBECCA M REIMERS

25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301820

Board Certified Specialty: No
KATHERINE N NYMAN

25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

Phone: (951) 696-6000

Fax: (951) 696-6105

After Hours Phone: (951)
696-6000

Provider Gender: Female

NPI: 1003260951

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL MEDICINE

WEISS, KATHERINE

Provider ID: 264676

Board Certified Specialty: Yes
KATHERINE J WEISS

25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

Phone: (951) 696-6000

Fax: (951) 696-6105

After Hours Phone: (951)
696-6000

Provider Gender: Female

NPI: 1053541862

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

NEONATAL / PERINATAL MEDICINE

WEST, JULIE

Provider ID: 297071

Board Certified Specialty: No
JULIE E WEST

25500 MEDICAL CENTER

D3. 专科提供者名录

DR
MURRIETA, CA 92562
☎ Phone: (951) 696-6000
Fax: (951) 696-6105
📞 After Hours Phone: (951)
696-6000
Provider Gender: Female
NPI: 1811151848
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

NEUROLOGY

GOLD, JEFFREY

Provider ID: 283334
Board Certified Specialty: No
JEFFREY J GOLD

📍 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
☎ Phone: (951) 600-1640
Fax: (951) 600-1760
📞 After Hours Phone: (951)
600-1640

Provider Gender: Male
NPI: 1568773984
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL

OAKLAND, SHARP MEMORIAL
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

NEUROLOGY

JINDAL, ANUJA

Provider ID: 215521
Board Certified Specialty: No
ANUJA V JINDAL

📍 25170 HANCOCK AVE
MURRIETA, CA 92562
☎ Phone: (951) 600-1640
Fax: (951) 600-1760

📞 After Hours Phone: (951)
600-1640
Provider Gender: Female
NPI: 1194046581

📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

NEUROLOGY

SAHAGIAN, MICHELLE

Provider ID: 283166
Board Certified Specialty: No
MICHELLE L SAHAGIAN

📍 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
☎ Phone: (951) 600-1640
Fax: (951) 600-1760

📞 After Hours Phone: (951)
600-1640
Provider Gender: Female
NPI: 1275604035

📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

NEUROLOGY CHILD

GOLD, JEFFREY

Provider ID: 215691
Board Certified Specialty: No
JEFFREY J GOLD

📍 25170 HANCOCK AVE
MURRIETA, CA 92562
☎ Phone: (951) 600-1640
📞 After Hours Phone: (951)
600-1640

Provider Gender: Male
NPI: 1568773984
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY


D3. 专科提供者名录

CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY CHILD

GUIDO-ESTRADA, NATALIE

Provider ID: 215442

Board Certified Specialty: No
NATALIE M GUIDO-ESTRADA

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1528353521

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM


 Website: N/A


NEUROLOGY CHILD


KIMMCMANUS, OLIVIA

Provider ID: 215666

Board Certified Specialty: No
OLIVIA S KIMMCMANUS

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1174870067

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, CHILDRENS
HOSPITAL OF ORANGE


COUNTY, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


BINDER, PRATIBHA

Provider ID: 273227

Board Certified Specialty: No
PRATIBHA S BINDER

 25405 HANCOCK AVE STE
217

MURRIETA, CA 92562


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174758031

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


BANSAL, PREETI


Provider ID: 215606

Board Certified Specialty: No

PREETI BANSAL

 25170 HANCOCK AVE
MURRIETA, CA 92562


 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1871664631

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN

D3. 专科提供者名录

AND NEWBORNS, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL, TRI CITY MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

BHATIA, SHAGUN

Provider ID: 267317

Board Certified Specialty: No
SHAGUN K BHATIA

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1104237353

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

HENNEIN, LAUREN

Provider ID: 297010

Board Certified Specialty: No
LAUREN M HENNEIN

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1699216010

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY


MOLL, ANGELA

Provider ID: 215687

Board Certified Specialty: No
ANGELA M MOLL

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1861648602

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT


HOSPITAL, SHARP MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL


OAKLAND, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY


MOVAGHAR, MANSOOR

Provider ID: 216415

Board Certified Specialty: No
MANSOOR MOVAGHAR

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 Phone: (858) 309-7702

 After Hours Phone: (858)
309-7702

Provider Gender: Male

NPI: 1497792220

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

D3. 专科提供者名录

DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): MORGAN R BLISS

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


OHALLORAN, HENRY


Provider ID: 215685

Board Certified Specialty: No

HENRY S OHALLORAN


 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1235287947

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY


BLISS, MORGAN

Provider ID: 215684


Board Certified Specialty: No

MORGAN R BLISS

 25170 HANCOCK AVE
MURRIETA, CA 92562


 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1760707657

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY


CARVALHO, DANIELA


Provider ID: 215332

Board Certified Specialty: No

DANIELA CARVALHO


 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1154492916

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY


FRIESEN, TZYYNONG


Provider ID: 244898

Board Certified Specialty: No

TZYYNONG L FRIESEN

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1400

 After Hours Phone: (951)
600-1400

Provider Gender: Female

NPI: 1952740177

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY

D3. 专科提供者名录

JIANG, WEN

Provider ID: 215564

Board Certified Specialty: No
WEN A JIANG

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1659305753

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 254089

Board Certified Specialty: No
ELINA KARI

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1780860536

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 254296

Board Certified Specialty: No
ELINA KARI

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1780860536

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

PATEL, VIJAY

Provider ID: 297034

Board Certified Specialty: No
VIJAY PATEL

25170 HANCOCK AVE STE 1
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1508250747

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY

COLLINS, CATHLEEN

D3. 专科提供者名录

Provider ID: 215733

Board Certified Specialty: No
CATHLEEN A COLLINS

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1205128089

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: LUCILE
SALTER PACKARD CHILDRENS
HOSP, Stanford Health Care,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

BORQUEZ, ALEJANDRO

Provider ID: 284119

Board Certified Specialty: Yes
ALEJANDRO A BORQUEZ

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1114277787

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

DAVIS, CHRISTOPHER

Provider ID: 215743

Board Certified Specialty: No
CHRISTOPHER K DAVIS

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1760691950

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

DUMMER, KIRSTEN

Provider ID: 215645

Board Certified Specialty: No
KRISTEN B DUMMER

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1780642280

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

MCCANDLESS, RACHEL

Provider ID: 215601

Board Certified Specialty: No
RACHEL T MCCANDLESS

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)

D3. 专科提供者名录

600-1640
Provider Gender: Female
NPI: 1487821815
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC CARDIOLOGY

NARAYAN, HARI

Provider ID: 239114
Board Certified Specialty: No
HARI K NARAYAN
📍 25170 HANCOCK AVE
MURRIETA, CA 92562
☎ Phone: (951) 600-1640
🕒 After Hours Phone: (951)
600-1640
Provider Gender: Male
NPI: 1376705707
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC CARDIOLOGY

SILVASEPULVEDA, JOSE

Provider ID: 215679
Board Certified Specialty: No
JOSE A SILVASEPULVEDA
📍 25170 HANCOCK AVE
MURRIETA, CA 92562
☎ Phone: (951) 600-1640
🕒 After Hours Phone: (951)
600-1640
Provider Gender: Male
NPI: 1417222472
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC CARDIOLOGY

WILLIAMS, MATTHEW

Provider ID: 215678
Board Certified Specialty: No
MATTHEW R WILLIAMS
📍 25170 HANCOCK AVE
MURRIETA, CA 92562
☎ Phone: (951) 600-1640
🕒 After Hours Phone: (951)

600-1640
Provider Gender: Male
NPI: 1831423250
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSF BENIOFF CHILDREN'S
HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


DEVERA, GEMMIE

Provider ID: N/A
Board Certified Specialty: Yes
GEMMIE S DEVERA
📍 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
☎ Phone: (951) 696-6124
🕒 After Hours Phone: (951)
696-6124
Provider Gender: Female
NPI: 1366622078
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

D3. 专科提供者名录

American Sign Language (ASL): *Board Certified Specialty: No*
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


PEDIATRIC EMERGENCY MEDICINE

DO, STEPHANIE

Provider ID: 216969

Board Certified Specialty: No
STEPHANIE T DO

 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

 *Phone: (951) 696-6124*
Fax: (951) 696-6293

 *After Hours Phone: (951)
696-6124*

Provider Gender: Female

NPI: 1750513644

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: Martin

*Luther King Jr Community
Hospital, RADY CHILDRENS
HOSPITAL SAN DIEGO*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


PEDIATRIC EMERGENCY MEDICINE

GROSS, MATTHEW

Provider ID: 297173

MATTHEW F GROSS

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 *Phone: (858) 966-7800*
Fax: (858) 966-8231

 *After Hours Phone: (858)
966-7800*

Provider Gender: Male

NPI: 1942223664

 *Provider English Spoken: Y*
Cultural Competency: N


*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM*

 *Website: N/A*


PEDIATRIC EMERGENCY MEDICINE


INDRA, SEAN

Provider ID: 302626

Board Certified Specialty: No

SEAN W INDRA


 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

 *Phone: (951) 696-6124*
Fax: (951) 696-6293

 *After Hours Phone: (951)
696-6124*

Provider Gender: Male

NPI: 1427349091

 *Provider English Spoken: Y*

Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL*

Medi-Cal Open Panel: No
Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


 *Website: N/A*


PEDIATRIC EMERGENCY MEDICINE

KINGDON, JOANNA

Provider ID: 302318

Board Certified Specialty: No
JOANNA E KINGDON

 25170 HANCOCK AVE STE
150
MURRIETA, CA 92562

 *Phone: (858) 966-7800*
Fax: (858) 966-8231

 *After Hours Phone: (858)
966-7800*

Provider Gender: Female

NPI: 1609495399

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

D3. 专科提供者名录

 Hours: SU 1:00PM-10:00PM DAVID M MILLS

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM


 Website: N/A


PEDIATRIC EMERGENCY **MEDICINE**

MESIWALA, ADNAN

Provider ID: 275655

Board Certified Specialty: No
ADNAN K MESIWALA

 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562


 Phone: (951) 696-6161

Fax: (951) 696-6105

 After Hours Phone: (951)
696-6161

Provider Gender: Male

NPI: 1528483955

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Gujarati


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**


MILLS, DAVID

Provider ID: 302147

Board Certified Specialty: No

 25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

 Phone: (951) 696-6124

Fax: (951) 696-6293

 After Hours Phone: (951)
696-6124

Provider Gender: Male

NPI: 1194145946

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**


OZCAN, ALI

Provider ID: 287924


Board Certified Specialty: No
ALI K OZCAN

 25500 MEDICAL CENTER
DR

MURRIETA, CA 92562


 Phone: (951) 696-6124


Fax: (951) 696-6293

 After Hours Phone: (951)
696-6124

Provider Gender: Male

NPI: 1265867683

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Turkish


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, LOMA LINDA
UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**


PARK, BRIAN

Provider ID: 302353

Board Certified Specialty: No
BRIAN L PARK

 25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

 Phone: (951) 696-6124

Fax: (951) 696-6293

 After Hours Phone: (951)
696-6124

Provider Gender: Male

NPI: 1710418744


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

D3. 专科提供者名录

PEDIATRIC EMERGENCY MEDICINE

RANASURIYA, DUNISHA

Provider ID: 216972

Board Certified Specialty: No
DUNISHA G RANASURIYA

📍 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
☎ Phone: (951) 696-6161
📞 After Hours Phone: (951)
696-6161

Provider Gender: Female
NPI: 1740468057

🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

SCHROTER, STEPHANIE

Provider ID: 243831

Board Certified Specialty: No
STEPHANIE SCHROTER

📍 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
☎ Phone: (951) 696-6124
📞 After Hours Phone: (951)
696-6124

Provider Gender: Female

NPI: 1073951828

🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

SHETH, SARIKA

Provider ID: 248172

Board Certified Specialty: No
SARIKA K SHETH

📍 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
☎ Phone: (951) 696-6124
Fax: (951) 696-6293

📞 After Hours Phone: (951)
696-6124

Provider Gender: Female
NPI: 1336503234

🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

SOUDER, CHRISTOPHER

Provider ID: 301634

Board Certified Specialty: Yes
CHRISTOPHER D SOUDER

📍 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
☎ Phone: (951) 600-1640
Fax: (951) 600-1760

📞 After Hours Phone: (951)
600-1640

Provider Gender: Male
NPI: 1851540199

🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND

Medi-Cal Open Panel: No
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

TANG, ANDREW

Provider ID: 294678

Board Certified Specialty: No
ANDREW S TANG

📍 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
☎ Phone: (951) 696-6124
Fax: (951) 696-6293

D3. 专科提供者名录

☎ After Hours Phone: (951) 696-6124

Provider Gender: Male

NPI: 1184071516

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

TRAN, THERESA

Provider ID: 301835

Board Certified Specialty: No
THERESA T TRAN

📍 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

☎ Phone: (951) 696-6124
Fax: (951) 696-6293

☎ After Hours Phone: (951)
696-6124

Provider Gender: Female
NPI: 1417496985

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST

HEALTHCARE RANCHO
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

VEGA, CAROLINA

Provider ID: 309972

Board Certified Specialty: No
CAROLINA VEGA

📍 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

☎ Phone: (951) 696-6161
Fax: (951) 696-6293

☎ After Hours Phone: (951)
696-6161

Provider Gender: Female
NPI: 1427442086

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PEDIATRIC ENDOCRINOLOGY

SINGH, PUJA

Provider ID: 302819

Board Certified Specialty: No
PUJA SINGH

📍 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

☎ Phone: (951) 600-1640
Fax: (951) 600-1760

☎ After Hours Phone: (951)
600-1640

Provider Gender: Female
NPI: 1841721172

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC

GASTROENTEROLOGY

CHU, CHRISTOPHER

Provider ID: 301640

Board Certified Specialty: No
CHRISTOPHER CHU

📍 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562




☎ Phone: (951) 600-1640
Fax: (951) 600-1760

☎ After Hours Phone: (951)
600-1640






Provider Gender: Male
NPI: 1912369273



☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish, Yue

D3. 专科提供者名录


Chinese
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A



PEDIATRIC PULMONOLOGY **LENHART-PENDERGRASS,** **PATRICIA**




Provider ID: 294382
Board Certified Specialty: No
PATRICIA M
LENHART-PENDERGRASS
 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
 Phone: (951) 600-1640
Fax: (951) 600-1760
 After Hours Phone: (951)
600-1640
Provider Gender: Female
NPI: 1144615659
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC PULMONOLOGY **RAO, APARNA**



Provider ID: 215528
Board Certified Specialty: No
APARNA R RAO
 25170 HANCOCK AVE
MURRIETA, CA 92562
 Phone: (951) 600-1640
Fax: (951) 600-1760
 After Hours Phone: (951)
600-1640







Provider Gender: Female
NPI: 1649222340
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRICS






LOPEZ, XIMENA

Provider ID: 302857
Board Certified Specialty: No
XIMENA LOPEZ
 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
 Phone: (951) 600-1640

Fax: (951) 600-1760
 After Hours Phone: (951)
600-1640
Provider Gender: Female
NPI: 1740316405
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRICS

NGO, MAI

Provider ID: 302112
Board Certified Specialty: No
MAI P NGO
 25170 HANCOCK AVE STE 1
MURRIETA, CA 92562
 Phone: (951) 600-1640
Fax: (951) 600-1760
 After Hours Phone: (951)
600-1640
Provider Gender: Female
NPI: 1508910787
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, UCSF
MEDICAL CENTER, RADY
CHILDRENS HOSPITAL SAN
DIEGO

D3. 专科提供者名录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS


PATTERSON, MARY


Provider ID: 215677

Board Certified Specialty: No

MARY E PATTERSON

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1912112020

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS


VARGASTRUJILLO, MARCELA


Provider ID: 215602

Board Certified Specialty: No

MARCELA VARGASTRUJILLO

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1952534091

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICAL MEDICINE /

REHABILITATION


ALGRA, JEFFREY

Provider ID: 215644

Board Certified Specialty: No

JEFFREY ALGRA

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1457664518

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICAL MEDICINE /

REHABILITATION


BIFFL, SUSAN

Provider ID: 283113


Board Certified Specialty: No

SUSAN E BIFFL

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1366589640

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICAL MEDICINE /

D3. 专科提供者名录

REHABILITATION

DALAL, PRITHA

Provider ID: 215665

Board Certified Specialty: No
PRITHA B DALAL MD

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1609017532

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICAL MEDICINE / REHABILITATION

RYAN, KYLE

Provider ID: 275662

Board Certified Specialty: No
KYLE J RYAN

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)

600-1640

Provider Gender: Male

NPI: 1447645742

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICAL MEDICINE / REHABILITATION

SCOTT-WYARD, PHOEBE

Provider ID: 283086

Board Certified Specialty: No
PHOEBE R SCOTT-WYARD

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1336356203

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICAL MEDICINE / REHABILITATION

SKALSKY, ANDREW

Provider ID: 215522

Board Certified Specialty: No
ANDREW J SKALSKY

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1487635272

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

ANWAR, YASMIN

Provider ID: 300845

Board Certified Specialty: Yes
YASMIN ANWAR

25495 MEDICAL CENTER
DR STE 200

MURRIETA, CA 92562

Phone: (951) 304-7546

D3. 专科提供者名录

Fax: (951) 696-5872

☎ After Hours Phone: (951)
304-7546

Provider Gender: Female

NPI: 1588602247

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Persian, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE

Provider ID: 302453

Board Certified Specialty: No

ANNETTE A RODRIGUES

📍 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

☎ Phone: (951) 600-1640

Fax: (951) 600-1760

☎ After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1205381845

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): ☎ After Hours Phone: (951)
677-1111

Provider Gender: Male

NPI: 1144615337

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PULMONARY DISEASES

KUMAR, AVNEE

Provider ID: 300014

Board Certified Specialty: No

AVNEE J KUMAR

📍 25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1750745394

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PULMONARY DISEASES

SURI, RAJAT

Provider ID: 283350

Board Certified Specialty: No

RAJAT SURI

📍 25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

☎ Phone: (951) 677-1111

Fax: (951) 677-9757

SURGERY GENERAL

FAIRBANKS, TIMOTHY

Provider ID: 246979

Board Certified Specialty: No

TIMOTHY J FAIRBANKS

📍 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

☎ Phone: (951) 600-1640

☎ After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1407010556

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL

OAKLAND

D3. 专科提供者名录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY GENERAL


KLING, KAREN


Provider ID: 215583

Board Certified Specialty: No

KAREN M KLING

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1982775144

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MARY BIRCH HOSP
FOR WOMEN AND

NEWBORNS, NATIONAL
NAVAL MED CTR, SHARP
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL


VASCULAR


HOWE, STEVEN

Provider ID: 206761

Board Certified Specialty: No
STEVEN C HOWE

 28062 BAXTER RD
MURRIETA, CA 92563

 Phone: (877) 558-6248

 After Hours Phone: (877)
558-6248

Provider Gender: Male

NPI: 1497702740

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, TRI
CITY MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC


CHENG, YU-TSUN


Provider ID: 301902


Board Certified Specialty: No

YU-TSUN CHENG

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1992982854

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST

HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC


UPASANI, VIDYADHAR

Provider ID: 283160

Board Certified Specialty: No
VIDYADHAR V UPASANI

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 Phone: (951) 600-1640

 Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1548417652

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

D3. 专科提供者名录

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



SURGERY PEDIATRIC

THANGARAJAH, HARIHARAN

Provider ID: 215420

Board Certified Specialty: No
HARIHARAN THANGARAJAH

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640
 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1598979593

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY THORACIC


HOWE, STEVEN

Provider ID: 210169

Board Certified Specialty: No
STEVEN C HOWE

 41011 CALIFORNIA OAKS
RD STE 104

MURRIETA, CA 92562

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497702740

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON, TRI
CITY MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY THORACIC


POLLEMA, TRAVIS


Provider ID: 210577

Board Certified Specialty: No

TRAVIS L POLLEMA

 41011 CALIFORNIA OAKS
RD STE 104

MURRIETA, CA 92562
 Phone: (858) 657-7777
Fax: (888) 539-8781

 After Hours Phone: (858)
657-7777

Provider Gender: Male

NPI: 1871752956

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NATIONAL CITY

CERTIFIED NURSE


PRACTITIONER

CUNNINGHAM, ISIS

Provider ID: 302115

Board Certified Specialty: No
ISIS Y CUNNINGHAM

 655 EUCLID AVE STE 205
NATIONAL CITY, CA 91950

 Phone: (619) 470-1945
Fax: (619) 475-5048

 After Hours Phone: (619)
470-1945

Provider Gender: Female


NPI: 1770124927


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

DE CASTRO, SHARLENE

D3. 专科提供者名录

JOYCE

Provider ID: 299158

Board Certified Specialty: No
SHARLENE JOYCE J DE

CASTRO

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 339-5657

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1750019824

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-6:00PM
F 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

DRISCOLL, SUSAN

Provider ID: 301775

Board Certified Specialty: No
SUSAN D DRISCOLL

330 E 8TH ST
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1477755684

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

DRISCOLL, SUSAN

Provider ID: 301774

Board Certified Specialty: No
SUSAN D DRISCOLL

340 E 8TH ST
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1477755684

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

GULLY, MICHELLE

Provider ID: 299422

Board Certified Specialty: No
MICHELLE D GULLY

1428 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 434-1613

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1801557947

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

LIM, IMELDA

Provider ID: 294308

Board Certified Specialty: No
IMELDA B LIM

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 474-3919

After Hours Phone: (844)
200-2426

Provider Gender: Female


NPI: 1093130395

Provider English Spoken: Y
Provider Language(s)

D3. 专科提供者名录

Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MIDORO, ABEGAILLE

Provider ID: 303830

Board Certified Specialty: No
ABEGAILLE A MIDORO


 2835 HIGHLAND AVE STE A
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426
Fax: (619) 477-1286

 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1952925851

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MIDORO, ABEGAILLE

Provider ID: 303827

Board Certified Specialty: No
ABEGAILLE A MIDORO


 2835 HIGHLAND AVE STE B
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426
Fax: (619) 477-2628

 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1952925851

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

NOVENO, HILARIO JR

Provider ID: 297836

Board Certified Specialty: No
HILARIO JR C NOVENO JR

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950


 Phone: (844) 200-2426
Fax: (619) 474-4008

 After Hours Phone: (844)
200-2426

Provider Gender: Male

NPI: 1124486865

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic, Spanish,
Tagalog


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-6:00PM

 Website: N/A


CHIROPRACTOR

GILIBERTO, JOSEPH

Provider ID: 291548

Board Certified Specialty: No
JOSEPH A GILIBERTO

 2835 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426
Fax: (619) 399-5959

 After Hours Phone: (844)
200-2426

Provider Gender: Male

NPI: 1821463159

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N



Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D3. 专科提供者名录


 Hours: M-F
8:00AM-5:00PM
 Website: N/A

DERMATOLOGY


LIN, SHINKO

Provider ID: 306319
Board Certified Specialty: Yes
SHINKO K LIN

 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950


 Phone: (619) 267-8303


Fax: (619) 267-4835

 After Hours Phone: (619)
267-8303

Provider Gender: Female

NPI: 1205130036

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-4:30PM


 Website: N/A

DERMATOLOGY

LIN, SHINKO

Provider ID: 308216
Board Certified Specialty: Yes
SHINKO K LIN

 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950


 Phone: (619) 267-8303

Fax: (619) 267-4835

 After Hours Phone: (619)
267-8303

Provider Gender: Female

NPI: 1205130036

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-4:30PM

 Website: N/A


FAMILY PRACTICE

NAVARRO, VANESSAMARIA

Provider ID: 301784

Board Certified Specialty: No
VANESSAMARIA M NAVARRO

 2400 E 8TH ST
NATIONAL CITY, CA 91950


 Phone: (619) 662-4100


Fax: (619) 259-2807

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1952563421

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Filipino, Spanish,
Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


FAMILY PRACTICE

ROBERTS, POMAI

Provider ID: 301278

Board Certified Specialty: No
POMAI ROBERTS

 1136 D AVE
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 336-2323

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1023278314

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM

SA 8:00AM-2:30PM

 Website: N/A

INTERVENTIONAL

CARDIOLOGY

D3. 专科提供者名录

CAMACHO, BENJAMIN

Provider ID: 290137

Board Certified Specialty: No
BENJAMIN O CAMACHO

1615 SWEETWATER RD STE
D
NATIONAL CITY, CA 91950

Phone: (619) 474-2233

Fax: (619) 474-2211

After Hours Phone: (619)
474-2233

Provider Gender: Male

NPI: 1699759936

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

INTERVENTIONAL CARDIOLOGY

CAMACHO, BENJAMIN

Provider ID: 269129

Board Certified Specialty: No
BENJAMIN O CAMACHO

1615 SWEETWATER RD
NATIONAL CITY, CA 91950

Phone: (619) 474-2233

Fax: (619) 474-2211

After Hours Phone: (619)
474-2233

Provider Gender: Male

NPI: 1699759936

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-6:00PM

Website: N/A

Email:

BCAMACHOMD@SBCGLOBAL.NET

INTERVENTIONAL CARDIOLOGY

CAMACHO, BENJAMIN

Provider ID: 35045

Board Certified Specialty: No
BENJAMIN O CAMACHO

1615 SWEETWATER RD
NATIONAL CITY, CA 91950

Phone: (619) 474-2233

Fax: (619) 474-2211

After Hours Phone: (619)
474-2233

Provider Gender: Male

NPI: 1699759936

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-6:00PM

Website: N/A

Email:

BCAMACHOMD@SBCGLOBAL.NET

INTERVENTIONAL CARDIOLOGY

DAMANI, SAMIR

Provider ID: 303098

Board Certified Specialty: No
SAMIR B DAMANI

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Phone: (858) 800-2480

Fax: (858) 216-1908

After Hours Phone: (858)
800-2480

Provider Gender: Male

NPI: 1457379372

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

D3. 专科提供者名录

 Website: N/A


INTERVENTIONAL CARDIOLOGY

PANDHI, JAY

Provider ID: 269087

Board Certified Specialty: No
JAY N PANDHI

 655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950

 Phone: (619) 512-1915

Fax: (619) 512-1913

 After Hours Phone: (619)
512-1915

Provider Gender: Male

NPI: 1407997406

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR, SCRIPPS MERCY
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL CARDIOLOGY


ROUGH, STEVEN

Provider ID: 301320


Board Certified Specialty: No
STEVEN J ROUGH

 1415 E 8TH ST STE 6

NATIONAL CITY, CA 91950


 Phone: (619) 434-4288

Fax: (619) 434-4315

 After Hours Phone: (619)
434-4288

Provider Gender: Male

NPI: 1386821460

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERVENTIONAL CARDIOLOGY

ROUGH, STEVEN


Provider ID: 302043

Board Certified Specialty: No
STEVEN J ROUGH

 1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950


 Phone: (619) 434-4288

Fax: (619) 434-4315

 After Hours Phone: (619)
434-4288

Provider Gender: Male

NPI: 1386821460


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERVENTIONAL CARDIOLOGY

ROUGH, STEVEN

Provider ID: 302044

Board Certified Specialty: No
STEVEN J ROUGH

 1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950

 Phone: (619) 434-4288

Fax: (619) 434-4315

 After Hours Phone: (619)
434-4288

Provider Gender: Male

NPI: 1386821460


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

D3. 专科提供者名录

8:00AM-5:00PM

 Website: N/A


NEPHROLOGY

COMUNALE, RODERICK

Provider ID: 290784

Board Certified Specialty: No
RODERICK A COMUNALE

 502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950


 Phone: (858) 551-0276

Fax: (858) 454-8796

 After Hours Phone: (858)
551-0276

Provider Gender: Male

NPI: 1568462109

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, PARADISE

VALLEY HOSPITAL,

ALVARADO HOSPITAL LLC,

SCRIPPS MERCY HOSPITAL,

KINDRED HOSPITAL SAN

DIEGO, SELECT SPECIALTY

HOSPITAL SAN DIEGO, SELECT

SPECIALTY HOSPITAL SAN

DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 21\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


ASLIAN, AZITA

Provider ID: 301797

Board Certified Specialty: No

AZITA ASLIAN

 1136 D AVE
NATIONAL CITY, CA 91950


 Phone: (619) 662-4100


Fax: (619) 336-2323

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1851667661

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Faroese, Fataleka

Cultural Competency: N

Hospital Affiliation: Hemet

Global Medical Center, Menifee

Global Medical Center,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY

HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

 Website: N/A

OBSTETRICS / GYNECOLOGY

DELROSARIO, GELEN


Provider ID: 206092

Board Certified Specialty: No

GELEN R DELROSARIO

 502 EUCLID AVE STE 300

NATIONAL CITY, CA 91950

 Phone: (619) 475-1261


Fax: (619) 475-1267

 After Hours Phone: (619)
475-1261

Provider Gender: Female

NPI: 1255643474

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP


CHULA VISTA MED CTR,


PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

Email:

pquiroz_80@hotmail.com

OBSTETRICS / GYNECOLOGY


DELROSARIO, GELEN

Provider ID: 269247

Board Certified Specialty: No

GELEN R DELROSARIO

 502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950

 Phone: (619) 475-1261


Fax: (619) 475-1267

 After Hours Phone: (619)
475-1261

Provider Gender: Female

NPI: 1255643474

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish, Tagalog


D3. 专科提供者名录


Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
9:00AM-5:00PM

 *Website: N/A*

Email:

pquiroz_80@hotmail.com


OBSTETRICS / GYNECOLOGY

DELROSARIO, GELEN

Provider ID: 257478

Board Certified Specialty: No
GELEN R DELROSARIO

 *502 EUCLID AVE STE 300*
NATIONAL CITY, CA 91950

 *Phone: (619) 475-1261*

Fax: (619) 475-1267

 *After Hours Phone: (619)*
475-1261

Provider Gender: Female

NPI: 1255643474

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT*

PROVIDER

 *Hours: M-F*
9:00AM-5:00PM

 *Website: N/A*

Email:

pquiroz_80@hotmail.com


OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER


Provider ID: 302451

Board Certified Specialty: No
JENNIFER J WINESBURG

 *2400 E 8TH ST STE 8*
NATIONAL CITY, CA 91950


 *Phone: (619) 662-4100*

Fax: (619) 259-2807

 *After Hours Phone: (619)*
662-4100

Provider Gender: Female

NPI: 1811162456

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,


DESERT REGIONAL MED CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


OPHTHALMOLOGY

HAIGHT, BRUCE

Provider ID: 269113

Board Certified Specialty: No
BRUCE T HAIGHT

 *655 EUCLID AVE STE 302*
NATIONAL CITY, CA 91950

 *Phone: (800) 898-2020*

Fax: (844) 897-3788

 *After Hours Phone: (800)*
898-2020

Provider Gender: Male

NPI: 1427029628

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

OPTOMETRIST

AOTO, KIM


Provider ID: 268722

Board Certified Specialty: No
KIM N AOTO

 *2240 E PLAZA BLVD STE*
F-G
NATIONAL CITY, CA 91950


 *Phone: (800) 898-2020*


Fax: (844) 897-3788

 *After Hours Phone: (800)*
898-2020




Provider Gender: Female

NPI: 1780935650

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Vietnamese



D3. 专科提供者名录


Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*



OPTOMETRIST

KOO, ANITA

Provider ID: 307113
Board Certified Specialty: No
ANITA K KOO

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
 *Phone: (619) 474-2284*
Fax: (619) 474-3919
 *After Hours Phone: (619)*
474-2284



Provider Gender: Female
NPI: 1669825667
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*




OPTOMETRIST

KOO, ANITA

Provider ID: 307171
Board Certified Specialty: No
ANITA K KOO

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
 *Phone: (619) 474-2284*
Fax: (619) 474-3919

 *After Hours Phone: (619)*
474-2284
Provider Gender: Female
NPI: 1669825667
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999



American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*



OPTOMETRIST

KOO, ANITA

Provider ID: 306903
Board Certified Specialty: No
ANITA K KOO

 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
 *Phone: (619) 425-7755*
Fax: (619) 425-2138

 *After Hours Phone: (619)*
425-7755
Provider Gender: Female
NPI: 1669825667
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999



American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*

8:00AM-5:00PM
 *Website: N/A*




OPTOMETRIST

KOO, ANITA

Provider ID: 304538
Board Certified Specialty: No
ANITA K KOO

 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
 *Phone: (619) 425-7755*
Fax: (619) 425-2138



 *After Hours Phone: (619)*
425-7755
Provider Gender: Female
NPI: 1669825667
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999


American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

PODIATRIST


ATMAR, AKMAL

Provider ID: 269784
Board Certified Specialty: No
AKMAL ATMAR


 2345 E 8TH ST STE 105
NATIONAL CITY, CA 91950
 *Phone: (929) 287-4511*
Fax: (877) 671-6835


 *After Hours Phone: (929)*
287-4511
Provider Gender: Male
NPI: 1558656637
 *Provider English Spoken: Y*

D3. 专科提供者名录

 *Provider Language(s)*
Spoken: Farsi, Persian, Urdu
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
9:00AM-5:00PM

 *Website: N/A*


PODIATRIST

CAINE, SAMUEL

Provider ID: 308212

Board Certified Specialty: No
SAMUEL CAINE

 610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

 *Phone: (619) 292-2493*

Fax: (619) 618-0222

 *After Hours Phone: (619)*
292-2493

Provider Gender: Male

NPI: 1396230298

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: Sharp
Grossmont Hospital, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SHARP CHULA
VISTA MED CTR, SHARP
CORONADO HOSP AND
HEALTHCARE CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


PODIATRIST

CAINE, SAMUEL

Provider ID: 308637

Board Certified Specialty: No
SAMUEL CAINE

 610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

 *Phone: (619) 292-2493*

Fax: (619) 618-0222

 *After Hours Phone: (619)*
292-2493

Provider Gender: Male

NPI: 1396230298

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: Sharp
Grossmont Hospital, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SHARP CHULA
VISTA MED CTR, SHARP
CORONADO HOSP AND
HEALTHCARE CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


PODIATRIST

DAVIDSONIII, JOHN

Provider ID: 129542

Board Certified Specialty: No
JOHN A DAVIDSONIII III

 610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

 *Phone: (619) 427-3481*

Fax: (619) 420-7807

 *After Hours Phone: (619)*
427-3481

Provider Gender: Male

NPI: 1689069874

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
9:00AM-4:30PM

 *Website: N/A*


PULMONARY DISEASES

LIM, ROSEMARIE

Provider ID: 262224

Board Certified Specialty: No
ROSEMARIE S LIM

 610 EUCLID AVE STE 202
NATIONAL CITY, CA 91950

 *Phone: (619) 472-4900*

D3. 专科提供者名录

Fax: (619) 472-4910

☎ After Hours Phone: (619) 472-4900

Provider Gender: Female

NPI: 1841303419

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Chinese, Mandarin, Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
SHARP CORONADO HOSP

AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-4:30PM

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON

Provider ID: 304531

Board Certified Specialty: No
BRANDON G CHENG

📍 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

☎ Phone: (619) 482-3000
Fax: (619) 695-0050

☎ After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1336894724

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
7:00AM-7:00PM
F 7:00AM-5:00PM
SA 8:00AM-1:00PM

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA

Provider ID: 299888

Board Certified Specialty: No

ANDREA L JIMENEZ

📍 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

☎ Phone: (619) 482-3000
Fax: (619) 482-3001

☎ After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1407440670

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 7:00AM-7:00PM

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI

Provider ID: 287102

Board Certified Specialty: No
PRACHI KARANDE

📍 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

☎ Phone: (619) 482-3000
Fax: (619) 482-3001

☎ After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1699357525

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
7:00AM-6:00PM

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA

Provider ID: 305011

Board Certified Specialty: No
TIA NGUYEN

📍 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

☎ Phone: (619) 482-3000
Fax: (619) 695-0050

☎ After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1457136269

☐ Provider English Spoken: Y
Cultural Competency: N


D3. 专科提供者名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
7:00AM-7:00PM

F 7:00AM-4:00PM

 Website: N/A

REGISTERED PHYSICAL


THERAPIST

NGUYEN, TIA

Provider ID: 305012

Board Certified Specialty: No
TIA NGUYEN

 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

 Phone: (619) 482-3000

Fax: (619) 695-0050

 After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1457136269


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
7:00AM-7:00PM

F 7:00AM-4:00PM

 Website: N/A

REGISTERED PHYSICAL


THERAPIST

NOVENCIDO, ANDREW

Provider ID: 301996

Board Certified Specialty: No
ANDREW NOVENCIDO

 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

 Phone: (619) 482-3000

Fax: (619) 695-0050

 After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1447723937


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL


THERAPIST

NOVENCIDO, ANDREW

Provider ID: 286784

Board Certified Specialty: No
ANDREW NOVENCIDO

 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

 Phone: (619) 482-3000

Fax: (619) 695-0050

 After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1447723937


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL


THERAPIST

SPARKS, TODD

Provider ID: 301110

Board Certified Specialty: No
TODD M SPARKS

 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

 Phone: (619) 482-3000

Fax: (619) 695-0050

 After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1265481139

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M 7:00AM-7:00PM
TU 7:00AM-0:00PM

W-TH 7:00AM-7:00PM

F 7:00AM-0:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST

SUGGS, SARAH

Provider ID: 298366

Board Certified Specialty: No
SARAH SUGGS

D3. 专科提供者名录

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Phone: (619) 482-3000
Fax: (619) 482-3001

After Hours Phone: (619)
482-3000

Provider Gender: Female
NPI: 1083353650

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7:00AM-7:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

SUGGS, SARAH

Provider ID: 301430

Board Certified Specialty: No
SARAH SUGGS

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Phone: (619) 482-3000
Fax: (619) 482-3001

After Hours Phone: (619)
482-3000

Provider Gender: Female
NPI: 1083353650

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7:00AM-7:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

VILLANUEVA, GIOVANNI

Provider ID: 301533

Board Certified Specialty: No
GIOVANNI X VILLANUEVA

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Phone: (619) 482-3000
Fax: (619) 695-0050

After Hours Phone: (619)
482-3000

Provider Gender: Male
NPI: 1063046878

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7:00AM-7:00PM

Website: N/A

OCEANSIDE

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY

Provider ID: 308400

Board Certified Specialty: No
ROY C BROWNLOW

2125 S EL CAMINO REAL
STE 103

OCEANSIDE, CA 92054
Phone: (760) 610-0522

Fax: (760) 610-0523

After Hours Phone: (760)
610-0522

Provider Gender: Male
NPI: 1205949914

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,

SHARP CORONADO HOSP
AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY

Provider ID: 308111

Board Certified Specialty: No
ROY C BROWNLOW

2125 S EL CAMINO REAL
STE 103

OCEANSIDE, CA 92054
Phone: (760) 610-0522

Fax: (760) 610-0523

After Hours Phone: (760)
610-0522

Provider Gender: Male
NPI: 1205949914

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

D3. 专科提供者名录

Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility:* CONTACT
PROVIDER

 *Hours:* M-F
8:00AM-5:00PM

 *Website:* N/A


ANESTHESIOLOGY PAIN MANAGEMENT


DAIRO, BRANDON

Provider ID: 299882

Board Certified Specialty: No
BRANDON DAIRO

 3231 WARING CT STE K
OCEANSIDE, CA 92056

 *Phone:* (760) 607-5350

 *After Hours Phone:* (760)
607-5350

Provider Gender: Male

NPI: 1689092470

 *Provider English Spoken:* Y
Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA


Medi-Cal Open Panel: Yes


Min/Max Age: 18\100

American Sign Language (ASL):

N

 *Accessibility:* CONTACT
PROVIDER

 *Hours:* M-F
8:00AM-5:00PM


 *Website:* N/A

CERTIFIED ACUPUNCTURIST GONZALEZ, ANDRES

Provider ID: 308047

Board Certified Specialty: No
ANDRES D GONZALEZ

 3988 VISTA WAY STE G
OCEANSIDE, CA 92056


 *Phone:* (760) 736-6767


Fax: (760) 736-6744

 *After Hours Phone:* (760)
736-6767

Provider Gender: Male

NPI: 1841857729

 *Provider English Spoken:* Y

 *Provider Language(s)
Spoken:* Chinese, Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 *Accessibility:* CONTACT
PROVIDER

 *Hours:* M-F
8:00AM-5:00PM

 *Website:* N/A


CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE

Provider ID: 306979

Board Certified Specialty: No
MONIQUE APRIL

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 *Phone:* (760) 631-5000

Fax: (760) 414-3892

 *After Hours Phone:* (760)

631-5000

Provider Gender: Female

NPI: 1093288730

 *Provider English Spoken:* Y

 *Provider Language(s)
Spoken:* Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility:* CONTACT
PROVIDER

 *Hours:* M-F
8:00AM-5:00PM

 *Website:* N/A


CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE

Provider ID: 306978

Board Certified Specialty: No
MONIQUE APRIL

 517 N HORNE ST
OCEANSIDE, CA 92054

 *Phone:* (760) 631-5000


Fax: (760) 414-3892

 *After Hours Phone:* (760)
631-5000

Provider Gender: Female

NPI: 1093288730

 *Provider English Spoken:* Y

 *Provider Language(s)
Spoken:* Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility:* CONTACT
PROVIDER

 *Hours:* M-F

D3. 专科提供者名录

8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE

PRACTITIONER

BALDWIN, ANDREA

Provider ID: 294937

Board Certified Specialty: No

ANDREA M BALDWIN

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1497202121

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 2\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:00AM-5:00PM
W 8:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-6:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

BINETTE, DONYA

Provider ID: 303861

Board Certified Specialty: No

DONYA L BINETTE

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1427325166

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:30PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 301313

Board Certified Specialty: No

SAMUEL U CHILAKA

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1679140644

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH

8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 301315

Board Certified Specialty: No

SAMUEL U CHILAKA

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1679140644

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 301314

Board Certified Specialty: No

SAMUEL U CHILAKA

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

D3. 专科提供者名录

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1679140644

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 307299

Board Certified Specialty: No
TYLER D CHRISTY

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1689094971

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 303930

Board Certified Specialty: No
TYLER D CHRISTY

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1689094971

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 303931

Board Certified Specialty: No
TYLER D CHRISTY

📍 4700 N RIVER RD
OCEANSIDE, CA 92057

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1689094971

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

CISZEK, ALEXANDRA

Provider ID: 306002

Board Certified Specialty: No
ALEXANDRA N CISZEK

📍 605 CROUCH ST
OCEANSIDE, CA 92054

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

☎ After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1578220612

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 2\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

GENOVESE, KELLY

D3. 专科提供者名录

Provider ID: 301304

Board Certified Specialty: No
KELLY K GENOVESE

2210 MESA DR STE 5
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1326052457

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): JESSICA A HERNANDEZ

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HEAD, KRISTIN

Provider ID: 268660

Board Certified Specialty: No
KRISTIN N HEAD

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1699078923

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302300

Board Certified Specialty: No

JESSICA A HERNANDEZ

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302298

Board Certified Specialty: No

JESSICA A HERNANDEZ

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 304495

Board Certified Specialty: No

JESSICA A HERNANDEZ

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT

D3. 专科提供者名录

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 304494
Board Certified Specialty: No
JESSICA A HERNANDEZ

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302299
Board Certified Specialty: No
JESSICA A HERNANDEZ

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000
Provider Gender: Female
NPI: 1013668680
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HUERTA, STEVEN

Provider ID: 307932
Board Certified Specialty: No
STEVEN T HUERTA

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1558607440

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HUERTA, STEVEN

Provider ID: 307934
Board Certified Specialty: No
STEVEN T HUERTA

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1558607440

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HUERTA, STEVEN

Provider ID: 307935
Board Certified Specialty: No
STEVEN T HUERTA

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1558607440

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes


D3. 专科提供者名录

Min/Max Age: 0\999

American Sign Language (ASL):  517 N HORNE ST

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


KELLEHER, BRIDGET


Provider ID: 298084

Board Certified Specialty: No

BRIDGET M KELLEHER

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): 

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


KELLEHER, BRIDGET


Provider ID: 298081

Board Certified Specialty: No

BRIDGET M KELLEHER


 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): 

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


KELLEHER, BRIDGET


Provider ID: 298082

Board Certified Specialty: No

BRIDGET M KELLEHER

 818 PIER VIEW WAY
OCEANSIDE, CA 92054


 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): 

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


LANG, LESLIE



Provider ID: 308045

Board Certified Specialty: No

LESLIE A LANG

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1457366130

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): 

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MONTGOMERY JR, KEITH

Provider ID: 295286

Board Certified Specialty: No

KEITH MONTGOMERY JR JR

D3. 专科提供者名录

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1790978617

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:00AM-5:00PM
W 10:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MONTGOMERY JR, KEITH

Provider ID: 295285

Board Certified Specialty: No

KEITH MONTGOMERY JR JR

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1790978617

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:00AM-5:00PM
W 10:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MONTGOMERY JR, KEITH

Provider ID: 295287

Board Certified Specialty: No

KEITH MONTGOMERY JR JR

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1790978617

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:00AM-5:00PM
W 10:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

PRITZKER, JOELY

Provider ID: 239772

Board Certified Specialty: No

JOELY R PRITZKER

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619384351

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

RAYTA, NICOLE

Provider ID: 304682

Board Certified Specialty: No

NICOLE RAYTA

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1689027542

Provider English Spoken: Y
Cultural Competency: N


D3. 专科提供者名录

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

SANACORA, RACHEL

Provider ID: 297730

Board Certified Specialty: No
RACHEL SANACORA

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1000
Fax: (760) 547-1021

 After Hours Phone: (760)
547-1000

Provider Gender: Female

NPI: 1548987985


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

SANTIAGO, AMANDA

Provider ID: 242607

Board Certified Specialty: No
AMANDA C SANTIAGO


 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619488731

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295506

Board Certified Specialty: No
CHRISTOPHER TAYLOR


 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1851747166

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-2:00PM
SA 9:00AM-4:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295503

Board Certified Specialty: No
CHRISTOPHER TAYLOR

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1851747166


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-2:00PM
SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER

D3. 专科提供者名录

Provider ID: 295505

Board Certified Specialty: No
CHRISTOPHER TAYLOR

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1851747166

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-2:00PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

KELLY, KATHERINE

Provider ID: 290312

Board Certified Specialty: No
KATHERINE M KELLY

2210 MESA DR STE 5
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1801134275

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

PERLMAN, TAMARA

Provider ID: 290733

Board Certified Specialty: No
TAMARA L PERLMAN

2210 MESA DR STE 5
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1730274374

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CHIROPRACTOR

ANDREWS, BRAD

Provider ID: 290542

Board Certified Specialty: No
BRAD R ANDREWS

619 CROUCH ST
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1750791745

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CHIROPRACTOR

JU, NATHANIEL

Provider ID: 290221

Board Certified Specialty: No
NATHANIEL JU

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1972883882

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

D3. 专科提供者名录

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


DERMATOLOGY

BROWN, REGINA

Provider ID: 309981

Board Certified Specialty: No
REGINA E BROWN

 3629 VISTA WAY
OCEANSIDE, CA 92056


 Phone: (760) 757-7546

Fax: (760) 828-9138

 After Hours Phone: (760)
757-7546

Provider Gender: Female

NPI: 1801424692

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

PHAM, LILY

Provider ID: 304934

Board Certified Specialty: No
LILY M PHAM

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056


 Phone: (760) 547-1000

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1000

Provider Gender: Female

NPI: 1811423072

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


FAMILY PRACTICE

SALAMANCA, OMAR

Provider ID: 295469

Board Certified Specialty: No
OMAR SALAMANCA

 605 CROUCH ST
OCEANSIDE, CA 92054


 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1083000947

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: KERN

MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:30PM


 Website: N/A


GASTROENTEROLOGY

NOVO, MEGAN


Provider ID: 308044

Board Certified Specialty: No
MEGAN E NOVO

 3923 WARING RD STE A
OCEANSIDE, CA 92056

 Phone: (760) 724-8782

Fax: (760) 842-7801

 After Hours Phone: (760)
724-8782

Provider Gender: Female

NPI: 1770961971

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL
ENCINITAS, UCSD LA JOLLA

JOHN SALLY THORNTON,
SCRIPPS MERCY HOSPITAL

CHULA VISTA, UNIVERSITY OF
CALIFORNIA IRVINE MED CTR,

UCSD MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:00AM-4:30PM

D3. 专科提供者名录

 Website: N/A


INTERNAL MEDICINE

SHABANIAN, LEILA

Provider ID: 307215

Board Certified Specialty: No
LEILA SHABANIAN

 818 PIER VIEW WAY
OCEANSIDE, CA 92054


 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013963073

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, French,
Persian

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, TRI CITY MEDICAL CTR,
PALOMAR HEALTH, SCRIPPS
MERCY HOSPITAL, PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU

8:00AM-5:00PM

W 8:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

INTERNAL MEDICINE


SHABANIAN, LEILA

Provider ID: 307537

Board Certified Specialty: No

LEILA SHABANIAN

 517 N HORNE ST
OCEANSIDE, CA 92054


 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013963073

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, French,
Persian

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, TRI CITY MEDICAL CTR,
PALOMAR HEALTH, SCRIPPS
MERCY HOSPITAL, PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL

MEDICINE


MELBER, DORA

Provider ID: 296991

Board Certified Specialty: No

DORA J MELBER

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (858) 966-6710

Fax: (858) 966-6711


 After Hours Phone: (858)

966-6710

Provider Gender: Female

NPI: 1124413026

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hungarian, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL

MEDICINE


REIMERS, REBECCA

Provider ID: 294651

Board Certified Specialty: No

REBECCA M REIMERS

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO


D3. 专科提供者名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE

Provider ID: 264686

Board Certified Specialty: No
ALVIE C RICHARDSON

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (858) 966-6710
Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1154305977


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, Sharp Grossmont
Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE

Provider ID: 205437

Board Certified Specialty: No
WADE D SCHWENDEMANN

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (858) 966-6710
Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1477563302

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, TRI CITY
MEDICAL CTR, Sharp
Grossmont Hospital, Sharp
Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA

Provider ID: 255793

Board Certified Specialty: No
MELISSA L WESTERMANN

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (858) 966-6710
Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female


NPI: 1760730758

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
EARL AND LORRAINE MILLER
CHILDRENS HSP, LONG
BEACH MEMORIAL MED CTR,
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, SHARP
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
Sharp Grossmont Hospital,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE

WILLIAMS, KRISTIN

Provider ID: 206230

Board Certified Specialty: No
KRISTIN M WILLIAMS

 3605 VISTA WAY STE 172

D3. 专科提供者名录

OCEANSIDE, CA 92056
☎ Phone: (858) 966-6710
Fax: (858) 966-6711
🕒 After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1992847131
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, SAN MATEO MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, CALIFORNIA PACIFIC MED CTR, CALIFORNIA PACIFIC MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

NEPHROLOGY

LIU, ANDREW

Provider ID: 308522
Board Certified Specialty: No
ANDREW C LIU
📍 3300 VISTA WAY
OCEANSIDE, CA 92056
☎ Phone: (760) 967-9900
Fax: (760) 967-6769

🕒 After Hours Phone: (760) 967-9900
Provider Gender: Male
NPI: 1710481866
📄 Provider English Spoken: Y
📄 Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 9:00AM-5:00PM
🌐 Website: N/A

NEPHROLOGY

LIU, ANDREW

Provider ID: 305443
Board Certified Specialty: No
ANDREW C LIU
📍 3300 VISTA WAY STE B
OCEANSIDE, CA 92056
☎ Phone: (760) 967-9900
Fax: (760) 967-6769
🕒 After Hours Phone: (760) 967-9900
Provider Gender: Male
NPI: 1710481866
📄 Provider English Spoken: Y
📄 Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 9:00AM-5:00PM
🌐 Website: N/A

NEPHROLOGY

LIU, ANDREW

Provider ID: 301573
Board Certified Specialty: No
ANDREW C LIU
📍 3300 VISTA WAY
OCEANSIDE, CA 92056
☎ Phone: (760) 967-9900
Fax: (760) 967-6769
🕒 After Hours Phone: (760) 967-9900
Provider Gender: Male
NPI: 1710481866
📄 Provider English Spoken: Y
📄 Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 9:00AM-5:00PM
🌐 Website: N/A



NEUROLOGY

JINDAL, ANUJA

Provider ID: 206266

D3. 专科提供者名录

Board Certified Specialty: No
ANUJA V JINDAL

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (760) 547-1020
Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1194046581


 *Provider English Spoken: Y*
Cultural Competency: N


*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*



 *Website: N/A*

NEUROLOGY CHILD

SAHAGIAN, MICHELLE

Provider ID: 206075

Board Certified Specialty: No
MICHELLE L SAHAGIAN

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (760) 547-1020
Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1275604035

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN*


DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*



 *Website: N/A*

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA

Provider ID: 273226

Board Certified Specialty: No
PRATIBHA S BINDER

 4002 VISTA WAY
OCEANSIDE, CA 92056
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174758031

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA*


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*



 *Website: N/A*

OPHTHALMOLOGY

BANSAL, PREETI

Provider ID: 205619



Board Certified Specialty: No
PREETI BANSAL

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (960) 547-1020
Fax: (760) 547-1021

 After Hours Phone: (960)
547-1020

Provider Gender: Female

NPI: 1871664631

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Hindi*


Cultural Competency: N
*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL, TRI CITY MEDICAL
CTR*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

OPHTHALMOLOGY

BHATIA, SHAGUN

Provider ID: 267318

Board Certified Specialty: No
SHAGUN K BHATIA

 3605 VISTA WAY STE 172

D3. 专科提供者名录

OCEANSIDE, CA 92056
☎ Phone: (760) 547-1020
Fax: (760) 547-1021
📞 After Hours Phone: (760) 547-1020
Provider Gender: Female
NPI: 1104237353
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

OPHTHALMOLOGY

HENNEIN, LAUREN

Provider ID: 297013
Board Certified Specialty: No
LAUREN M HENNEIN
📍 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056
☎ Phone: (760) 547-1020
Fax: (760) 547-1021
📞 After Hours Phone: (760) 547-1020
Provider Gender: Female
NPI: 1699216010
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

OPHTHALMOLOGY

JACOBSEN, BRADLEY

Provider ID: 302868
Board Certified Specialty: Yes
BRADLEY H JACOBSEN
📍 3231 WARING CT STE S OCEANSIDE, CA 92056
☎ Phone: (760) 631-6144
Fax: (760) 724-3920
📞 After Hours Phone: (760) 631-6144
Provider Gender: Male
NPI: 1760845184
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

OPHTHALMOLOGY

MOLL, ANGELA



Provider ID: 205509
Board Certified Specialty: No
ANGELA M MOLL
📍 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056
☎ Phone: (760) 547-1020
Fax: (760) 547-1021
📞 After Hours Phone: (760) 547-1020
Provider Gender: Female
NPI: 1861648602
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A




OPHTHALMOLOGY

MOVAGHAR, MANSOOR

Provider ID: 216416
Board Certified Specialty: No
MANSOOR MOVAGHAR
📍 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056
☎ Phone: (760) 547-1020
📞 After Hours Phone: (760)





D3. 专科提供者名录




547-1020
Provider Gender: Male
NPI: 1497792220
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY



OHALLORAN, HENRY




Provider ID: 205887
Board Certified Specialty: No
HENRY S OHALLORAN
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (760) 547-1020
Fax: (760) 547-1021
 After Hours Phone: (760)
547-1020
Provider Gender: Male
NPI: 1235287947
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE









Provider ID: 305308
Board Certified Specialty: No
CATHERINE R SHEILS
 3637 VISTA WAY
OCEANSIDE, CA 92056
 Phone: (760) 758-2008
Fax: (760) 758-2004
 After Hours Phone: (760)
758-2008

Provider Gender: Female
NPI: 1932605649
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY





SONG, DELU

Provider ID: 302871
Board Certified Specialty: No

DELU SONG
 3231 WARING CT STE S
OCEANSIDE, CA 92056
 Phone: (760) 631-6144
Fax: (760) 724-3920
 After Hours Phone: (760)
631-6144
Provider Gender: Male
NPI: 1437689536
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A



OPTOMETRIST

GEE, JENNIFER

Provider ID: 290927
Board Certified Specialty: No
JENNIFER W GEE
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1336589332
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
COMMUNITY REGIONAL




D3. 专科提供者名录

MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC
MEDICAL CENTER - D P APH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
 Website: N/A



OPTOMETRIST **GEE, JENNIFER**

Provider ID: 290210
Board Certified Specialty: No
JENNIFER W GEE

 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000



Provider Gender: Female
NPI: 1336589332

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC
MEDICAL CENTER - D P APH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
 Website: N/A

OPTOMETRIST **KIM, MICHAEL**



Provider ID: 290904
Board Certified Specialty: No
MICHAEL S KIM

 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000
Provider Gender: Male
NPI: 1164546313



 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


 Hours: SU 8:00AM-5:00PM
M-F 8:00AM-5:00PM
 Website: N/A




OPTOMETRIST **KIM, MICHAEL**

Provider ID: 290902
Board Certified Specialty: No
MICHAEL S KIM

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892


 After Hours Phone: (760)
631-5000
Provider Gender: Male
NPI: 1164546313

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N



 Accessibility: CONTACT PROVIDER
 Hours: SU 8:00AM-5:00PM
M-F 8:00AM-5:00PM
 Website: N/A



OPTOMETRIST **MORA, WENDY**

Provider ID: 290929
Board Certified Specialty: No
WENDY A MORA

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892



 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1376958389

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Website: N/A

OPTOMETRIST **MORA, WENDY**

Provider ID: 290237
Board Certified Specialty: No
WENDY A MORA


 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

D3. 专科提供者名录

Provider Gender: Female

NPI: 1376958389

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OPTOMETRIST


RING, ROBERT

Provider ID: 269380


Board Certified Specialty: No

ROBERT A RING

 3998 VISTA WAY STE 204
OCEANSIDE, CA 92056


 Phone: (760) 726-9383

Fax: (760) 726-9897

 After Hours Phone: (760)
726-9383

Provider Gender: Male

NPI: 1336228840

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 10:00AM-7:00PM
TU-TH 9:00AM-5:00PM
F 9:00AM-0:00PM

 Website: N/A


OPTOMETRIST

TAM, EMILY

Provider ID: 290317

Board Certified Specialty: No
EMILY TAM

 4700 N RIVER RD
OCEANSIDE, CA 92057


 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1497161236

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin,
Yue Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OPTOMETRIST

TAM, EMILY

Provider ID: 290318

Board Certified Specialty: No
EMILY TAM

 517 N HORNE ST
OCEANSIDE, CA 92054


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1497161236

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin,

Yue Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OPTOMETRIST

TRAN, JESSICA

Provider ID: 303732

Board Certified Specialty: No
JESSICA A TRAN

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1457922957


 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\21

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 304887

Board Certified Specialty: No
JESSICA A TRAN

 4700 N RIVER RD

D3. 专科提供者名录

OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1457922957
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 303731
Board Certified Specialty: No
JESSICA A TRAN
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1457922957
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 5\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 303730
Board Certified Specialty: No
JESSICA A TRAN
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1457922957
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 5\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 304886
Board Certified Specialty: No
JESSICA A TRAN
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1457922957
Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OTOLARYNGOLOGY

BLISS, MORGAN

Provider ID: 206086
Board Certified Specialty: No
MORGAN R BLISS
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
NPI: 1760707657
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OTOLARYNGOLOGY

FRIESEN, TZYYNONG

Provider ID: 244899

D3. 专科提供者名录

Board Certified Specialty: No
TZYYNONG L FRIESEN

📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
☎ Phone: (760) 547-1020
🕒 After Hours Phone: (760)
547-1020

Provider Gender: Female
NPI: 1952740177

🗑 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OTOLARYNGOLOGY

LEUIN, SHELBY

Provider ID: 206111

Board Certified Specialty: No
SHELBY C LEUIN

📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
☎ Phone: (760) 547-1020
📠 Fax: (760) 547-1021
🕒 After Hours Phone: (760)
547-1020

Provider Gender: Female
NPI: 1124230909

🗑 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OTOLARYNGOLOGY

PATEL, VIJAY

Provider ID: 297036

Board Certified Specialty: No
VIJAY PATEL

📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
☎ Phone: (760) 547-1020
📠 Fax: (760) 547-1021
🕒 After Hours Phone: (760)
547-1020

Provider Gender: Male
NPI: 1508250747

🗑 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

AGHILI, ROXANA

Provider ID: 303781

Board Certified Specialty: No
ROXANA AGHILI

📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
☎ Phone: (760) 547-1000
📠 Fax: (760) 547-1021
🕒 After Hours Phone: (760)
547-1000

Provider Gender: Female
NPI: 1851927883

🗑 Provider English Spoken: Y
🗑 Provider Language(s)
Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: KAISER
FOUNDATION HOSPITAL SAN
DIEGO, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

CHOO, SUN

Provider ID: 296537


Board Certified Specialty: No
SUN H CHOO

📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
☎ Phone: (760) 547-1000
📠 Fax: (760) 547-1021
🕒 After Hours Phone: (760)
547-1000

D3. 专科提供者名录

Provider Gender: Female

NPI: 1700047628

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN


DIEGO


Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE


GORHAM, LAURA

Provider ID: 275786

Board Certified Specialty: No

LAURA M GORHAM

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1000

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1000

Provider Gender: Female

NPI: 1316162324

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE


GROSS, MATTHEW

Provider ID: 297175

Board Certified Specialty: No

MATTHEW F GROSS

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056


 Phone: (760) 547-1000

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1000

Provider Gender: Male

NPI: 1942223664

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE


KINGDON, JOANNA

Provider ID: 302319

Board Certified Specialty: No

JOANNA E KINGDON

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1000

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1000

Provider Gender: Female

NPI: 1609495399

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN


DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE


PARK, RONALD

Provider ID: 295456

Board Certified Specialty: No

RONALD E PARK

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1000

Fax: (760) 547-1021





 After Hours Phone: (760)
547-1000

Provider Gender: Male

NPI: 1881695914





 Provider English Spoken: Y




D3. 专科提供者名录

 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
*Hospital Affiliation: TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO*
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT
PROVIDER*
 *Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM*
 *Website: N/A*

PEDIATRIC EMERGENCY MEDICINE








PARKER, SHERINE


Provider ID: 205787
Board Certified Specialty: No
SHERINE B PARKER
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 *Phone: (760) 547-1020*
Fax: (760) 547-1021
 *After Hours Phone: (760)
547-1020*
Provider Gender: Female
NPI: 1477626513
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Arabic, Spanish
Cultural Competency: N
*Hospital Affiliation: GLENDALE
ADVENTIST MED CTR,
GLENDALE MEMORIAL HOSP
AND HEALTH CTR, TRI CITY
MEDICAL CTR, RADY*

*CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

PEDIATRIC EMERGENCY MEDICINE




QUINONES-PEREZ, BIANCA

Provider ID: 206951
Board Certified Specialty: No
BIANCA N QUINONES-PEREZ
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 *Phone: (760) 547-1000*
Fax: (760) 547-1021
 *After Hours Phone: (760)
547-1000*
Provider Gender: Female
NPI: 1124360565
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT
PROVIDER*
 *Hours: SU 1:00PM-10:00PM*


M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Website: N/A*

PEDIATRIC EMERGENCY MEDICINE




RUSSELL, SAMUEL

Provider ID: 301251
Board Certified Specialty: No
SAMUEL RUSSELL
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 *Phone: (760) 547-1000*
Fax: (760) 547-1021
 *After Hours Phone: (760)
547-1000*

Provider Gender: Male
NPI: 1215564265

 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*
 *Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM*
 *Website: N/A*

PEDIATRIC EMERGENCY MEDICINE

TODD, SARAH

Provider ID: 302801
Board Certified Specialty: No
SARAH C TODD
 3605 VISTA WAY STE 172

D3. 专科提供者名录

OCEANSIDE, CA 92056
☎ Phone: (760) 547-1000
Fax: (760) 547-1021
🕒 After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1407299787

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA
Provider ID: 205813
Board Certified Specialty: No
KAMALA VAIDYA
📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
☎ Phone: (760) 547-1000
Fax: (760) 547-1021
🕒 After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1083840920
☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

VARGAS, JACLYN
Provider ID: 296485
Board Certified Specialty: No
JACLYN F VARGAS
📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
☎ Phone: (760) 547-1000
Fax: (760) 547-1021
🕒 After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1619359718

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, Los Angeles General Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
🌐 Website: N/A

PEDIATRIC GASTROENTEROLOGY

CHU, CHRISTOPHER
Provider ID: 301642
Board Certified Specialty: No
CHRISTOPHER CHU
📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
☎ Phone: (760) 547-1020
Fax: (760) 547-1021
🕒 After Hours Phone: (760) 547-1020
Provider Gender: Male
NPI: 1912369273
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC PULMONOLOGY

LENHART-PENDERGRASS, PATRICIA
Provider ID: 294643
Board Certified Specialty: No
PATRICIA M

D3. 专科提供者名录

LENHART-PENDERGRASS

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1144615659

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICAL MEDICINE / REHABILITATION

RICHARDSON, HENRY

Provider ID: 295852

Board Certified Specialty: No

HENRY A RICHARDSON

3231 WARING CT STE K
OCEANSIDE, CA 92056

Phone: (760) 607-5350

Fax: (760) 607-5365

After Hours Phone: (760)
607-5350

Provider Gender: Male

NPI: 1407052459

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICAL MEDICINE / REHABILITATION

RYAN, KYLE

Provider ID: 275661

Board Certified Specialty: No

KYLE J RYAN

3605 VISTA WAY
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Male

NPI: 1447645742

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

RAMOS, ELENA

Provider ID: 301307

Board Certified Specialty: No
ELENA R RAMOS

605 CROUCH ST BLDG C
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1306489570

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 2\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE

Provider ID: 302455

Board Certified Specialty: No

ANNETTE A RODRIGUES

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1205381845

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

D3. 专科提供者名录


DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

WRIGHT, DEREK

Provider ID: 305530

Board Certified Specialty: No
DEREK J WRIGHT

 3231 WARING CT STE K
OCEANSIDE, CA 92056

 Phone: (760) 607-5350

Fax: (760) 607-5365

 After Hours Phone: (760)
607-5350

Provider Gender: Male

NPI: 1629674858


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST

COOK, SHERYL

Provider ID: 304924

Board Certified Specialty: No
SHERYL G COOK

 619 CROUCH ST STE 100
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1750420816


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 9:00AM-6:15PM
W 9:00AM-6:00PM

 Website: N/A


PSYCHOLOGIST

JENSEN, BRIAN

Provider ID: 290775

Board Certified Specialty: No
BRIAN M JENSEN

 619 CROUCH ST
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1518138049


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST

KRAPES, MICHAEL

Provider ID: 290097

Board Certified Specialty: No
MICHAEL B KRAPES

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1215233028

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


REGISTERED PHYSICAL THERAPIST

FARRAR, COURTNEY

Provider ID: 295874

Board Certified Specialty: No
COURTNEY L FARRAR

 3231 WARING CT STE K
OCEANSIDE, CA 92056

 Phone: (760) 607-5350

Fax: (760) 607-5365

 After Hours Phone: (760)
607-5350

Provider Gender: Male


NPI: 1124577952

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes


D3. 专科提供者名录

Min/Max Age: 13\999

American Sign Language (ASL):  After Hours Phone: (760) 547-1020

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC

CIDAMBI, EMILY

Provider ID: 246469

Board Certified Specialty: No
EMILY O CIDAMBI

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (858) 966-6789

Fax: (858) 966-8519

 After Hours Phone: (858)
966-6789

Provider Gender: Female

NPI: 1659634699


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC

PRUSS, ERIKA

Provider ID: 303798

Board Certified Specialty: No
ERIKA L PRUSS

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

Provider Gender: Female

NPI: 1538402441

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC

UPASANI, VIDYADHAR


Provider ID: 260954

Board Certified Specialty: No
VIDYADHAR V UPASANI

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020

Provider Gender: Male

NPI: 1548417652

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

SURGERY PEDIATRIC **FAIRBANKS, TIMOTHY**

Provider ID: 205498

Board Certified Specialty: No
TIMOTHY J FAIRBANKS

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020

Provider Gender: Male

NPI: 1407010556

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL

HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL


OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY PEDIATRIC

D3. 专科提供者名录

KLING, KAREN

Provider ID: 206129

Board Certified Specialty: No
KAREN M KLING

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1982775144

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MARY BIRCH HOSP
FOR WOMEN AND

NEWBORNS, NATIONAL
NAVAL MED CTR, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PERRIS

CERTIFIED NURSE PRACTITIONER

BLAND, JACELIS

Provider ID: 296767

Board Certified Specialty: No
JACELIS BLAND

1675 N PERRIS BLVD STE G1

PERRIS, CA 92571

Phone: (760) 736-7676

Fax: (760) 736-6744

After Hours Phone: (760)
736-7676

Provider Gender: Female

NPI: 1801522859

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

SA 8:00AM-4:30PM

Website: N/A

POWAY

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY

Provider ID: 308402

Board Certified Specialty: No
ROY C BROWNLOW

15725 POMERADO RD STE
201

POWAY, CA 92064

Phone: (760) 610-0522

Fax: (760) 610-0523

After Hours Phone: (760)
610-0522

Provider Gender: Male

NPI: 1205949914

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY

Provider ID: 308113

Board Certified Specialty: No
ROY C BROWNLOW

15725 POMERADO RD STE
201

POWAY, CA 92064

Phone: (760) 610-0522

Fax: (760) 610-0523

After Hours Phone: (760)
610-0522

Provider Gender: Male

NPI: 1205949914

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

D3. 专科提供者名录

American Sign Language (ASL): AMANDA S WOLFE

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

JOHNSON, CHRISTINE

Provider ID: 295458

Board Certified Specialty: No
CHRISTINE JOHNSON

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000
Fax: (360) 462-2742

 After Hours Phone: (858)
218-3000

Provider Gender: Female

NPI: 1295049229

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 13\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


WOLFE, AMANDA

Provider ID: 243582

Board Certified Specialty: No


 15525 POMERADO RD STE
B1

POWAY, CA 92064
 Phone: (858) 457-8333

 After Hours Phone: (858)
457-8333

Provider Gender: Female

NPI: 1063813475

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Russian, Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


WRIGHT, KIMBERLY

Provider ID: 256378

Board Certified Specialty: No
KIMBERLY D WRIGHT


 15611 POMERADO RD STE
400

POWAY, CA 92064
 Phone: (858) 675-3200

Fax: (858) 673-1587
 After Hours Phone: (858)
675-3200

Provider Gender: Female

NPI: 1811400708

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


DERMATOLOGY

LIN, SHINKO

Provider ID: 308217

Board Certified Specialty: No
SHINKO K LIN

 15725 POMERADO RD STE
102

POWAY, CA 92064
 Phone: (619) 267-8303

Fax: (619) 267-4835

 After Hours Phone: (619)
267-8303

Provider Gender: Female

NPI: 1205130036

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:
GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-4:30PM

 Website: N/A

DERMATOLOGY

D3. 专科提供者名录

LIN, SHINKO

Provider ID: 306320

Board Certified Specialty: No
SHINKO K LIN

15725 POMERADO RD STE
102
POWAY, CA 92064

Phone: (619) 267-8303

Fax: (619) 267-4835

After Hours Phone: (619)
267-8303

Provider Gender: Female

NPI: 1205130036

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-4:30PM

Website: N/A

FAMILY PRACTICE

FLINN, SCOTT

Provider ID: 270054

Board Certified Specialty: Yes
SCOTT D FLINN

15611 POMERADO RD STE
400
POWAY, CA 92064

Phone: (858) 675-3100

Fax: (858) 613-2938

After Hours Phone: (858)
675-3100

Provider Gender: Male

NPI: 1184694598

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

NAJAND, SADAF

Provider ID: 270055

Board Certified Specialty: No
SADAF NAJAND

15611 POMERADO RD STE
400
POWAY, CA 92064

Phone: (858) 675-3200

Fax: (858) 613-2938

After Hours Phone: (858)
675-3200

Provider Gender: Female

NPI: 1669769717

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

WHITE, KERI

Provider ID: 269491

Board Certified Specialty: No
KERI L WHITE

15611 POMERADO RD STE
400
POWAY, CA 92064

Phone: (858) 675-3200

Fax: (858) 613-2938

After Hours Phone: (858)
675-3200

Provider Gender: Female

NPI: 1295701159

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

CHEN, ANDREW

Provider ID: 269315

Board Certified Specialty: No
ANDREW K CHEN

15611 POMERADO RD STE
400
POWAY, CA 92064

Phone: (858) 675-3100

Fax: (858) 613-2937

After Hours Phone: (858)
675-3100

Provider Gender: Male

D3. 专科提供者名录

NPI: 1134357007

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE


THAPER, MOHINDERPAL

Provider ID: 270016

Board Certified Specialty: No
MOHINDERPAL S THAPER

 15611 POMERADO RD STE
575

POWAY, CA 92064


 Phone: (760) 489-1458


Fax: (760) 489-1246

 After Hours Phone: (760)
489-1458

Provider Gender: Male

NPI: 1295795037

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Punjabi

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL

CARDIOLOGY


BAYAT, HAMED

Provider ID: 269450

Board Certified Specialty: No
HAMED BAYAT

 15611 POMERADO RD STE
400

POWAY, CA 92064

 Phone: (858) 675-3110


Fax: (858) 675-3110

 After Hours Phone: (858)
675-3110

Provider Gender: Male

NPI: 1356344196

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES

Provider ID: 206164

Board Certified Specialty: No
CHARLES W SAUER

 15615 POMERADO RD
POWAY, CA 92064

 Phone: (858) 613-4143

Fax: (858) 613-4539

 After Hours Phone: (858)
613-4143

Provider Gender: Male

NPI: 1538388988

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEONATAL / PERINATAL MEDICINE

WEST, JULIE

D3. 专科提供者名录

Provider ID: 297072
Board Certified Specialty: No
JULIE E WEST

📍 15615 POMERADO RD
POWAY, CA 92064

☎ Phone: (858) 613-4143
Fax: (858) 613-4539

📞 After Hours Phone: (858)
613-4143

Provider Gender: Female

NPI: 1811151848

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

COBB, DAMON

Provider ID: 206030

Board Certified Specialty: No
DAMON C COBB

📍 15706 POMERADO RD STE
110

POWAY, CA 92064

☎ Phone: (858) 485-0130
Fax: (858) 485-9424

📞 After Hours Phone: (858)
485-0130

Provider Gender: Male

NPI: 1851435598

☑ Provider English Spoken: Y
☑ Provider Language(s)

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, PALOMAR

MEDICAL CENTER, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
9:00AM-4:30PM
F 9:00AM-1:00PM

🌐 Website: N/A

OPHTHALMOLOGY

LOZIER, JEFFREY

Provider ID: 270187

Board Certified Specialty: Yes

JEFFREY R LOZIER

📍 15611 POMERADO RD STE
400

POWAY, CA 92064

☎ Phone: (858) 675-3100
Fax: (858) 618-1523

📞 After Hours Phone: (858)
675-3100

Provider Gender: Male

NPI: 1225004450

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
9:00AM-5:00PM

🌐 Website: N/A

OPTOMETRIST

KIM, MICHELLE

Provider ID: 270014

Board Certified Specialty: No
MICHELLE KIM

📍 15611 POMERADO RD STE
400

POWAY, CA 92064

☎ Phone: (858) 675-3140
Fax: (858) 613-2936

📞 After Hours Phone: (858)
675-3140

Provider Gender: Female

NPI: 1457328825

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
9:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

CHATFIELD, ALEXANDRA

Provider ID: 276715

Board Certified Specialty: No
ALEXANDRA J CHATFIELD

📍 15611 POMERADO RD STE

D3. 专科提供者名录

525
POWAY, CA 92064
☎ Phone: (858) 485-0050
Fax: (858) 673-5187
🕒 After Hours Phone: (858)
485-0050
Provider Gender: Female
NPI: 1215584628
🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PODIATRIST

BRAZIER, SETH

Provider ID: 306398
Board Certified Specialty: No
SETH J BRAZIER
📍 15706 POMERADO RD STE
102
POWAY, CA 92064
☎ Phone: (858) 485-1494
Fax: (858) 485-1515
🕒 After Hours Phone: (858)
485-1494
Provider Gender: Male
NPI: 1033554324
🗣 Provider English Spoken: Y
🗣 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: KAWEAH
DELTA DISTRICT HOSP, SELMA
COMMUNITY HOSPITAL,
ADVENTIST MEDICAL CENTER,

ADVENTIST MED CTR
REEDLEY
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
9:00AM-5:00PM
🌐 Website: N/A

PODIATRIST

HAN, KYOUNG

Provider ID: 296326
Board Certified Specialty: No
KYOUING M HAN
📍 15706 POMERADO RD STE
102
POWAY, CA 92064
☎ Phone: (858) 485-1494
Fax: (858) 485-1515
🕒 After Hours Phone: (858)
485-1494
Provider Gender: Female
NPI: 1083954671
🗣 Provider English Spoken: Y
🗣 Provider Language(s)
Spoken: Japanese, Korean
Cultural Competency: N
Hospital Affiliation:
SADDLEBACK MEMORIAL
MED CTR, PALOMAR HEALTH,
PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
9:00AM-5:00PM

🌐 Website: N/A

PODIATRIST

READ, TRENTON

Provider ID: 296656
Board Certified Specialty: No
TRENTON READ
📍 15706 POMERADO RD STE
102
POWAY, CA 92064
☎ Phone: (858) 485-1494
Fax: (858) 485-1515
🕒 After Hours Phone: (858)
485-1494
Provider Gender: Male
NPI: 1952963431
🗣 Provider English Spoken: Y
🗣 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
9:00AM-5:00PM
🌐 Website: N/A


PSYCHOLOGIST

VALLEZ-BARLAM, ANDREA

Provider ID: 290629
Board Certified Specialty: No
ANDREA VALLEZ-BARLAM
📍 13010 POWAY RD
POWAY, CA 92064
☎ Phone: (858) 218-3000
Fax: (858) 633-4688
🕒 After Hours Phone: (858)
218-3000
Provider Gender: Female

D3. 专科提供者名录

NPI: 1710902143

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German, Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM


 Website: N/A


RHEUMATOLOGY

RAO, SOUMYA

Provider ID: 46060

Board Certified Specialty: No
SOUMYA G RAO

 15611 POMERADO RD STE
400
POWAY, CA 92064


 Phone: (858) 675-3150


Fax: (858) 924-1775

 After Hours Phone: (858)
675-3150

Provider Gender: Female

NPI: 1033388616

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Kannada,
Russian, Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 18\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RHEUMATOLOGY


REDDY, SMITHA

Provider ID: 269402

Board Certified Specialty: No
SMITHA C REDDY

 15725 POMERADO RD STE
117

POWAY, CA 92064


 Phone: (858) 312-1717


Fax: (858) 435-0207

 After Hours Phone: (858)
312-1717

Provider Gender: Female

NPI: 1750534715

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Kannada,
Telugu

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, PALOMAR
HEALTH, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS GREEN HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-4:00PM

 Website: N/A


SURGERY GENERAL

GROVE, JAY

Provider ID: 305851

Board Certified Specialty: No
JAY R GROVE

 15611 POMERADO RD
POWAY, CA 92064

 Phone: (858) 675-3100

Fax: (858) 673-5187

 After Hours Phone: (858)
675-3100

Provider Gender: Male

NPI: 1912971334

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER, TRI CITY MEDICAL
CTR, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

SURGERY ORTHOPEDIC


BALIKIAN, PHILIP

Provider ID: 257485

Board Certified Specialty: Yes
PHILIP BALIKIAN

 15611 POMERADO RD STE
400

POWAY, CA 92064

 Phone: (858) 613-8900

D3. 专科提供者名录

Fax: (858) 618-1523

☎ After Hours Phone: (858)
613-8900

Provider Gender: Male

NPI: 1407803687

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Armenian, Italian,
Spanish, Vietnamese

Cultural Competency: N

Hospital Affiliation: PALOMAR

HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:00PM

🌐 Website: N/A

SURGERY ORTHOPEDIC

BALIKIAN, PHILIP

Provider ID: 119552

Board Certified Specialty: Yes

PHILIP BALIKIAN

📍 15611 POMERADO RD STE
400

POWAY, CA 92064

☎ Phone: (858) 613-8900

Fax: (858) 618-1523

☎ After Hours Phone: (858)
613-8900

Provider Gender: Male

NPI: 1407803687

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Armenian, Italian,
Spanish, Vietnamese

Cultural Competency: N

Hospital Affiliation: PALOMAR

HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:00PM

🌐 Website: N/A

SURGERY ORTHOPEDIC

BRIED, JAMES

Provider ID: 269500

Board Certified Specialty: No

JAMES M BRIED

📍 15611 POMERADO RD STE
525

POWAY, CA 92064

☎ Phone: (858) 485-0050

Fax: (858) 485-5071

☎ After Hours Phone: (858)
485-0050

Provider Gender: Male

NPI: 1891809257

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

SALAS, JESSICA

Provider ID: 269344

Board Certified Specialty: No

JESSICA M SALAS

📍 211 13TH ST

RAMONA, CA 92065

☎ Phone: (760) 789-5160

Fax: (760) 788-7962

☎ After Hours Phone: (760)
789-5160

Provider Gender: Female

NPI: 1356817431

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CHIROPRACTOR

JIMENEZ, CLARIBEL

Provider ID: 307942

Board Certified Specialty: No

CLARIBEL JIMENEZ

📍 220 ROTANZI ST

RAMONA, CA 92065

☎ Phone: (760) 736-6767

Fax: (760) 736-8740

☎ After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1801255484

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

RAMONA


D3. 专科提供者名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


FAMILY PRACTICE

WELLS, TODD

Provider ID: 299118

Board Certified Specialty: No
TODD D WELLS

 211 13TH ST
RAMONA, CA 92065


 Phone: (760) 789-5160

Fax: (760) 722-5292

 After Hours Phone: (760)
789-5160

Provider Gender: Male

NPI: 1952377806

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N


Hospital Affiliation: PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

SAN DIEGO

ADOLESCENT MEDICINE

CHELVAKUMAR, GAYATHRI


Provider ID: 296674

Board Certified Specialty: No

GAYATHRI CHELVAKUMAR

 8110 BIRMINGHAM WAY FL
2

SAN DIEGO, CA 92123

 Phone: (858) 966-8493

Fax: (858) 966-8818

 After Hours Phone: (858)
966-8493

Provider Gender: Female

NPI: 1447473848

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ALLERGY IMMUNOLOGY


JAMES, CHRISTINE

Provider ID: 284917

Board Certified Specialty: No
CHRISTINE JAMES

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1144589979

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA


JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ALLERGY IMMUNOLOGY


RIEDL, MARC


Provider ID: 255768

Board Certified Specialty: Yes
MARC A RIEDL

 8899 UNIVERSITY CENTER
LN STE 230

SAN DIEGO, CA 92122

 Phone: (858) 657-5350

 After Hours Phone: (858)
657-5350

Provider Gender: Male

NPI: 1285654889

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 专科提供者名录

ANESTHESIOLOGY

ALEXANDER, BRENTON

Provider ID: 242303

Board Certified Specialty: No

BRENTON S ALEXANDER

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1811366644

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA

Provider ID: 300068

Board Certified Specialty: No

TOSHA D BECERRA SONGOLO

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265938724

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

ANESTHESIOLOGY

BRUNO, KELLY

Provider ID: 238903

Board Certified Specialty: No

KELLY A BRUNO

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891130993

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

CANO, SARAH

Provider ID: 200959

Board Certified Specialty: No

SARAH J CANO

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1750517306

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,
SCRIPPS GREEN HOSPITAL,
SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

CHAN, CHI-BEW

Provider ID: 310044

Board Certified Specialty: No
CHI-BEW CHAN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

D3. 专科提供者名录

926-8273
Provider Gender: Male
NPI: 1205966264
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, DAMERON HOSPITAL ASSOC, DAMERON HOSPITAL ASSOC, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

ANESTHESIOLOGY

CHAN, CHI-BEW

Provider ID: 310043
Board Certified Specialty: No
CHI-BEW CHAN
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male

NPI: 1205966264
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, DAMERON HOSPITAL ASSOC, DAMERON HOSPITAL ASSOC, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

ANESTHESIOLOGY

CURRAN, BRIAN

Provider ID: 239002
Board Certified Specialty: No
BRIAN P CURRAN
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1710373642
Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY

FEJLEH, ASHLEY

Provider ID: 269502
Board Certified Specialty: No
ASHLEY N FEJLEH
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1609353465
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY

FUNDINGSLAND, BRENT

Provider ID: 280468

D3. 专科提供者名录

Board Certified Specialty: No
BRENT W FUNDINGSLAND

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1831166560

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SADDLEBACK
MEMORIAL MED CTR, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

HYLTON, DIANA

Provider ID: 241735

Board Certified Specialty: Yes

DIANA J HYLTON

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932527751

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

MEYER, MEGAN

Provider ID: 239607

Board Certified Specialty: No

MEGAN S MEYER

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1720473044

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

MILLAR, MELISSA

Provider ID: 201308

Board Certified Specialty: No
MELISSA B MILLAR

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-5754

After Hours Phone: (619)
543-5754

Provider Gender: Female

NPI: 1417361981

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,

SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,

SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

NGUYEN, QUOC SY

D3. 专科提供者名录



Provider ID: 242188

Board Certified Specialty: No
QUOC-SY NGUYEN

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871911644

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY

OSWALD, JESSICA

Provider ID: 239600

Board Certified Specialty: No
JESSICA C OSWALD

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427315118

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA


JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY

SHAW, SUSANNA

Provider ID: 255316

Board Certified Specialty: No
SUSANNA J SHAW

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1063685477

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

ANESTHESIOLOGY

SORIA, CLAIRE


Provider ID: 243294

Board Certified Specialty: No
CLAIRE S SORIA

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447516414

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY

SREJIC, UNA

Provider ID: 206383

Board Certified Specialty: Yes
UNA SREJIC

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1588723860

D3. 专科提供者名录

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Stanford
Health Care, UCSF Medical
Center At Mission Bay, UCSF
MEDICAL CENTER AT MOUNT
ZION, UCSF MEDICAL CENTER,
UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

SUYDAM, STEVEN

Provider ID: 286569

Board Certified Specialty: No
STEPHEN M SUYDAM

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1386856821

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
TRI CITY MEDICAL CTR, SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP CHULA VISTA MED
CTR, SHARP CHULA VISTA
MED CTR, SHARP CORONADO

HOSP AND HEALTHCARE CTR,
RADY CHILDRENS HOSPITAL
SAN DIEGO, SCRIPPS GREEN
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

TRIVEDI, SURAJ

Provider ID: 246749

Board Certified Specialty: No
SURAJ S TRIVEDI

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699057885

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

TSUDA, PAIGE

Provider ID: 271682

Board Certified Specialty: No
PAIGE S TSUDA

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1003261595

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY







TULLY, JEFFREY

Provider ID: 283689

Board Certified Specialty: No
JEFFREY L TULLY





200 W ARBOR DR
SAN DIEGO, CA 92103

D3. 专科提供者名录

 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1871912493
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UC DAVIS
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY








TZENG, ERIC

Provider ID: 284577
Board Certified Specialty: No
ERIC TZENG
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1801258264
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY








YODER, ANDREA

Provider ID: 272804
Board Certified Specialty: No
ANDREA R YODER
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1629463104
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY

YOUNAN, LAWRENCE



Provider ID: 240870
Board Certified Specialty: No

LAWRENCE J YOUNAN
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1922432475
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY PAIN

MANAGEMENT

CASTELLANOS, JOEL


Provider ID: 243553
Board Certified Specialty: No
JOEL P CASTELLANOS
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1700296514
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes


D3. 专科提供者名录

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON

Provider ID: 299880

Board Certified Specialty: No
BRANDON DAIRO

 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

 Phone: (619) 325-1161

Fax: (619) 325-1717

 After Hours Phone: (619)
325-1161

Provider Gender: Male

NPI: 1689092470

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA

VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 18\100

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY PAIN


MANAGEMENT

DAIRO, BRANDON

Provider ID: 300089

Board Certified Specialty: No
BRANDON DAIRO

 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

 Phone: (619) 325-1161

Fax: (619) 325-1717

 After Hours Phone: (619)
325-1161

Provider Gender: Male

NPI: 1689092470

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA

VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CARDIOVASCULAR DISEASE

ALANI, ANAS

Provider ID: 201252

Board Certified Specialty: Yes
ANAS A ALANI

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1154633709

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, ARROWHEAD REGIONAL

MEDICAL CENTER, LOMA

LINDA UNIVERSITY MED CTR,

RIVERSIDE COUNTY

REGIONAL MED CTR, LAC

RANCHO LOS AMIGOS

NATIONAL REHAB CENTER,

LOS ANGELES COUNTY

HARBOR UCLA MEDICAL

CENTER, LOS ANGELES

COUNTY HARBOR UCLA


MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CARDIOVASCULAR DISEASE

CASTELLANOS, LUIS

Provider ID: 211764

Board Certified Specialty: No
LUIS R CASTELLANOS

 330 LEWIS ST FL 3
SAN DIEGO, CA 92103

 Phone: (858) 657-8530

Fax: (619) 543-2287

 After Hours Phone: (858)

D3. 专科提供者名录

657-8530
Provider Gender: Male
NPI: 1013059286
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, PIONEERS MEMORIAL
HOSPITAL, EL CENTRO
REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CARDIOVASCULAR DISEASE

CASTELLANOS, LUIS

Provider ID: 211765
Board Certified Specialty: No
LUIS R CASTELLANOS
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1013059286

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, PIONEERS MEMORIAL
HOSPITAL, EL CENTRO
REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CARDIOVASCULAR DISEASE

LERNER, JONATHAN

Provider ID: 309267
Board Certified Specialty: No
JONATHAN H LERNER
 412 WASHINGTON ST
SAN DIEGO, CA 92103
 Phone: (619) 616-2100
Fax: (619) 616-2104
 After Hours Phone: (619)
616-2100
Provider Gender: Male
NPI: 1962899823

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CARDIOVASCULAR DISEASE

LERNER, JONATHAN

Provider ID: 303447
Board Certified Specialty: No
JONATHAN H LERNER
 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
 Phone: (619) 616-2100
Fax: (619) 616-2104
 After Hours Phone: (619)
616-2100
Provider Gender: Male
NPI: 1962899823

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N





Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CARDIOVASCULAR DISEASE

MIZZELL, ANNA








Provider ID: 214020
Board Certified Specialty: No
ANNA M MIZZELL
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1851561021

D3. 专科提供者名录

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




CARDIOVASCULAR DISEASE


PHREANER, NICHOLAS



Provider ID: 239946
Board Certified Specialty: No
NICHOLAS J PHREANER
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1023373040
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CARDIOVASCULAR DISEASE

PROHASKA, THOMAS

Provider ID: 299912
Board Certified Specialty: No
THOMAS A PROHASKA
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1861889644

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999




American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

CARDIOVASCULAR DISEASE

SHEREV, DIMITRI






Provider ID: 301306
Board Certified Specialty: No
DIMITRI A SHEREV
 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
 Phone: (619) 582-4490
Fax: (519) 582-4737
 After Hours Phone: (619)
582-4490
Provider Gender: Male
NPI: 1154323996
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Bulgarian, Russian,
Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, ALVARADO
HOSPITAL LLC, SHARP CHULA
VISTA MED CTR, TRI CITY
MEDICAL CTR, TRI CITY
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, Sharp Grossmont
Hospital, SHARP CORONADO
HOSP AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CARDIOVASCULAR DISEASE

YEANG, CALVIN

Provider ID: 238822
Board Certified Specialty: No
CALVIN YEANG
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (858) 657-8530
 After Hours Phone: (858)
657-8530
Provider Gender: Male
NPI: 1598011058
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: UCSD LA

D3. 专科提供者名录

JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304137

Board Certified Specialty: No

JACQUELINE ARELLANO

 4910 DIRECTORS PL
SAN DIEGO, CA 92121


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 277967

Board Certified Specialty: No

JACQUELINE ARELLANO

 9333 GENESEE AVE STE
200

SAN DIEGO, CA 92121


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 277968

Board Certified Specialty: No

JACQUELINE ARELLANO

 9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED ACUPUNCTURIST


ARELLANO, JACQUELINE

Provider ID: 277966

Board Certified Specialty: No

JACQUELINE ARELLANO

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304138

Board Certified Specialty: No

D3. 专科提供者名录

JACQUELINE ARELLANO

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED ACUPUNCTURIST

CRAFT, KEVIN

Provider ID: 290942

Board Certified Specialty: No
KEVIN E CRAFT

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1659745610

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304132

Board Certified Specialty: No
FIDES Q JULIAN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 277701

Board Certified Specialty: No
FIDES Q JULIAN

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304131

Board Certified Specialty: No
FIDES Q JULIAN

4910 DIRECTORS PL
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

D3. 专科提供者名录

MEDICAL CTR, UCSD LA JOLLA **JULIAN, FIDES**

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 277700

Board Certified Specialty: No
FIDES Q JULIAN

 9333 GENESEE AVE STE
200
SAN DIEGO, CA 92121


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

CERTIFIED ACUPUNCTURIST


Provider ID: 277699

Board Certified Specialty: No
FIDES Q JULIAN

 330 LEWIS ST
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED ACUPUNCTURIST

LAM, KHANH

Provider ID: 295380

Board Certified Specialty: No
KHANH M LAM

 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

 Phone: (619) 325-1161


Fax: (619) 325-1717

 After Hours Phone: (619)
325-1161

Provider Gender: Male

NPI: 1649594979

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Chinese, French,
Vietnamese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


CERTIFIED ACUPUNCTURIST

SEITZ, GRETCHEN

Provider ID: 246474

Board Certified Specialty: No
GRETCHEN E SEITZ

 9995 CARMEL MOUNTAIN
RD STE B10-B11
SAN DIEGO, CA 92129

 Phone: (844) 200-2426

Fax: (858) 240-6470

 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1396876959

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM

D3. 专科提供者名录

TH-F 8:30AM-5:30PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

AGUILA, YESENIA

Provider ID: 304624

Board Certified Specialty: No
YESENIA C AGUILA

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Phone: (619) 266-3332
Fax: (619) 266-6000

After Hours Phone: (619)
266-3332

Provider Gender: Female
NPI: 1245966092

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

ALSTEEN, STEPHANIE

Provider ID: 291389

Board Certified Specialty: No
STEPHANIE D ALSTEEN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1013680982

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE PRACTITIONER

AMOS, MARIA

Provider ID: 291439

Board Certified Specialty: No
MARIA AMOS

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1235891953

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE PRACTITIONER

ARVIZU, MARGARITA

Provider ID: 307976

Board Certified Specialty: No
MARGARITA ARVIZU

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426
Fax: (619) 474-4008

After Hours Phone: (844)
200-2426

Provider Gender: Female
NPI: 1558058636

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-6:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

BAKER, TANYA

Provider ID: 255625

Board Certified Specialty: No
TANYA E BAKER

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (858) 534-8019

After Hours Phone: (858)
534-8019

Provider Gender: Female
NPI: 1699184259

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


D3. 专科提供者名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

BENARD, ROBERT

Provider ID: 268229

Board Certified Specialty: No
ROBERT A BENARD

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1184027724

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, Highland Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

BILOTTA, NATALIE

Provider ID: 291418

Board Certified Specialty: No
NATALIE J BILOTTA

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1144809393

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RIVERSIDE
COMMUNITY HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


BROWN, VICTORIA

Provider ID: 307668

Board Certified Specialty: No
VICTORIA R BROWN

 350 DICKINSON ST
SAN DIEGO, CA 92103

 Phone: (800) 922-6827

 After Hours Phone: (800)
922-6827

Provider Gender: Female


NPI: 1750033890

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


BROWN, VICTORIA

Provider ID: 307669

Board Certified Specialty: No
VICTORIA R BROWN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1750033890

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


BUENROSTRO, CHRISTINA

Provider ID: 243718

Board Certified Specialty: No
CHRISTINA BUENROSTRO

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273


 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1851749253

D3. 专科提供者名录

Provider English Spoken: Y 8:00AM-5:00PM

Provider Language(s) Spoken: Spanish  Website: N/A

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

BUI, ANH

Provider ID: 304273

Board Certified Specialty: No ANH T BUI

 6973 LINDA VISTA RD SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858) 279-0925

Provider Gender: Male

NPI: 1184309684

Provider English Spoken: Y


Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

CERTIFIED NURSE


PRACTITIONER

BUI, ANH

Provider ID: 304272

Board Certified Specialty: No ANH T BUI

 7011 LINDA VISTA RD SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858) 810-8700

Provider Gender: Male

NPI: 1184309684

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


CAMARGO-LOWTHERS, ANGELICA

Provider ID: 307993

Board Certified Specialty: No ANGELICA M

CAMARGO-LOWTHERS

 8010 FROST ST STE 100 SAN DIEGO, CA 92123

 Phone: (858) 640-5000

Fax: (858) 636-2903

 After Hours Phone: (858) 640-5000

Provider Gender: Female

NPI: 1912982539

Provider English Spoken: Y


Provider Language(s) Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


CAMARGO-LOWTHERS, ANGELICA

Provider ID: 54944

Board Certified Specialty: No ANGELICA M

CAMARGO-LOWTHERS

 8010 FROST ST STE 510 SAN DIEGO, CA 92123

 Phone: (858) 637-4700

Fax: (858) 637-4701

 After Hours Phone: (858) 637-4700

Provider Gender: Female

NPI: 1912982539

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish




Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\150

American Sign Language (ASL): N

D3. 专科提供者名录

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
9:00AM-5:00PM*
 *Website: N/A*



CERTIFIED NURSE PRACTITIONER

CAMARGO-LOWTHERS, ANGELICA



Provider ID: 295914
Board Certified Specialty: No
ANGELICA M

CAMARGO-LOWTHERS

 8010 FROST ST STE 220
SAN DIEGO, CA 92123
 *Phone: (858) 650-5000*
Fax: (858) 636-2903
 *After Hours Phone: (858)
650-5000*
Provider Gender: Female
NPI: 1912982539

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

*American Sign Language (ASL):
N*



 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

CERTIFIED NURSE PRACTITIONER



CAPOZZI, JENNIFER

Provider ID: 241031
Board Certified Specialty: No
JENNIFER E CAPOZZI

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*

Provider Gender: Female
NPI: 1336258276


 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Tagalog*

Cultural Competency: N
*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA*

JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

CHANTALA, ELIZABETH


Provider ID: 291305
Board Certified Specialty: No
ELIZABETH A CHANTALA

 200 W ARBOR DR
SAN DIEGO, CA 92103



 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female
NPI: 1942430442

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
*American Sign Language (ASL):
N*



 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

CERTIFIED NURSE PRACTITIONER


CHAVEZ, ALEXANDRIA

Provider ID: 243357
Board Certified Specialty: No
ALEXANDRIA D CHAVEZ


 4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121


 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*

Provider Gender: Female
NPI: 1811543622

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

CHEATHAM, BRITTANY

Provider ID: 291461
Board Certified Specialty: No
BRITTANY L CHEATHAM

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

D3. 专科提供者名录

NPI: 1184111684

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

CHOATE, BERNADETTE

Provider ID: 286369

Board Certified Specialty: No
BERNADETTE R CHOATE

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104173558

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE


PRACTITIONER

CHOATE, BERNADETTE

Provider ID: 286368

Board Certified Specialty: No
BERNADETTE R CHOATE

 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104173558

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


COLEMAN, PAGE

Provider ID: 304288

Board Certified Specialty: No
PAGE COLEMAN

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105


 Phone: (619) 280-2058

Fax: (858) 633-4682

 After Hours Phone: (619)
280-2058

Provider Gender: Female

NPI: 1871365312


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CONNER, PAMELA

Provider ID: 299930

Board Certified Specialty: No
PAMELA M CONNER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770558967

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

D3. 专科提供者名录

 PROVIDER
 Website: N/A

CERTIFIED NURSE


PRACTITIONER

CONNOR, CAROLINE

Provider ID: 279835

Board Certified Specialty: No
CAROLINE L CONNOR

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1609081710

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

CONNOR, CAROLINE

Provider ID: 279836

Board Certified Specialty: No
CAROLINE L CONNOR

 6030 VILLAGE WAY
SAN DIEGO, CA 92130

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1609081710

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


COSINO, ANJELICA

Provider ID: 201309

Board Certified Specialty: No
ANJELICA T COSINO

 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295238749

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


DAVIES, SUMMER

Provider ID: 253692

Board Certified Specialty: No
SUMMER R DAVIES

 8899 UNIVERSITY CENTER
LN STE 220
SAN DIEGO, CA 92122

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1679850671

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

D3. 专科提供者名录

PRACTITIONER

DAVIS, JANET

Provider ID: 255796

Board Certified Specialty: No

JANET M DAVIS

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (619) 471-9250

Fax: (619) 471-9275

After Hours Phone: (619)
471-9250

Provider Gender: Female

NPI: 1164616280

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

DE DIOS, SARAH JANE

Provider ID: 300051

Board Certified Specialty: No

SARAH JANE J DE DIOS

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528632742

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

DEL VECCHIO, MEGAN

Provider ID: 301725

Board Certified Specialty: No
MEGAN J DEL VECCHIO

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1437662863

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

DEL VECCHIO, MEGAN

Provider ID: 301726

Board Certified Specialty: No
MEGAN J DEL VECCHIO

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1437662863

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

DEUTSCH, KAREN

Provider ID: 247981

Board Certified Specialty: No
KAREN G DEUTSCH

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1740517127

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR



Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

D3. 专科提供者名录

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE


PRACTITIONER

DEUTSCH, KAREN

Provider ID: 247980
Board Certified Specialty: No
KAREN G DEUTSCH


 4168 FRONT ST FL 3
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1740517127

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE

PRACTITIONER

DOAN, ANGELA


Provider ID: 291425
Board Certified Specialty: No
ANGELA Q DOAN

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1639638968

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Website: N/A


CERTIFIED NURSE

PRACTITIONER


DOAN, ANGELA

Provider ID: 291426
Board Certified Specialty: No
ANGELA Q DOAN

 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
 Phone: (800) 926-8372

Fax: (888) 539-8781
 After Hours Phone: (800)
926-8372

Provider Gender: Female
NPI: 1639638968

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


CERTIFIED NURSE

PRACTITIONER

DRISCOLL, KARRIE


Provider ID: 286345
Board Certified Specialty: No
KARRIE A DRISCOLL

 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1396085098

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


CERTIFIED NURSE


PRACTITIONER

DRISCOLL, SUSAN

Provider ID: 298968
Board Certified Specialty: No
SUSAN D DRISCOLL

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

 Phone: (619) 662-4100
Fax: (619) 758-3384

 After Hours Phone: (619)
662-4100

Provider Gender: Female
NPI: 1477755684


 Provider English Spoken: Y
 Provider Language(s)


D3. 专科提供者名录

Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: SU 10:00AM-4:00PM*
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER

DWYER, ERIN

Provider ID: 269863

Board Certified Specialty: No
ERIN DWYER

 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

 *Phone: (619) 297-4707*
Fax: (858) 429-7927

 *After Hours Phone: (619)*
297-4707

Provider Gender: Female

NPI: 1003260894


 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER


ECLARINO, GALELEO

Provider ID: 296764

Board Certified Specialty: No

GALELEO E ECLARINO

 9995 CARMEL MOUNTAIN
RD STE B1011
SAN DIEGO, CA 92129

 *Phone: (844) 200-2426*
Fax: (858) 240-6470

 *After Hours Phone: (844)*
200-2426

Provider Gender: Female

NPI: 1518687748


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER

EDNACOT, KARYNNE

Provider ID: 309725

Board Certified Specialty: No
KARYNNE F EDNACOT

 8010 FROST ST STE 100
SAN DIEGO, CA 92123

 *Phone: (858) 650-5000*
Fax: (858) 636-2903

 *After Hours Phone: (858)*
650-5000

Provider Gender: Female

NPI: 1548027964


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
9:00AM-5:00PM

 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER

EDNACOT, KARYNNE

Provider ID: 309540

Board Certified Specialty: No
KARYNNE F EDNACOT

 8010 FROST ST STE 100
SAN DIEGO, CA 92123

 *Phone: (858) 650-5000*
Fax: (858) 636-2903

 *After Hours Phone: (858)*
650-5000

Provider Gender: Female


NPI: 1548027964


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
9:00AM-5:00PM

 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER

ERICKSON, LISA

Provider ID: 287444

Board Certified Specialty: No

D3. 专科提供者名录

LISA K ERICKSON

4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1669442182

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

ERICKSON, LISA

Provider ID: 278982
Board Certified Specialty: No
LISA K ERICKSON

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1669442182

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

FELD, KEREN

Provider ID: 297672
Board Certified Specialty: No
KEREN E FELD

4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681

After Hours Phone: (619)
563-0250

Provider Gender: Female
NPI: 1730835083

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

FISHER, SLOANE

Provider ID: 301585

Board Certified Specialty: No
SLOANE FISHER

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858)
966-8800

Provider Gender: Female
NPI: 1538807003

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, CHILDRENS HOSP OF
LOS ANGELES

Medi-Cal Open Panel: No
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

GARTH, MELISSA

Provider ID: 274053
Board Certified Specialty: No
MELISSA A GARTH

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1689232977

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

D3. 专科提供者名录

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


GIORGI, ASHLEY

Provider ID: 304877

Board Certified Specialty: No

ASHLEY G GIORGI

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

Fax: (858) 633-4681

 After Hours Phone: (619)
563-0250

Provider Gender: Female

NPI: 1952174203

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


GOMEZ, LESLIE

Provider ID: 299468

Board Certified Specialty: No

LESLIE N GOMEZ

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528578713

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

GOMEZ, LESLIE

Provider ID: 299467


Board Certified Specialty: No

LESLIE N GOMEZ

 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528578713

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

GOMEZ, LESLIE

Provider ID: 299466

Board Certified Specialty: No

LESLIE N GOMEZ

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528578713

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HA, THU

Provider ID: 293261

Board Certified Specialty: No

THU T HA

 7011 LINDA VISTA RD

D3. 专科提供者名录

SAN DIEGO, CA 92111
☎ Phone: (858) 810-8700
Fax: (858) 633-4680
🕒 After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1346443983
🗒 Provider English Spoken: Y
🗒 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

HA, THU
Provider ID: 293260
Board Certified Specialty: No
THU T HA
📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 279-0925
Fax: (858) 633-4680
🕒 After Hours Phone: (858) 279-0925
Provider Gender: Female
NPI: 1346443983
🗒 Provider English Spoken: Y
🗒 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT

PROVIDER
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

HARKNESS, RUMIKO
Provider ID: 208841
Board Certified Specialty: No
RUMIKO HARKNESS
📍 4168 FRONT ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1487785093
🗒 Provider English Spoken: Y
🗒 Provider Language(s)
Spoken: Japanese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

HARROUSH, GAL
Provider ID: 302475
Board Certified Specialty: No
GAL HARROUSH
📍 4973 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 279-0925
Fax: (858) 633-4680
🕒 After Hours Phone: (858) 279-0925

Provider Gender: Female
NPI: 1992461230
🗒 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

HART, BECKY
Provider ID: 305337
Board Certified Specialty: No
BECKY M HART
📍 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
☎ Phone: (619) 233-8500
Fax: (619) 687-1067
🕒 After Hours Phone: (619) 233-8500
Provider Gender: Female
NPI: 1316626344
🗒 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

D3. 专科提供者名录

HEAD, KRISTIN

Provider ID: 268656

Board Certified Specialty: No
KRISTIN N HEAD

7920 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 966-7484
Fax: (858) 966-4064

After Hours Phone: (858)
966-7484

Provider Gender: Female

NPI: 1699078923

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HEFNER, ANNA

Provider ID: 308420

Board Certified Specialty: No
ANNA M HEFNER

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126
Phone: (844) 200-2426

Fax: (619) 434-1613
After Hours Phone: (844)

200-2426

Provider Gender: Female

NPI: 1588913537

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-6:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HILL, GENIELYN

Provider ID: 299144

Board Certified Specialty: No
GENIELYN M HILL

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126
Phone: (844) 200-2426

Fax: (619) 434-1613
After Hours Phone: (844)

200-2426

Provider Gender: Female

NPI: 1710632435

Provider English Spoken: Y
Provider Language(s)

Spoken: Tagalog
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HILLIARD, THESALONICA

Provider ID: 284022

Board Certified Specialty: No
THESALONICA P HILLIARD

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126
Phone: (844) 200-2426

Fax: (858) 578-4417

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1861956724

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HOOPER, BONNIE


Provider ID: 275254


Board Certified Specialty: No
BONNIE J HOOPER

9339 GENESEE AVE STE
350

SAN DIEGO, CA 92121

D3. 专科提供者名录


 Phone: (858) 454-4300

 Fax: (858) 454-5088

 After Hours Phone: (858) 454-4300

Provider Gender: Female

NPI: 1821062878

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HOOPER, BONNIE


Provider ID: 307208


Board Certified Specialty: No

BONNIE J HOOPER

 9095 RIO SAN DIEGO DR
STE 300

SAN DIEGO, CA 92108


 Phone: (619) 298-9809

 Fax: (619) 298-9823

 After Hours Phone: (619) 298-9809

Provider Gender: Female

NPI: 1821062878

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

IBARRA, MARTHA


Provider ID: 295393


Board Certified Specialty: No

MARTHA A IBARRA

 7011 LINDA VISTA RD

SAN DIEGO, CA 92111


 Phone: (858) 810-8700


 Fax: (858) 633-4680

 After Hours Phone: (858) 810-8700

Provider Gender: Female

NPI: 1114957289

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W 8:30AM-5:30PM

TH 8:30AM-8:30PM

F 8:30AM-5:30PM

SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

IBARRA, MARTHA


Provider ID: 295392


Board Certified Specialty: No


MARTHA A IBARRA

 6973 LINDA VISTA RD

SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 Fax: (858) 633-4680

 After Hours Phone: (858) 279-0925

Provider Gender: Female

NPI: 1114957289

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W 8:30AM-5:30PM

TH 8:30AM-8:30PM

F 8:30AM-5:30PM

SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

JONES, CHRISTA

Provider ID: 275563

Board Certified Specialty: No

CHRISTA E JONES

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

D3. 专科提供者名录

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1396371431

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

KEMP, KATHRINE

Provider ID: 301276

Board Certified Specialty: No
KATHRINE E KEMP

📍 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

☎ Phone: (619) 645-6405
Fax: (619) 687-1067

☎ After Hours Phone: (619)
645-6405

Provider Gender: Female

NPI: 1316615313

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

KI, TRISH

Provider ID: 293293

Board Certified Specialty: No
TRISH H KI

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925
Fax: (858) 633-4680

☎ After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1376840199

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

KI, TRISH

Provider ID: 293294

Board Certified Specialty: No
TRISH H KI

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700
Fax: (858) 633-4680

☎ After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1376840199

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

KIDANE, ZINNIA

Provider ID: 302426

Board Certified Specialty: No
ZINNIA A KIDANE

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925
Fax: (858) 633-4680

☎ After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1780334110

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

D3. 专科提供者名录

 Website: N/A


CERTIFIED NURSE **PRACTITIONER**

KIDANE, ZINNIA

Provider ID: 302427

Board Certified Specialty: No
ZINNIA A KIDANE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1780334110

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE **PRACTITIONER**

LAFORTEZA, JOZELLE


Provider ID: 202666

Board Certified Specialty: No
JOZELLE B LAFORTEZA

 9333 GENESEE AVE STE
200


SAN DIEGO, CA 92121


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1538578307

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE **PRACTITIONER**


LANE, KIMBERLY

Provider ID: 301600

Board Certified Specialty: No
KIMBERLY A LANE

 3444 KEARNY VILLA RD
STE 201

SAN DIEGO, CA 92123


 Phone: (858) 430-1101

Fax: (858) 221-5049

 After Hours Phone: (858)
430-1101

Provider Gender: Female

NPI: 1457670119

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

CERTIFIED NURSE **PRACTITIONER**


LANE, KIMBERLY

Provider ID: 301601

Board Certified Specialty: No
KIMBERLY A LANE

 3444 KEARNY VILLA RD
STE 202

SAN DIEGO, CA 92123


 Phone: (858) 430-1101

Fax: (858) 429-7929

 After Hours Phone: (858)
430-1101

Provider Gender: Female

NPI: 1457670119

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE **PRACTITIONER**


LANE, KIMBERLY

Provider ID: 301603

Board Certified Specialty: No
KIMBERLY A LANE

 4060 4TH AVE STE 310

SAN DIEGO, CA 92103

 Phone: (619) 297-4707


Fax: (858) 429-7927

 After Hours Phone: (619)
297-4707


Provider Gender: Female

D3. 专科提供者名录

NPI: 1457670119

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE


PRACTITIONER

LANE, KIMBERLY

Provider ID: 301597

Board Certified Specialty: No
KIMBERLY A LANE

 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128


 Phone: (858) 485-0554

Fax: (858) 429-7933


 After Hours Phone: (858)
485-0554


Provider Gender: Female


NPI: 1457670119

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MANRIQUEZ, LISETTE

Provider ID: 307103

Board Certified Specialty: No
LISETTE MANRIQUEZ

 286 EUCLID AVE STE 302
SAN DIEGO, CA 92114


 Phone: (619) 662-4100

Fax: (619) 428-7952

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1760058911

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MANZO, CORINA

Provider ID: 304481

Board Certified Specialty: No
CORINA L MANZO

 2630 1ST AVE
SAN DIEGO, CA 92103



 Phone: (619) 234-2158

Fax: (619) 234-0206

 After Hours Phone: (619)
234-2158


Provider Gender: Female

NPI: 1669087326

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MARTINEZ, CAROLYN

Provider ID: 293345

Board Certified Specialty: No
CAROLYN M MARTINEZ

 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1609101997

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 专科提供者名录

CERTIFIED NURSE PRACTITIONER

MEDINA, RUBELETA

Provider ID: 296673

Board Certified Specialty: No
RUBELETA S MEDINA

📍 9995 CARMEL MOUNTAIN
RD STE B1011

SAN DIEGO, CA 92129

☎ Phone: (844) 200-2426

Fax: (858) 240-6470

🕒 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1881153963

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

MENDOZA, GRETTEL MARIE

Provider ID: 303202

Board Certified Specialty: No
GRETTEL MARIE G MENDOZA

📍 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

☎ Phone: (844) 200-2426

Fax: (858) 578-4417

🕒 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1245652387

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-6:00PM
F 8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

MICK, SHARON

Provider ID: 299648

Board Certified Specialty: No
SHARON L MICK

📍 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891061966

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

MICK, SHARON

Provider ID: 299649

Board Certified Specialty: No
SHARON L MICK

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891061966

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

MICK, SHARON

Provider ID: 299647

Board Certified Specialty: No
SHARON L MICK

📍 16950 VIA TAZON

SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)

D3. 专科提供者名录

926-8273
Provider Gender: Female
NPI: 1891061966
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MIDORO, ABEGAILLE

Provider ID: 303828
Board Certified Specialty: No
ABEGAILLE A MIDORO
📍 9855 ERMA RD STE 105
SAN DIEGO, CA 92131
☎ Phone: (844) 200-2426
Fax: (858) 536-8034
🕒 After Hours Phone: (844)
200-2426
Provider Gender: Female
NPI: 1952925851
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM
🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MILLER, EVA

Provider ID: 255833
Board Certified Specialty: No

🕒 Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM
🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MIDORO, ABEGAILLE

Provider ID: 303829
Board Certified Specialty: No
ABEGAILLE A MIDORO
📍 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
☎ Phone: (844) 200-2426
Fax: (858) 578-4417
🕒 After Hours Phone: (844)
200-2426

Provider Gender: Female
NPI: 1952925851

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM
🌐 Website: N/A

EVA M MILLER
📍 330 LEWIS ST
SAN DIEGO, CA 92103
☎ Phone: (619) 471-9210
🕒 After Hours Phone: (619)
471-9210
Provider Gender: Female
NPI: 1043492523
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A


CERTIFIED NURSE

PRACTITIONER


MOHEBBI, ATHENA


Provider ID: 201325
Board Certified Specialty: No
ATHENA MOHEBBI
📍 4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1952627176
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

D3. 专科提供者名录

American Sign Language (ASL):  Phone: (800) 926-8273
N Fax: (888) 539-8781

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE **PRACTITIONER**

MORAN, TIFFANY


Provider ID: 304275

Board Certified Specialty: No
TIFFANY T MORAN

 2630 1ST AVE
SAN DIEGO, CA 92103

 Phone: (619) 234-2158

Fax: (619) 234-0206

 After Hours Phone: (619)
234-2158

Provider Gender: Female

NPI: 1730730649

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE **PRACTITIONER**

MULVEY, CAOILFHIONN

Provider ID: 291419

Board Certified Specialty: No
CAOILFHIONN M MULVEY

 200 W ARBOR DR
SAN DIEGO, CA 92103

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1184386864

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


 Website: N/A

CERTIFIED NURSE **PRACTITIONER**


NEJATI, FRESHTA

Provider ID: 214112

Board Certified Specialty: No
FRESHTA NEJATI

 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131

 Phone: (800) 926-8273

 After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1831598119

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE **PRACTITIONER**


NETZEL, JENNIFER

Provider ID: 291348

Board Certified Specialty: No
JENNIFER J NETZEL

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1336896232

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE **PRACTITIONER**

NETZEL, JENNIFER

Provider ID: 291346

Board Certified Specialty: No
JENNIFER J NETZEL

 9333 GENESEE AVE
SAN DIEGO, CA 92121


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1336896232

 Provider English Spoken: Y
Cultural Competency: N

D3. 专科提供者名录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE PRACTITIONER

NETZEL, JENNIFER


Provider ID: 291347

Board Certified Specialty: No


JENNIFER J NETZEL

 9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1336896232


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE PRACTITIONER

NOVENO, HILARIO JR


Provider ID: 286911

Board Certified Specialty: No

HILARIO JR C NOVENO JR

 4520 EXECUTIVE DR STE
P2

SAN DIEGO, CA 92121


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124486865

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish,
Tagalog

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER

NOVENO, HILARIO JR

Provider ID: 286912

Board Certified Specialty: No

HILARIO JR C NOVENO JR

 4168 FRONT ST
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124486865

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish,
Tagalog

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER


O'CONNELL, STEFANY

Provider ID: 296846

Board Certified Specialty: No

STEFANY I O'CONNELL

 1016 OUTER RD
SAN DIEGO, CA 92154


 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1386378479

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER

OREJEL, EDITH

Provider ID: 296716

Board Certified Specialty: No

D3. 专科提供者名录

EDITH G OREJEL

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1073278180

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 5:30PM-8:30PM

W 8:30AM-5:30PM

TH 5:30PM-8:30PM

F 8:30AM-5:30PM

SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

OREJEL, EDITH

Provider ID: 296715

Board Certified Specialty: No

EDITH G OREJEL

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1073278180

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 5:30PM-8:30PM

W 8:30AM-5:30PM

TH 5:30PM-8:30PM

F 8:30AM-5:30PM

SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

PACE, RACHELLE

Provider ID: 309961

Board Certified Specialty: No

RACHELLE PACE

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1588334973

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

PAI, SARAH

Provider ID: 276870

Board Certified Specialty: No

SARAH A PAI

350 DICKINSON ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255762167

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

PATIAG, DANIEL

Provider ID: 293248

Board Certified Specialty: No

DANIEL B PATIAG

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1073169769

D3. 专科提供者名录

Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 14\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL

Provider ID: 293249
Board Certified Specialty: No
DANIEL B PATIAG

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Male
NPI: 1073169769

Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 14\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

PEREZ, ALLYSSA

Provider ID: 286223
Board Certified Specialty: No
ALLYSSA M PEREZ

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1497358915

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

PEREZ, ALLYSSA

Provider ID: 286222
Board Certified Specialty: No
ALLYSSA M PEREZ

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female
NPI: 1497358915

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

PEREZ, ALLYSSA

Provider ID: 304162
Board Certified Specialty: No
ALLYSSA M PEREZ

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1497358915

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

D3. 专科提供者名录

American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE PRACTITIONER

PETTIS, BETH

Provider ID: 286878
Board Certified Specialty: No
BETH S PETTIS

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1326638958

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

RAJAEI, NILOUFAR

Provider ID: 291437
Board Certified Specialty: No
NILOUFAR RAJAEI

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1275904047

Provider English Spoken: Y
Provider Language(s)
Spoken: Persian

Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Website: N/A

CERTIFIED NURSE PRACTITIONER

RANDLE, CARRIE

Provider ID: 299296
Board Certified Specialty: No
CARRIE A RANDLE

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800

Provider Gender: Female
NPI: 1558557348

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: NAVAL
MEDICAL CTR SD RBE, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No
Min/Max Age: 0\19

Min/Max Age: 0\19

American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE PRACTITIONER

RIEGO, SUZANNE

Provider ID: 214477
Board Certified Specialty: No
SUZANNE N RIEGO

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Phone: (858) 292-7200

After Hours Phone: (858) 292-7200

Provider Gender: Female
NPI: 1144453754

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

ROBERTSON, RACHAEL

Provider ID: 286940
Board Certified Specialty: No
RACHAEL A ROBERTSON

200 W ARBOR DR

D3. 专科提供者名录

SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1659912327

🗉 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

RODENMEYER, EVE

Provider ID: 295956
Board Certified Specialty: No
EVE RODENMEYER

📍 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
☎ Phone: (619) 280-2058
Fax: (858) 633-4682
📞 After Hours Phone: (619) 280-2058

Provider Gender: Female
NPI: 1225782022

🗉 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

ROSCOE, SYDNEY

Provider ID: 305039
Board Certified Specialty: No
SYDNEY R ROSCOE

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
📞 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1992448864
🗉 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

ROSCOE, SYDNEY

Provider ID: 305038
Board Certified Specialty: No
SYDNEY R ROSCOE

📍 350 DICKINSON ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
📞 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1992448864
🗉 Provider English Spoken: Y

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

ROSCOE, SYDNEY

Provider ID: 305037
Board Certified Specialty: No
SYDNEY R ROSCOE

📍 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
📞 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1992448864
🗉 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

ROSS, CRYSTAL

Provider ID: 287763
Board Certified Specialty: No
CRYSTAL H ROSS

📍 350 DICKINSON ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273

D3. 专科提供者名录

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1548683378

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

ROSS, CRYSTAL

Provider ID: 302559

Board Certified Specialty: No
CRYSTAL H ROSS

📍 4290 POLK AVE
SAN DIEGO, CA 92105

☎ Phone: (619) 563-0250
Fax: (858) 633-4681

☎ After Hours Phone: (619) 563-0250

Provider Gender: Female

NPI: 1548683378

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

ROSSI, CATHERINE

Provider ID: 291445

Board Certified Specialty: No
CATHERINE R ROSSI

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1649934126

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

ROZO, JOSE

Provider ID: 300037

Board Certified Specialty: No
JOSE A ROZO

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1528787132

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

SABIN, NANCY

Provider ID: 293288

Board Certified Specialty: No
NANCY J SABIN

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700
Fax: (858) 633-4680

☎ After Hours Phone: (858) 810-8700

Provider Gender: Female

NPI: 1285732586

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

D3. 专科提供者名录

 Website: N/A


CERTIFIED NURSE PRACTITIONER

SABIN, NANCY

Provider ID: 293287

Board Certified Specialty: No
NANCY J SABIN

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1285732586

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CERTIFIED NURSE PRACTITIONER


SANACORA, RACHEL

Provider ID: 297728

Board Certified Specialty: No
RACHEL SANACORA

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1548987985

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE PRACTITIONER


SANACORA, RACHEL

Provider ID: 297729

Board Certified Specialty: No
RACHEL SANACORA

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1548987985

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 293285

Board Certified Specialty: No
JOANNE SANTANGELO

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1619370475

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CERTIFIED NURSE PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 293286

Board Certified Specialty: No
JOANNE SANTANGELO

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1619370475

Provider English Spoken: Y

D3. 专科提供者名录

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*



CERTIFIED NURSE PRACTITIONER



SATTERWHITE, MAURINE

Provider ID: 293259
Board Certified Specialty: No
MAURINE C SATTERWHITE
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 810-8700*
Fax: (858) 633-4680

 *After Hours Phone: (858) 810-8700*

Provider Gender: Female
NPI: 1225012842

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*



CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE



Provider ID: 293258
Board Certified Specialty: No
MAURINE C SATTERWHITE

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
Fax: (858) 633-4680
 *After Hours Phone: (858) 279-0925*

Provider Gender: Female
NPI: 1225012842



 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

SEARS-WILEY, ELIZABETH

Provider ID: 276851
Board Certified Specialty: No
ELIZABETH SEARS-WILEY
 350 DICKINSON ST
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1215394382

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*


CERTIFIED NURSE PRACTITIONER

SELBY, BLAKE




Provider ID: 256646
Board Certified Specialty: No
BLAKE A SELBY

 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1417194358

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

SELBY, BLAKE

D3. 专科提供者名录

Provider ID: 246423

Board Certified Specialty: No
BLAKE A SELBY

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1417194358

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

SENA, TIFFANY

Provider ID: 300229

Board Certified Specialty: No
TIFFANY C SENA

550 WASHINGTON ST STE
300

SAN DIEGO, CA 92103

Phone: (619) 297-5437

Fax: (619) 297-4567

After Hours Phone: (619)
297-5437

Provider Gender: Female

NPI: 1710539523

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

SWARTZ, ERIN

Provider ID: 255787

Board Certified Specialty: No
ERIN SWARTZ

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (858) 657-8530

After Hours Phone: (858)
657-8530

Provider Gender: Female

NPI: 1639571292

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

TAING, JENNIFER

Provider ID: 201573

Board Certified Specialty: No
JENNIFER S TAING

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1649528357

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

TALBOT, ADRIANNE

Provider ID: 278183

Board Certified Specialty: No
ADRIANNE V TALBOT

4168 FRONT ST STE 1A
SAN DIEGO, CA 92103


Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273


D3. 专科提供者名录


Provider Gender: Female
NPI: 1992048557


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER


TOPPEN, LAURA

Provider ID: 215477

Board Certified Specialty: No
LAURA TOPPEN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273


 After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1326563495

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER


TREJO, ANA

Provider ID: 307672

Board Certified Specialty: No
ANA C TREJO

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1033717194

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CERTIFIED NURSE PRACTITIONER


TUCKER, LANIKA

Provider ID: 307659

Board Certified Specialty: No
LANIKA A TUCKER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1477325181

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CERTIFIED NURSE PRACTITIONER


TUCKER, LANIKA

Provider ID: 307657


Board Certified Specialty: No
LANIKA A TUCKER

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1477325181

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE PRACTITIONER


VIBAL-POASTER, MARIA

Provider ID: 205651

Board Certified Specialty: No
MARIA K VIBAL-POASTER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

D3. 专科提供者名录

NPI: 1376046680


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Provider ID: 306075

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

WALDRUP, LARHONDA

Provider ID: 299260

Board Certified Specialty: No
LARHONDA M WALDRUP

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5888
Fax: (858) 966-7483

 After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1831627181

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE

PRACTITIONER

WHITEHURST, UNIQUE

Board Certified Specialty: No
UNIQUE D WHITEHURST

 286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

 Phone: (619) 662-4100
Fax: (619) 428-7952

 After Hours Phone: (619)
662-4100

Provider Gender: Female


NPI: 1124800214


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

WOO, ANDY

Provider ID: 299916

Board Certified Specialty: No
ANDY B WOO


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1609450550

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED REGISTERED



NURSE ANESTHETIST

ALFONSO, ALVIN

Provider ID: 256374

Board Certified Specialty: No
ALVIN M ALFONSO

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
 After Hours Phone: (800)

926-8273
Provider Gender: Male

NPI: 1952653404

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

APPLEGET, JOSEPH

D3. 专科提供者名录

Provider ID: 239602

Board Certified Specialty: No
JOSEPH M APPEGET

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1568980472

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RIVERSIDE
COMMUNITY HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

BARBA, ARNEL

Provider ID: 262186

Board Certified Specialty: No
ARNEL J BARBA

286 EUCLID AVE STE 109
SAN DIEGO, CA 92114

Phone: (619) 564-8249

After Hours Phone: (619)
564-8249

Provider Gender: Male

NPI: 1750366928

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

BAYLIS, CHRISTOPHER

Provider ID: 240763

Board Certified Specialty: No
CHRISTOPHER M BAYLIS

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1174893358

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

BILLINGTON, KATHERINE

Provider ID: 262246

Board Certified Specialty: No
KATHERINE S BILLINGTON

286 EUCLID AVE STE 109
SAN DIEGO, CA 92114

Phone: (619) 564-8249

After Hours Phone: (619)
564-8249

Provider Gender: Female

NPI: 1962787366

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

BOEING, KRISTINA

Provider ID: 274397

Board Certified Specialty: No
KRISTINA K BOEING

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1205134301

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR



Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

D3. 专科提供者名录

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED REGISTERED


NURSE ANESTHETIST

BURROWS, TERENCE

Provider ID: 256694

Board Certified Specialty: No
TERENCE J BURROWS

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1023194560


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE ANESTHETIST


DOLLAND, STEVEN

Provider ID: 280552

Board Certified Specialty: No
STEVEN C DOLLAND

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982059044

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: KERN

MEDICAL CENTER, UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE ANESTHETIST

FERRITER, STACY

Provider ID: 265295

Board Certified Specialty: No
STACY K FERRITER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780725556

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE ANESTHETIST

GARCIA, CALVIN

Provider ID: 217365

Board Certified Specialty: No
CALVIN J GARCIA

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1427419944


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE ANESTHETIST

GONZALEZ, LISA

Provider ID: 299905

Board Certified Specialty: No
LISA A GONZALEZ

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273
Fax: (888) 539-8781

D3. 专科提供者名录

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1083254205

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST


POLIKOWSKI, SAMANTHA

Provider ID: 291444

Board Certified Specialty: No

SAMANTHA E POLIKOWSKI

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1194134114

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: KAISER
FOUNDATION HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

RAMIREZ, NICOLE

Provider ID: 291404

Board Certified Specialty: No

NICOLE A RAMIREZ

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1487213500

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST


SACKS, BRENT

Provider ID: 278003

Board Certified Specialty: No

BRENT A SACKS

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982133591

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST


VINCENT, BERLIN

Provider ID: 291454

Board Certified Specialty: No

BERLIN VINCENT

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1144987801

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

D3. 专科提供者名录

CERTIFIED REGISTERED

NURSE MIDWIFE

CHOI, NATHALIE

Provider ID: 301715

Board Certified Specialty: No
NATHALIE L CHOI

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073241618

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER,

SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

CHOI, NATHALIE

Provider ID: 301714

Board Certified Specialty: No
NATHALIE L CHOI

📍 4168 FRONT ST
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073241618

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER,

SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

EKHOLM, JANNA

Provider ID: 290584

Board Certified Specialty: No
JANNA L EKHOLM

📍 4290 POLK AVE
SAN DIEGO, CA 92105

☎ Phone: (619) 563-0250

Fax: (858) 633-4681

🕒 After Hours Phone: (619)
563-0250

Provider Gender: Female

NPI: 1588977151

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

GOODWIN, RACHEL

Provider ID: 210018

Board Certified Specialty: No
RACHEL K GOODWIN

📍 4168 FRONT ST
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1518274919

🗣 Provider English Spoken: Y

🗣 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

GOODWIN, RACHEL

Provider ID: 210019

Board Certified Specialty: No
RACHEL K GOODWIN

📍 16950 VIA TAZON
SAN DIEGO, CA 92127


☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

D3. 专科提供者名录

Provider Gender: Female

NPI: 1518274919

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


GREAR MANN, MELISSA

Provider ID: 210053

Board Certified Specialty: No
MELISSA P GREAR MANN

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255384475


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE MIDWIFE


GREAR MANN, MELISSA

Provider ID: 210052

Board Certified Specialty: No
MELISSA P GREAR MANN

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255384475


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


GUNTHER, HOPE

Provider ID: 210041

Board Certified Specialty: No
HOPE R GUNTHER

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1285667741


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


HIRSCH, JENNIFER

Provider ID: 210058

Board Certified Specialty: No
JENNIFER S HIRSCH

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891752069

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

HIRSCH, JENNIFER

D3. 专科提供者名录

Provider ID: 210055
Board Certified Specialty: No
JENNIFER S HIRSCH

📍 4168 FRONT ST
SAN DIEGO, CA 92103
☎ Phone: (619) 543-7878
🕒 After Hours Phone: (619)
543-7878

Provider Gender: Female
NPI: 1891752069

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED REGISTERED NURSE MIDWIFE

HIRSCH, JENNIFER

Provider ID: 210054
Board Certified Specialty: No
JENNIFER S HIRSCH

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (619) 543-7878
🕒 After Hours Phone: (619)
543-7878

Provider Gender: Female
NPI: 1891752069

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED REGISTERED NURSE MIDWIFE

NATHAN, CARLY

Provider ID: 301047
Board Certified Specialty: No
CARLY NATHAN

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1235670977

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED REGISTERED NURSE MIDWIFE

NATHAN, CARLY

Provider ID: 301048
Board Certified Specialty: No
CARLY NATHAN

📍 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1235670977

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CHIROPRACTOR

BUI, MAI

Provider ID: 289496
Board Certified Specialty: No
MAI T BUI

📍 10717 CAMINO RUIZ STE 137
SAN DIEGO, CA 92126

☎ Phone: (619) 692-3211
Fax: (619) 640-3211

🕒 After Hours Phone: (619)
692-3211

Provider Gender: Female
NPI: 1780901264

☑ Provider English Spoken: Y
☑ Provider Language(s)

Spoken: Vietnamese
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 9:00AM-6:00PM
W 9:00AM-6:00PM
F 9:00AM-2:00PM

🌐 Website: N/A

D3. 专科提供者名录

CHIROPRACTOR

BUI, MAI

Provider ID: 125052

Board Certified Specialty: No

MAI T BUI

5354 UNIVERSITY AVE STE 3

SAN DIEGO, CA 92105

Phone: (619) 692-3211

Fax: (619) 640-3211

After Hours Phone: (619) 692-3211

Provider Gender: Female

NPI: 1780901264

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

Website: N/A

CHIROPRACTOR

BUI, MAI

Provider ID: 295791

Board Certified Specialty: No

MAI T BUI

5354 UNIVERSITY AVE STE 3

SAN DIEGO, CA 92105

Phone: (619) 692-3211

Fax: (619) 640-3211

After Hours Phone: (619) 692-3211

Provider Gender: Female

NPI: 1780901264

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

Website: N/A

CHIROPRACTOR

GILIBERTO, JOSEPH

Provider ID: 291547

Board Certified Specialty: No

JOSEPH A GILIBERTO

10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (619) 399-5959

After Hours Phone: (844) 200-2426

Provider Gender: Male

NPI: 1821463159

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

CHIROPRACTOR

GILIBERTO, JOSEPH

Provider ID: 291546

Board Certified Specialty: No

JOSEPH A GILIBERTO

9995 CARMEL MOUNTAIN RD STE D

SAN DIEGO, CA 92129

Phone: (844) 200-2426

Fax: (619) 399-5959

After Hours Phone: (844) 200-2426

Provider Gender: Male

NPI: 1821463159

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

CHIROPRACTOR

LUU, DANIEL

Provider ID: 269883

Board Certified Specialty: No

DANIEL Q LUU

4419 EUCLID AVE STE 105

SAN DIEGO, CA 92115

Phone: (619) 287-1235

Fax: (619) 255-6406


After Hours Phone: (619) 287-1235

Provider Gender: Male

NPI: 1225108269








Provider English Spoken: Y

D3. 专科提供者名录

 *Provider Language(s)*
Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M 10:00AM-6:00PM*
TU 10:00AM-2:00PM
W 10:00AM-6:00PM
TH 10:00AM-2:00PM
F 10:00AM-6:00PM
 *Website: N/A*








CHIROPRACTOR

MONTANE, RUBEN

Provider ID: 309694
Board Certified Specialty: No
RUBEN A MONTANE
 1016 OUTER RD
SAN DIEGO, CA 92154
 *Phone: (619) 429-3733*
Fax: (619) 628-5550
 *After Hours Phone: (619) 429-3733*
Provider Gender: Male
NPI: 1346725769
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*




CHIROPRACTOR

ROBINSON, DEAN




Provider ID: 300848
Board Certified Specialty: No
DEAN A ROBINSON
 4290 POLK AVE
SAN DIEGO, CA 92105
 *Phone: (619) 563-0250*
Fax: (858) 633-4681
 *After Hours Phone: (619) 563-0250*
Provider Gender: Male
NPI: 1851320337
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:30AM-5:30PM
 *Website: N/A*

CHIROPRACTOR

ROBINSON, DEAN









Provider ID: 300847
Board Certified Specialty: No
DEAN A ROBINSON
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
Fax: (858) 633-4680
 *After Hours Phone: (858) 279-0925*
Provider Gender: Male
NPI: 1851320337
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:30AM-5:30PM
 *Website: N/A*

DERMATOLOGY

CALAME, ANTOANELLA

Provider ID: 290301
Board Certified Specialty: No
ANTOANELLA CALAME
 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
 *Phone: (858) 750-2983*
Fax: (858) 750-2984
 *After Hours Phone: (858) 750-2983*
Provider Gender: Female
NPI: 1285817569
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Romanian
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, YUMA REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

DERMATOLOGY

DANG, TIMOTHY

D3. 专科提供者名录

Provider ID: 309721

Board Certified Specialty: No
TIMOTHY M DANG

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1518427913

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

DERMATOLOGY

KANNAN, SWATI

Provider ID: 286287

Board Certified Specialty: No
SWATI V KANNAN

8899 UNIVERSITY CENTER
LN STE 350
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1508155227

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED
CTR, UCSD MEDICAL CTR,

UCSD LA JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

DERMATOLOGY

KAUNITZ, GENEVIEVE

Provider ID: 285011

Board Certified Specialty: No
GENEVIEVE J KAUNITZ

8899 UNIVERSITY CENTER
LN STE 350
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1053734905

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

DERMATOLOGY

KOZMA, BONITA

Provider ID: 269301

Board Certified Specialty: No

BONITA D KOZMA

8899 UNIVERSITY CENTER
LN STE 350
SAN DIEGO, CA 92122

Phone: (858) 657-8322

Fax: (888) 539-8781

After Hours Phone: (858)
657-8322

Provider Gender: Female

NPI: 1659654598

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
PROVIDENCE SAINT JOHNS
HEALTH CENTER, SANTA
MONICA UCLA MED CTR,
RONALD REAGAN UCLA MED
CTR, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

DERMATOLOGY








LIN, SHINKO

Provider ID: 308736

Board Certified Specialty: No
SHINKO K LIN



5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117

D3. 专科提供者名录

 Phone: (619) 267-8303
Fax: (619) 267-4835
 After Hours Phone: (619) 267-8303
Provider Gender: Female
NPI: 1205130036
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-4:30PM
 Website: N/A

DERMATOLOGY







LIN, SHINKO

Provider ID: 308915
Board Certified Specialty: No
SHINKO K LIN
 5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117
 Phone: (619) 267-8303
Fax: (619) 267-4835
 After Hours Phone: (619) 267-8303
Provider Gender: Female
NPI: 1205130036
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-4:30PM
 Website: N/A


DERMATOLOGY






LIU, YUJIE

Provider ID: 308315
Board Certified Specialty: No
YUJIE L LIU
 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1750944450
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

DERMATOLOGY


SHI, VERONICA

Provider ID: 271713
Board Certified Specialty: No
VERONICA J SHI
 8899 UNIVERSITY CENTER
LN STE 350
SAN DIEGO, CA 92122
 Phone: (858) 657-8322

Fax: (888) 539-8781
 After Hours Phone: (858) 657-8322
Provider Gender: Female
NPI: 1366897464
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

DERMATOLOGY

SHI, VERONICA

Provider ID: 286335
Board Certified Specialty: No
VERONICA J SHI
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1366897464
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes


D3. 专科提供者名录

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


DERMATOLOGY

SINGH, GAURAV

Provider ID: 272612

Board Certified Specialty: No
GAURAV SINGH


 8899 UNIVERSITY CENTER
LN STE 350
SAN DIEGO, CA 92122

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1184073801


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


DERMATOLOGY


STERN, MARLEIGH

Provider ID: 306888

Board Certified Specialty: No

MARLEIGH J STERN


 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1710447883

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


 Website: N/A


DERMATOLOGY

ZUBAIR, RAHEEL

Provider ID: 306520

Board Certified Specialty: No
RAHEEL A ZUBAIR

 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

 Phone: (858) 454-4300
Fax: (858) 454-5088

 After Hours Phone: (858)
454-4300

Provider Gender: Male

NPI: 1326493024

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

AMANN, CHRISTOPHER

Provider ID: 270913

Board Certified Specialty: No
CHRISTOPHER J AMANN


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1134326895


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, USC
KENNETH NORRIS JR CANCER
HOSPITAL, KECK HOSPITAL OF
USC, USC VERDUGO HILLS
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

AUSTIN, ANDREA

Provider ID: 269291

Board Certified Specialty: No

D3. 专科提供者名录

ANDREA L AUSTIN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1811289093

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
GROSSMONT HOSPITAL, Los
Angeles General Medical
Center, TEMECULA VALLEY
HOSPITAL INC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

BAGBY, JESSICA

Provider ID: 271136

Board Certified Specialty: No
JESSICA A BAGBY

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093161473

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

BARRY, JEFFREY

Provider ID: 271132

Board Certified Specialty: No

JEFFREY R BARRY

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1801207006

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

BARRY, JEFFREY

Provider ID: 271130

Board Certified Specialty: No
JEFFREY R BARRY

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (855) 535-5864

Fax: (888) 539-8781

After Hours Phone: (855)
535-5864

Provider Gender: Male

NPI: 1801207006

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

BARRY, JEFFREY

Provider ID: 271129

Board Certified Specialty: No
JEFFREY R BARRY

4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

D3. 专科提供者名录

926-8273
Provider Gender: Male
NPI: 1801207006
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY

Provider ID: 270333
Board Certified Specialty: No
AMY BELLINGHAUSEN

4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1801206354

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY

Provider ID: 270334
Board Certified Specialty: No
AMY BELLINGHAUSEN

4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1801206354

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY

Provider ID: 270336
Board Certified Specialty: No
AMY BELLINGHAUSEN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1801206354

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

CASTELLANO, TIFFANY

Provider ID: 301706
Board Certified Specialty: No
TIFFANY M CASTELLANO

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

D3. 专科提供者名录

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1063893063

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

EMERGENCY MEDICINE

CASTELLANO, TIFFANY

Provider ID: 279314

Board Certified Specialty: No
TIFFANY M CASTELLANO

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1063893063

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

EMERGENCY MEDICINE

CHEN, ALICE

Provider ID: 287430

Board Certified Specialty: No
ALICE Y CHEN

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1427476597

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

EMERGENCY MEDICINE

CHEN, ALICE

Provider ID: 287428

Board Certified Specialty: No
ALICE Y CHEN

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1427476597

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

EMERGENCY MEDICINE

COYNE, CHRISTOPHER

Provider ID: 303036

Board Certified Specialty: No
CHRISTOPHER J COYNE

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (619) 543-7051

Fax: (619) 543-3115

☎ After Hours Phone: (619) 543-7051

Provider Gender: Male

NPI: 1043590169

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

RADY CHILDRENS HOSPITAL

SAN DIEGO, EL CENTRO




REGIONAL MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

D3. 专科提供者名录

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A



EMERGENCY MEDICINE

GUITTARD, JESSE

Provider ID: 239879
Board Certified Specialty: No
JESSE A GUITTARD




 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (619) 543-6400
 After Hours Phone: (619)
543-6400

Provider Gender: Male
NPI: 1770979890

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999



American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE



HERNANDEZ, CRISTINA

Provider ID: 242544
Board Certified Specialty: No
CRISTINA T HERNANDEZ

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1164765046

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER



 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE


HOGUE, BRENNA

Provider ID: 301711
Board Certified Specialty: No
BRENNA L HOGUE

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1043705296

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


EMERGENCY MEDICINE

HORNBEAK, KIRSTEN

Provider ID: 240022
Board Certified Specialty: No
KRISTEN B HORNBEAK

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1205214442

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

KUTZ, CRAIG

Provider ID: 283845
Board Certified Specialty: No
KUTZ CRAIG MD

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

D3. 专科提供者名录

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1598295925

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR, TRI CITY MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

LIOTTA, BENJAMIN

Provider ID: 285630

Board Certified Specialty: No
BENJAMIN I LIOTTA



 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1396270278

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese

Cultural Competency: N


Hospital Affiliation: SHARP
CHULA VISTA MED CTR, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-8:00PM

 Website: N/A


EMERGENCY MEDICINE


MCDANIEL, MICHELE

Provider ID: 246901

Board Certified Specialty: No
MICHELE A MCDANIEL

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1366761959

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE


NOSTE, ERIN

Provider ID: 239797

Board Certified Specialty: No
ERIN E NOSTE


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-6400

 After Hours Phone: (619)
543-6400

Provider Gender: Female

NPI: 1871732214

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS


HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE


NOSTE, ERIN

Provider ID: 239798

Board Certified Specialty: No
ERIN E NOSTE

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (858) 605-4441

 After Hours Phone: (858)
605-4441

Provider Gender: Female

D3. 专科提供者名录

NPI: 1871732214

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL


CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU
8:00AM-10:00PM
M-F 8:00AM-5:00PM
SA 8:00AM-10:00PM

 Website: N/A


EMERGENCY MEDICINE

PARK, JAY

Provider ID: 285607

Board Certified Specialty: No
JAY H PARK

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1366478372

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE


PHAM, LILY

Provider ID: 304937

Board Certified Specialty: No
LILY M PHAM


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1811423072

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


EMERGENCY MEDICINE

PHAM, LILY

Provider ID: 304933

Board Certified Specialty: No
LILY M PHAM


 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105


 Phone: (619) 280-2905
Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1811423072

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 Website: N/A

EMERGENCY MEDICINE


RUDOLF, FRANCES


Provider ID: 240159

Board Certified Specialty: No

FRANCES E RUDOLPH


 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (858) 657-7000

 After Hours Phone: (858)
657-7000

Provider Gender: Female

NPI: 1821487430

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

D3. 专科提供者名录

American Sign Language (ASL): CHRISTIAN M SLOANE

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

SABHA, MAHMOUD

Provider ID: 243441

Board Certified Specialty: No
MAHMOUD SABHA


 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1457747883

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE


SLOANE, CHRISTIAN

Provider ID: 209518

Board Certified Specialty: No


 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1841233145

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, EL CENTRO

REGIONAL MEDICAL CENTER,

RADY CHILDRENS HOSPITAL

SAN DIEGO, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE


TANAKA, HIDEAKI


Provider ID: 240124

Board Certified Specialty: No

HIDEAKI L TANAKA


 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124280730

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: EL CENTRO

REGIONAL MEDICAL CENTER,

Sharp Grossmont Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 8:00AM-8:00PM
M-F 8:00AM-5:00PM

SA 8:00AM-8:00PM

 Website: N/A


EMERGENCY MEDICINE

YOU, ALAN

Provider ID: 269936

Board Certified Specialty: No
ALAN X YOU

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225425697

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL


CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

D3. 专科提供者名录

YU, ELAINE

Provider ID: 301708

Board Certified Specialty: No

ELAINE YU

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528564150

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

EKANAYAKE, PREETHIKA

Provider ID: 284813

Board Certified Specialty: No

PREETHIKA S EKANAYAKE

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083922462

Provider English Spoken: Y

Provider Language(s)

Spoken: Sinhala, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

EKANAYAKE, PREETHIKA

Provider ID: 284812

Board Certified Specialty: No

PREETHIKA S EKANAYAKE

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083922462

Provider English Spoken: Y

Provider Language(s)

Spoken: Sinhala, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

JUANG, PATRICIA

Provider ID: 255605

Board Certified Specialty: No

PATRICIA S JUANG

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (858) 657-7298

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265695795

Provider English Spoken: Y

Provider Language(s)

Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

KULASA, KRISTEN

Provider ID: 255622

Board Certified Specialty: No

KRISTEN M KULASA

4168 FRONT ST

D3. 专科提供者名录

SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (619) 543-6500
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932324175

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

ENDOCRINOLOGY METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 287781
Board Certified Specialty: No
JODI B NAGELBERG

📍 4168 FRONT ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1720474141

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

ENDOCRINOLOGY METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 287780
Board Certified Specialty: No
JODI B NAGELBERG

📍 330 LEWIS ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1720474141

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

ENDOCRINOLOGY METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 287782
Board Certified Specialty: No
JODI B NAGELBERG

📍 9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1720474141

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

ENDOCRINOLOGY METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 287779
Board Certified Specialty: No
JODI B NAGELBERG

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1720474141


☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

D3. 专科提供者名录

American Sign Language (ASL): LALITA K TANTISIRA

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

SANTOS CAVAIOLA, TRICIA

Provider ID: 256091

Board Certified Specialty: No
TRICIA SANTOS CAVAIOLA

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (858) 657-7298

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1518163799

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY


METABOLISM DIABETES

TANTISIRA, LALITA

Provider ID: 286323

Board Certified Specialty: No

 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1508874298

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Thai

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

VALDEZ, KRYSTAL ANGELI

Provider ID: 299363


Board Certified Specialty: No

KRYSTAL ANGELI A VALDEZ

 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126


 Phone: (844) 200-2426

Fax: (619) 474-4008

 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1629480272

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TWIN

CITIES COMMUNITY

HOSPITAL, SIERRA VISTA

REGIONAL MED CTR,


PARADISE VALLEY HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

VALDEZ, KRYSTAL ANGELI

Provider ID: 299743


Board Certified Specialty: No

KRYSTAL ANGELI A VALDEZ

 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126


 Phone: (844) 200-2426

Fax: (619) 474-4008

 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1629480272

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TWIN

CITIES COMMUNITY

HOSPITAL, SIERRA VISTA

REGIONAL MED CTR,

PARADISE VALLEY HOSPITAL


Medi-Cal Open Panel: Yes


D3. 专科提供者名录

Min/Max Age: 18\100

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 301761

Board Certified Specialty: No
MIGUEL ALVAREZ-ESTRADA

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

Fax: (619) 595-0258

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1588197826

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, PARADISE VALLEY


HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 10:00AM-4:00PM

M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

 Website: N/A


FAMILY PRACTICE

BELL, TRACY


Provider ID: 304813

Board Certified Specialty: No
TRACY L BELL

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1497821318

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 14\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:30PM

 Website: N/A


FAMILY PRACTICE

BELL, TRACY

Provider ID: 304814

Board Certified Specialty: No
TRACY L BELL

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1497821318

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:30PM


 Website: N/A

FAMILY PRACTICE


BERNADETT, ALEX

Provider ID: 296739

Board Certified Specialty: No
ALEX M BERNADETT

 6699 ALVARADO RD STE
2100

SAN DIEGO, CA 92120

 Phone: (619) 229-3909

Fax: (619) 229-3902

 After Hours Phone: (619)
229-3909

Provider Gender: Male

NPI: 1215382841

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\99

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

FAMILY PRACTICE

BERNADETT, ALEX

Provider ID: 296740

Board Certified Specialty: No
ALEX M BERNADETT

 10505 SORRENTO VALLEY

D3. 专科提供者名录

RD STE 200
SAN DIEGO, CA 92121
☎ Phone: (858) 793-7860
☎ Fax: (858) 436-1289
🕒 After Hours Phone: (858) 793-7860
Provider Gender: Male
NPI: 1215382841
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\99
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

FAMILY PRACTICE

CAMPBELL, BRIANNA

Provider ID: 298950
Board Certified Specialty: No
BRIANNA N CAMPBELL
📍 950 S EUCLID AVE
SAN DIEGO, CA 92114
☎ Phone: (619) 662-4100
☎ Fax: (619) 662-4158
🕒 After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1316479892
🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: CHULA VISTA COMM HOSP
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: SU 10:00AM-4:00PM M-F 8:30AM-5:30PM SA 8:00AM-2:30PM
🌐 Website: N/A

FAMILY PRACTICE

CHEN, ALICE

Provider ID: 207164
Board Certified Specialty: No
ALICE I CHEN
📍 330 LEWIS ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1265810337

🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

FAMILY PRACTICE

CHEN, ALICE

Provider ID: 207167




Board Certified Specialty: No
ALICE I CHEN
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1265810337
🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

FAMILY PRACTICE

CHEN, ALICE

Provider ID: 207163
Board Certified Specialty: No
ALICE I CHEN
📍 9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1265810337
🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Chinese

D3. 专科提供者名录



Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

FAMILY PRACTICE



DANG, LAUREL

Provider ID: 309605
Board Certified Specialty: No
LAUREL K DANG
 *9909 MIRA MESA BLVD*
STE 200
SAN DIEGO, CA 92131
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273

Provider Gender: Female
NPI: 1396366050

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Vietnamese

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N



 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

FAMILY PRACTICE




HILL, LINDA

Provider ID: 293210
Board Certified Specialty: No
LINDA L HILL
 *6973 LINDA VISTA RD*
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
Fax: (858) 633-4680
 *After Hours Phone: (858)*
279-0925

Provider Gender: Female
NPI: 1467434811

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: French, Spanish

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:30AM-5:30PM
 *Website: N/A*



FAMILY PRACTICE

HILL, LINDA

Provider ID: 293211
Board Certified Specialty: No
LINDA L HILL
 *7011 LINDA VISTA RD*
SAN DIEGO, CA 92111
 *Phone: (858) 810-8700*
Fax: (858) 633-4680

 *After Hours Phone: (858)*
810-8700



Provider Gender: Female
NPI: 1467434811

 *Provider English Spoken: Y*
 *Provider Language(s)*

Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

FAMILY PRACTICE

JOHN, TANNER




Provider ID: 303515
Board Certified Specialty: No
TANNER T JOHN
 *3177 OCEAN VIEW BLVD*
SAN DIEGO, CA 92113
 *Phone: (619) 662-4100*
Fax: (619) 595-0258

 *After Hours Phone: (619)*
662-4100

Provider Gender: Male
NPI: 1043707326

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

FAMILY PRACTICE

JOLICOEUR, MEGAN

D3. 专科提供者名录

Provider ID: 300060

Board Certified Specialty: No
MEGAN E JOLICOEUR

330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1114366192

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

FAMILY PRACTICE

JOLICOEUR, MEGAN

Provider ID: 300057

Board Certified Specialty: No
MEGAN E JOLICOEUR

8899 UNIVERSITY CENTER
LN STE 350
SAN DIEGO, CA 92122
Phone: (858) 249-6890
After Hours Phone: (858)
249-6890

Provider Gender: Female

NPI: 1114366192

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

FAMILY PRACTICE

JOLICOEUR, MEGAN

Provider ID: 300058

Board Certified Specialty: No
MEGAN E JOLICOEUR

9333 GENESEE AVE
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1114366192

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

FAMILY PRACTICE

JOLICOEUR, MEGAN

Provider ID: 300059

Board Certified Specialty: No
MEGAN E JOLICOEUR

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1114366192

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

FAMILY PRACTICE

KUROSAKA, MOMO

Provider ID: 291447

Board Certified Specialty: No
MOMO C KUROSAKA

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1205848363

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

FAMILY PRACTICE

KUROSAKA, MOMO

Provider ID: 291448

Board Certified Specialty: No
MOMO C KUROSAKA

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1205848363

D3. 专科提供者名录

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

FAMILY PRACTICE

MCLAUGHLIN, ERIK

Provider ID: 303847
Board Certified Specialty: No
ERIK J MCLAUGHLIN

2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
Fax: (619) 234-0505
 After Hours Phone: (619)
234-2158
Provider Gender: Male
NPI: 1861637217

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

FAMILY PRACTICE

PERESS, LILIA

Provider ID: 304276
Board Certified Specialty: No
LILIA PERESS

7011 LINDA VISTA RD

SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700
Provider Gender: Female
NPI: 1275945446
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Ukrainian

Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

FAMILY PRACTICE

PERESS, LILIA

Provider ID: 304277
Board Certified Specialty: No
LILIA PERESS

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680
 After Hours Phone: (858)
279-0925
Provider Gender: Female
NPI: 1275945446

Provider English Spoken: Y
 Provider Language(s)
Spoken: Ukrainian
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

FAMILY PRACTICE

RISSER, JOSEPH

Provider ID: 293216
Board Certified Specialty: Yes
JOSEPH A RISSER

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680
 After Hours Phone: (858)
279-0925
Provider Gender: Male
NPI: 1952386765

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

FAMILY PRACTICE

RISSER, JOSEPH

Provider ID: 293217
Board Certified Specialty: No
JOSEPH A RISSER


7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680

D3. 专科提供者名录

 After Hours Phone: (858) 810-8700

Provider Gender: Male

NPI: 1952386765

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


FAMILY PRACTICE

ROSADO, IVAN


Provider ID: 299244

Board Certified Specialty: No
IVAN H ROSADO

 316 25TH ST
SAN DIEGO, CA 92102


 Phone: (619) 662-4100

Fax: (619) 238-3807

 After Hours Phone: (619) 662-4100

Provider Gender: Male

NPI: 1316479603

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 8:30AM-5:30PM
M-F 8:30AM-5:30PM
SA 8:30AM-2:30PM


 Website: N/A


FAMILY PRACTICE

SCOTT, LAGINA


Provider ID: 302648

Board Certified Specialty: No
LAGINA R SCOTT

 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

Fax: (619) 263-9601

 After Hours Phone: (619) 662-4100

Provider Gender: Female

NPI: 1558897009

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

FAMILY PRACTICE


SUMMERS-DAY, COURTNEY

Provider ID: 290976

Board Certified Specialty: Yes

COURTNEY A SUMMERS-DAY

 1016 OUTER RD
SAN DIEGO, CA 92154


 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619) 429-3733

Provider Gender: Female

NPI: 1124288873

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

FAMILY PRACTICE


VAN PRATT LEVIN, BENJAMIN

Provider ID: 302531

Board Certified Specialty: No
BENJAMIN A VAN PRATT

LEVIN

 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619) 429-3733

Provider Gender: Male

NPI: 1619438330

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

FAMILY PRACTICE

D3. 专科提供者名录

VO, PHULUONG

Provider ID: 303332

Board Certified Specialty: No
PHULUONG T VO

📍 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

☎ Phone: (619) 662-4100
Fax: (619) 205-6305

🕒 After Hours Phone: (619)
662-4100

Provider Gender: Female
NPI: 1043849177

🗣 Provider English Spoken: Y
🗣 Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

FAMILY PRACTICE GERIATRIC MEDICINE

MILLER, SCOTT

Provider ID: 271539

Board Certified Specialty: No
SCOTT B MILLER

📍 9878 CARMEL MOUNTAIN
RD STE B
SAN DIEGO, CA 92129

☎ Phone: (858) 312-1440
Fax: (760) 788-7983

🕒 After Hours Phone: (858)
312-1440

Provider Gender: Male
NPI: 1104845536

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

GASTROENTEROLOGY

ANAND, GOBIND

Provider ID: 272837

Board Certified Specialty: No
GOBIND S ANAND

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (619) 543-2347
Fax: (858) 657-7259

🕒 After Hours Phone: (619)
543-2347

Provider Gender: Male
NPI: 1861626814

🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

GASTROENTEROLOGY

ANAND, GOBIND

Provider ID: 304187

Board Certified Specialty: No
GOBIND S ANAND

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1861626814

🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

GASTROENTEROLOGY

BAUMAN, LAURA

Provider ID: 260041

Board Certified Specialty: No
LAURA E BAUMAN

📍 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123
☎ Phone: (858) 966-4003

Fax: (858) 560-6798
🕒 After Hours Phone: (858)
966-4003

Provider Gender: Female
NPI: 1255697850

🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

D3. 专科提供者名录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


GASTROENTEROLOGY


DAVE, SHRAVAN

Provider ID: 270450

Board Certified Specialty: No
SHRAVAN S DAVE

 4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1588081814


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GASTROENTEROLOGY

DAVE, SHRAVAN

Provider ID: 304204

Board Certified Specialty: No
SHRAVAN S DAVE

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1588081814

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


GASTROENTEROLOGY

HASAN, AWS

Provider ID: 299951

Board Certified Specialty: No
AWS K HASAN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1780047597

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


 Website: N/A


GASTROENTEROLOGY

HILDRETH, AMBER

Provider ID: 280464

Board Certified Specialty: No
AMBER N HILDRETH

 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123

 Phone: (858) 966-4003
Fax: (858) 560-6798

 After Hours Phone: (858)
966-4003

Provider Gender: Female

NPI: 1548521511

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


GASTROENTEROLOGY

KUMAR, SOMA

Provider ID: 205377

Board Certified Specialty: No
SOMA KUMAR

 3030 CHILDRENS WAY FL
2 SOUTH
SAN DIEGO, CA 92123

 Phone: (858) 966-4003
Fax: (858) 560-6798




 After Hours Phone: (858)
966-4003

Provider Gender: Female

NPI: 1356502520





 Provider English Spoken: Y


D3. 专科提供者名录

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

GASTROENTEROLOGY




NOVO, MEGAN




Provider ID: 296066
Board Certified Specialty: No
MEGAN E NOVO
 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
 *Phone: (619) 266-3332*
Fax: (619) 266-6000
 *After Hours Phone: (619) 266-3332*
Provider Gender: Female
NPI: 1770961971
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL CHULA VISTA, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes

Min/Max Age: 18\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

GASTROENTEROLOGY

POLK, DAVID

Provider ID: 275449
Board Certified Specialty: No
DAVID B POLK
 3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
 *Phone: (760) 294-9260*
Fax: (760) 294-9274
 *After Hours Phone: (760) 294-9260*
Provider Gender: Male
NPI: 1427140839
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSP OF LOS ANGELES



Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

GASTROENTEROLOGY




REDDY, JOSEPH

Provider ID: 290034

Board Certified Specialty: Yes
JOSEPH B REDDY
 6699 ALVARADO RD STE 2301
SAN DIEGO, CA 92120
 *Phone: (619) 599-4074*
Fax: (619) 588-4004
 *After Hours Phone: (619) 599-4074*




Provider Gender: Male
NPI: 1245215391
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Hindi, Spanish, Telugu*

Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

GASTROENTEROLOGY

REDDY, JOSEPH

Provider ID: 27748
Board Certified Specialty: Yes
JOSEPH B REDDY
 6699 ALVARADO RD STE 2301
SAN DIEGO, CA 92120
 *Phone: (619) 599-4074*
Fax: (619) 588-4004
 *After Hours Phone: (619) 599-4074*
Provider Gender: Male

D3. 专科提供者名录

NPI: 1245215391

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish,
Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

GASTROENTEROLOGY

SHAFFER, KATHERINE

Provider ID: 295712

Board Certified Specialty: No
KATHERINE M SHAFFER

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Phone: (619) 266-3332

Fax: (619) 266-6006

After Hours Phone: (619)
266-3332

Provider Gender: Female

NPI: 1336405695

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

GASTROENTEROLOGY

SHAH, SHAILJA

Provider ID: 304178

Board Certified Specialty: No

SHAILJA C SHAH

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073803243

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

GASTROENTEROLOGY

SHAH, SHAILJA

Provider ID: 283896

Board Certified Specialty: No
SHAILJA C SHAH

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073803243

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

GASTROENTEROLOGY

TSAI, MATTHEW

Provider ID: 304196

Board Certified Specialty: No
MATTHEW TSAI

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285051177

Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

D3. 专科提供者名录

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A


GASTROENTEROLOGY

YOUSSEF, FADY

Provider ID: 300024

Board Certified Specialty: No
FADY F YOUSSEF

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265887723

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A


GASTROENTEROLOGY

YOUSSEF, FADY

Provider ID: 304186

Board Certified Specialty: No
FADY F YOUSSEF

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265887723

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A


GENETICS CLINICAL

REIMERS, REBECCA

Provider ID: 294650

Board Certified Specialty: No
REBECCA M REIMERS

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-6710
Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GENETICS CLINICAL

REIMERS, REBECCA

Provider ID: 302348

Board Certified Specialty: No
REBECCA M REIMERS

 7920 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 966-5840
Fax: (858) 966-8550

 After Hours Phone: (858)
966-5840

Provider Gender: Female

NPI: 1801207634

Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GENETICS MEDICAL

DELCAMPOCASANELLES, MIGUEL

Provider ID: 206013

Board Certified Specialty: No
MIGUEL

 7920 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 966-5840
Fax: (858) 966-4064

 After Hours Phone: (858)
966-5840

Provider Gender: Male

NPI: 1598141475

D3. 专科提供者名录

Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Italian,
Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

GENETICS MEDICAL

NIEMI, ANNA-KAISA

Provider ID: 307094

Board Certified Specialty: No
ANNA-KAISA NIEMI

7920 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 966-5840
Fax: (858) 966-8550

After Hours Phone: (858)
966-5840

Provider Gender: Female
NPI: 1497941397

Provider English Spoken: Y
 Provider Language(s)
Spoken: Finnish, French,
German, Spanish, Swedish
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,

SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE

Provider ID: 268691

Board Certified Specialty: No
ELAINE ANDERSON

9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123

Phone: (858) 278-9911
Fax: (858) 565-7324

After Hours Phone: (858)
278-9911

Provider Gender: Female
NPI: 1063558856

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE

Provider ID: 268689

Board Certified Specialty: No
ELAINE ANDERSON

6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120

Phone: (619) 583-7002
Fax: (619) 583-9404

After Hours Phone: (619)
583-7002

Provider Gender: Female
NPI: 1063558856

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE

Provider ID: 268652

Board Certified Specialty: No
KELLE L DAVIS

6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120


Phone: (619) 583-7002
Fax: (619) 583-9404


After Hours Phone: (619)
583-7002


Provider Gender: Female
NPI: 1902853344

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

D3. 专科提供者名录

American Sign Language (ASL):  Phone: (800) 926-8273
N Fax: (888) 539-8781

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A


HEARING AID DEALER / SUPPLIER

DAVIS, KELLE

Provider ID: 268653

Board Certified Specialty: No
KELLE L DAVIS

 9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123

 Phone: (858) 278-9911
Fax: (858) 565-7324

 After Hours Phone: (858)
278-9911


Provider Gender: Female
NPI: 1902853344

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A

HEMATOLOGY / ONCOLOGY

CHEN, YU-WEI

Provider ID: 303059

Board Certified Specialty: No
YU-WEI CHEN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1245694801

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


HEMATOLOGY / ONCOLOGY


LEE, KAREN

Provider ID: 284165

Board Certified Specialty: No
KAREN K LEE

 3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

 Phone: (858) 966-5811
Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Female
NPI: 1518352970

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


HEMATOLOGY / ONCOLOGY

NGUYEN, ANTHONY

Provider ID: 301060

Board Certified Specialty: No
ANTHONY L NGUYEN

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1295153575

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: LOMA
LINDA UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


HEMATOLOGY / ONCOLOGY


PAUL, MEGAN

Provider ID: 274499

Board Certified Specialty: No
MEGAN R PAUL





 3010 CHILDRENS WAY STE
2W

SAN DIEGO, CA 92123
 Phone: (858) 966-5811
Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811







Provider Gender: Female
NPI: 1427495894


D3. 专科提供者名录

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

HEMATOLOGY / ONCOLOGY

VU, PETER


Provider ID: 272716
Board Certified Specialty: No
PETER VU
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1861810830
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F


8:00AM-5:00PM
 Website: N/A

HEMATOLOGY / ONCOLOGY

ZHOU, JENNY

Provider ID: 273188
Board Certified Specialty: No
JENNY Y ZHOU
 9333 GENESEE AVE STE
310
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273





Provider Gender: Female
NPI: 1598007924
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

HOSPICE AND PALLIATIVE MEDICINE




RUBENZI, TAMARA

Provider ID: 276671
Board Certified Specialty: No
TAMARA T RUBENZI
 4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1811200652
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

HOSPICE AND PALLIATIVE MEDICINE

RUBENZI, TAMARA

Provider ID: 245573
Board Certified Specialty: No
TAMARA T RUBENZI
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1811200652
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes


D3. 专科提供者名录

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INFECTIOUS DISEASE

ALDOUS, JEANNETTE

Provider ID: 290420

Board Certified Specialty: No
JEANNETTE L ALDOUS

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

Fax: (619) 205-6384

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1073650339

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


INFECTIOUS DISEASE

BAMFORD, LAURA


Provider ID: 276546

Board Certified Specialty: No
LAURA P BAMFORD

 4168 FRONT ST FL 3
SAN DIEGO, CA 92103


 Phone: (619) 543-6382

Fax: (888) 539-8781

 After Hours Phone: (619)
543-6382

Provider Gender: Female

NPI: 1750435996

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INFECTIOUS DISEASE


DEISS, ROBERT


Provider ID: 258330

Board Certified Specialty: No

ROBERT G DEISS

 4168 FRONT ST FL 3
SAN DIEGO, CA 92103


 Phone: (619) 543-3995

 After Hours Phone: (619)
543-3995

Provider Gender: Male

NPI: 1194977652

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INFECTIOUS DISEASE


HORTON, LUCY


Provider ID: 240887

Board Certified Specialty: No

LUCY E HORTON

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427324821

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INFECTIOUS DISEASE

KUPPALLI, KRUTIKA

Provider ID: 301058

D3. 专科提供者名录

Board Certified Specialty: No
KRUTIKA KUPPALLI

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1538346317

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, Stanford Health
Care, STANFORD HEALTH
CARE TRI-VALLEY

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

INFECTIOUS DISEASE

MARTIN, THOMAS

Provider ID: 277226

Board Certified Specialty: No
THOMAS C MARTIN

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1093193583

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INFECTIOUS DISEASE

MARTIN, THOMAS

Provider ID: 277225

Board Certified Specialty: No
THOMAS C MARTIN

4168 FRONT ST FL 3
SAN DIEGO, CA 92103
Phone: (619) 543-5890
Fax: (888) 539-8781

After Hours Phone: (619)
543-5890

Provider Gender: Male

NPI: 1093193583

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INFECTIOUS DISEASE

MOODLEY, AMARAN

Provider ID: 208558

Board Certified Specialty: No
AMARAN MOODLEY

3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123

Phone: (885) 966-7785
Fax: (858) 966-8658

After Hours Phone: (885)
966-7785

Provider Gender: Male

NPI: 1104023670

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INFECTIOUS DISEASE

PANNARAJ, PIA

Provider ID: 301026

Board Certified Specialty: No
PIA S PANNARAJ

3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123

Phone: (858) 966-7785
Fax: (858) 966-8658

After Hours Phone: (858)
966-7785

Provider Gender: Female

NPI: 1942478524

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS

D3. 专科提供者名录

ANGELES, HOLLYWOOD
PRESBYTERIAN MED CTR,
RADY CHILDRENS HOSPITAL
SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INFECTIOUS DISEASE


RAJAGOPAL, AMUTHA

Provider ID: 221088

Board Certified Specialty: No
AMUTHA V RAJAGOPAL


 4168 FRONT ST FL 3
SAN DIEGO, CA 92103

 Phone: (619) 433-3995

 After Hours Phone: (619)
433-3995

Provider Gender: Female

NPI: 1124465745

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INFECTIOUS DISEASE


RAMIREZSANCHEZ, CLAUDIA

Provider ID: 299946

Board Certified Specialty: No
CLAUDIA C RAMIREZSANCHEZ

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1659720555

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

INFECTIOUS DISEASE

TOVARPADUA, LEIDY


Provider ID: 205357


Board Certified Specialty: No

LEIDY J TOVARPADUA

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

 Phone: (858) 966-7785

 Fax: (858) 966-8658

 After Hours Phone: (858)
966-7785

Provider Gender: Female

NPI: 1033491311

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, CHILDRENS HOSP OF
LOS ANGELES, LONG BEACH


MEMORIAL MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INFECTIOUS DISEASE


TOVARPADUA, LEIDY


Provider ID: 265093

Board Certified Specialty: No

LEIDY J TOVARPADUA

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1033491311

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, CHILDRENS HOSP OF
LOS ANGELES, LONG BEACH

MEMORIAL MED CTR


Medi-Cal Open Panel: Yes


D3. 专科提供者名录

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE


ARUTYUNOV, BORIS

Provider ID: 201910

Board Certified Specialty: No
BORIS S ARUTYUNOV

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 471-9186

 After Hours Phone: (619)
471-9186

Provider Gender: Male

NPI: 1144562703

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN
HOSPITAL, SUTTER MEDICAL
CENTER SACRAMENTO, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

BALL, SHELDON

Provider ID: 294136

Board Certified Specialty: No
SHELDON S BALL

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Male

NPI: 1689646275


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

 Website: N/A


INTERNAL MEDICINE

BALL, SHELDON

Provider ID: 294137

Board Certified Specialty: No
SHELDON S BALL

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1689646275

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

 Website: N/A


INTERNAL MEDICINE

BORDIN-WOSK, TALYA

Provider ID: 273983

Board Certified Specialty: No
TALYA S BORDIN WOSK

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (760) 471-9186

Fax: (619) 543-8255

 After Hours Phone: (760)
471-9186

Provider Gender: Female

NPI: 1801184973

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

CHENG, GEORGE

D3. 专科提供者名录

Provider ID: 247639

Board Certified Specialty: No
GEORGE Z CHENG

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1316174568

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

DJEKIC, KRISTINA

Provider ID: 286668

Board Certified Specialty: No
KRISTINA DJEKIC

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1417343732

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

GRUNVALD, EDUARDO

Provider ID: 286344

Board Certified Specialty: No
EDUARDO L GRUNVALD

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497791339

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

GRUNVALD, EDUARDO

Provider ID: 286343

Board Certified Specialty: No
EDUARDO L GRUNVALD

4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497791339

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

HASTIE, ELIZABETH

Provider ID: 291431

Board Certified Specialty: No
ELIZABETH B HASTIE

200 W ARBOR DR
SAN DIEGO, CA 92103

D3. 专科提供者名录

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1154818797

🗉 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

INTERNAL MEDICINE

HOGARTH, MICHAEL

Provider ID: 214386

Board Certified Specialty: No

MICHAEL A HOGARTH

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1225019193

🗉 Provider English Spoken: Y

🗉 Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON, UC

DAVIS MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

INTERNAL MEDICINE

JABBOUR, MOUSSA

Provider ID: 256659

Board Certified Specialty: No

MOUSSA JABBOUR

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1255741633

🗉 Provider English Spoken: Y

🗉 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

INTERNAL MEDICINE

KATZ, YISRAEL

Provider ID: 272936

Board Certified Specialty: No

YISRAEL KATZ

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1730507872

🗉 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

INTERNAL MEDICINE

KVIATKOVSKY, MILLA

Provider ID: 274003

Board Certified Specialty: No

MILLA J KVIATKOVSKY

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (619) 543-6222

🕒 After Hours Phone: (619) 543-6222

Provider Gender: Female

NPI: 1366855355

🗉 Provider English Spoken: Y

🗉 Provider Language(s)
Spoken: Finnish, French,
Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA




JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

D3. 专科提供者名录



 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE



LAGO HERNANDEZ, CARLOS

Provider ID: 238622
Board Certified Specialty: No
CARLOS A LAGO-HERNANDEZ

 200 W ARBOR DR
SAN DIEGO, CA 92103




 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1558756270

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

LAM, MICHAEL



Provider ID: 274411
Board Certified Specialty: No
MICHAEL T LAM

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1578974259


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

INTERNAL MEDICINE

LAM, MICHAEL



Provider ID: 274410
Board Certified Specialty: No
MICHAEL T LAM

 4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273


Provider Gender: Male
NPI: 1578974259

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

INTERNAL MEDICINE

LEVERONE, NICHOLAS


Provider ID: 272692
Board Certified Specialty: No
NICHOLAS A LEVERONE

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1407388564

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

MAJITHIA, AMIT

D3. 专科提供者名录

Provider ID: 255882

Board Certified Specialty: No
AMIT R MAJITHIA

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1801091459

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

MARTINEZ, ARMANDO

Provider ID: 291421

Board Certified Specialty: No
ARMANDO R MARTINEZ

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1598261091

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

INTERNAL MEDICINE

MUNCE, DANIELLE

Provider ID: 272577

Board Certified Specialty: No
DANIELLE F MUNCE

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1740644509

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

NOKES, BRANDON

Provider ID: 287582

Board Certified Specialty: No
BRANDON T NOKES

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1487040051

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

SEBASKY, MEGHAN

Provider ID: 273962

Board Certified Specialty: No
MEGHAN M SEBASKY

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-6222

Fax: (619) 543-8255

After Hours Phone: (619)
543-6222

Provider Gender: Female

NPI: 1538351408

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


D3. 专科提供者名录

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

SHAMSINEJAD BABAKI, ARASH

Provider ID: 309544

Board Certified Specialty: No
ARASH SHAMSINEJAD BABAKI

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173


 Phone: (619) 662-4100


Fax: (619) 785-3384

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1750498119

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi


Cultural Competency: N


Hospital Affiliation: ST MARYS
MEDICAL CENTER SAN
FRANCISCO


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE


SMITH, CHELSEY

Provider ID: 239920

Board Certified Specialty: No
CHELSEY J SMITH


 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (858) 657-6110

 After Hours Phone: (858)
657-6110

Provider Gender: Female

NPI: 1013264506

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

TANTISIRA, LALITA


Provider ID: 275926

Board Certified Specialty: No
LALITA K TANTISIRA

 4520 EXECUTIVE DR
SAN DIEGO, CA 92121


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1508874298

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Thai


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

TANTISIRA, LALITA

Provider ID: 275927

Board Certified Specialty: No
LALITA K TANTISIRA

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1508874298

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Thai


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

TAYLOR, DAVID

Provider ID: 274469

D3. 专科提供者名录

Board Certified Specialty: No
DAVID S TAYLOR

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033572995

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

THOMAS, ROBERT

Provider ID: 238929

Board Certified Specialty: Yes

ROBERT L THOMAS III

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1053765909

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

WANG, ANGELA

Provider ID: 259535

Board Certified Specialty: No
ANGELA C WANG

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730133976

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

WANG, ANGELA

Provider ID: 259534

Board Certified Specialty: No
ANGELA C WANG

4520 EXECUTIVE DR STE
P2

SAN DIEGO, CA 92121

Phone: (855) 355-5864

Fax: (888) 539-8781

After Hours Phone: (855)
355-5864

Provider Gender: Female

NPI: 1730133976

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

WEBSTER, LUKE

Provider ID: 272681

Board Certified Specialty: No

LUKE A WEBSTER

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1235660887

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

D3. 专科提供者名录

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): Provider ID: 283027

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

YANG, JENNY

Provider ID: 283026

Board Certified Specialty: No
JENNY Z YANG

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346636453

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

YANG, JENNY

Board Certified Specialty: No
JENNY Z YANG

 4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346636453

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

ZHANG, SHERRY

Provider ID: 272657

Board Certified Specialty: No
SHERRY S ZHANG

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1588198147

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

GERIATRIC MEDICINE


AGNIHOTRI, PARAG

Provider ID: 247292

Board Certified Specialty: No
PARAG AGNIHOTRI

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1447351085

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: MERCY
GENERAL HOSPITAL


Medi-Cal Open Panel: Yes


D3. 专科提供者名录

Min/Max Age: 0\999

American Sign Language (ASL): Provider ID: 301814

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL

CARDIOLOGY


CRUZ RODRIGUEZ, JOSE

Provider ID: 300061

Board Certified Specialty: No

JOSE B CRUZ RODRIGUEZ


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1457770240

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL, EL
CENTRO REGIONAL MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

INTERVENTIONAL


CARDIOLOGY

KINGDON, TYLER

Provider ID: 301814

Board Certified Specialty: No
TYLER C KINGDON

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855
Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1477084283

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSPITAL OF
ORANGE COUNTY, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL


CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 309250

Board Certified Specialty: No
BURHAN MOHAMEDALI

 412 WASHINGTON ST
SAN DIEGO, CA 92103

 Phone: (619) 616-2100
Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1831393289

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
Adventist Health and Rideout


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

INTERVENTIONAL


CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 245577

Board Certified Specialty: No
BURHAN MOHAMEDALI

 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

 Phone: (619) 616-2100
Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1831393289

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
Adventist Health and Rideout

Medi-Cal Open Panel: Yes


D3. 专科提供者名录


Min/Max Age: 0\999

American Sign Language (ASL): HOSP AND HEALTHCARE CTR

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

INTERVENTIONAL

CARDIOLOGY

SHEREV, DIMITRI


Provider ID: 302987

Board Certified Specialty: No


DIMITRI A SHEREV

 6402 EL CAJON BLVD STE
102

SAN DIEGO, CA 92115

 Phone: (619) 582-4490


Fax: (619) 582-4737

 After Hours Phone: (619)
582-4490

Provider Gender: Male

NPI: 1154323996

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Bulgarian, Russian,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, ALVARADO

HOSPITAL LLC, SHARP CHULA

VISTA MED CTR, TRI CITY

MEDICAL CTR, TRI CITY

MEDICAL CTR, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, Sharp Grossmont

Hospital, SHARP CORONADO

HOSP AND HEALTHCARE CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

INTERVENTIONAL


CARDIOLOGY


SUDHAKAR, DEEPTHI

Provider ID: 296050

Board Certified Specialty: No

DEEPTHI SUDHAKAR

 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114


 Phone: (619) 616-2100

Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SHARP

CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 15\99

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL

CARDIOLOGY


SUDHAKAR, DEEPTHI

Provider ID: 309096

Board Certified Specialty: No

DEEPTHI SUDHAKAR

 412 WASHINGTON ST
SAN DIEGO, CA 92103

 Phone: (619) 616-2100

Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SHARP


CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 15\99

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL

CARDIOLOGY


SUDHAKAR, DEEPTHI

Provider ID: 295844

Board Certified Specialty: No

DEEPTHI SUDHAKAR

 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

 Phone: (619) 616-2100

Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

D3. 专科提供者名录

Provider Gender: Female

NPI: 1811307051


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Sharp
Grossmont Hospital, SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 15\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


LICENSED PROFESSIONAL CLINICAL COUNSELOR

GARCIA, JENNI

Provider ID: 299310

Board Certified Specialty: No
JENNI GARCIA

 3025 BEYER BLVD
SAN DIEGO, CA 92154


 Phone: (619) 662-4100

Fax: (619) 662-4119

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1437775863

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

LICENSED PROFESSIONAL CLINICAL COUNSELOR


NAKAMURA, TIFFANY


Provider ID: 239584

Board Certified Specialty: No
TIFFANY NAKAMURA

 4510 EXECUTIVE DR STE
315

SAN DIEGO, CA 92121

 Phone: (858) 534-8019

 After Hours Phone: (858)
534-8019

Provider Gender: Female

NPI: 1356846349


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

ADAMI, REBECCA

Provider ID: 277179

Board Certified Specialty: No
REBECCA R ADAMI

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123



 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1992149447

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


MATERNAL AND FETAL MEDICINE

ADAMI, REBECCA

Provider ID: 272670

Board Certified Specialty: No
REBECCA R ADAMI

 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1992149447

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL

D3. 专科提供者名录


HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI

Provider ID: 300011

Board Certified Specialty: No
UKACHI N EMERUWA

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1245627421

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI

Provider ID: 300012

Board Certified Specialty: No
UKACHI N EMERUWA

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1245627421

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI

Provider ID: 300010

Board Certified Specialty: No
UKACHI N EMERUWA

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1245627421


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


MATERNAL AND FETAL MEDICINE


LAURENT, LOUISE

Provider ID: 208640

Board Certified Specialty: No
LOUISE C LAURENT

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770532707

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL


HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,


SCRIPPS MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE





MCCULLOUGH, DEIRDRE


Provider ID: 210034

Board Certified Specialty: No
DEIRDRE M MCCULLOUGH

 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

D3. 专科提供者名录




 Phone: (858) 966-6710
 Fax: (858) 939-4102
 After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1639153018
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE



MCCULLOUGH, DEIRDRE




Provider ID: 277260
Board Certified Specialty: No
DEIRDRE M MCCULLOUGH
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1639153018
 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE









MELBER, DORA

Provider ID: 296990
Board Certified Specialty: No
DORA J MELBER
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1124413026
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 296998
Board Certified Specialty: No
DORA J MELBER
 7910 FROST ST STE 220 SAN DIEGO, CA 92123
 Phone: (858) 966-6710
 After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1124413026
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL

D3. 专科提供者名录

MEDICINE

MELBER, DORA

Provider ID: 296989

Board Certified Specialty: No

DORA J MELBER

7910 FROST ST STE 430
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1124413026

Provider English Spoken: Y

Provider Language(s)
Spoken: Hungarian, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL

MEDICINE

MELBER, DORA

Provider ID: 296994

Board Certified Specialty: No

DORA J MELBER

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 939-4102

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1124413026

Provider English Spoken: Y

Provider Language(s)
Spoken: Hungarian, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL

MEDICINE

MOORE, THOMAS

Provider ID: 208644

Board Certified Specialty: No

THOMAS R MOORE

4910 DIRECTORS PL STE
200

SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1184682379

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL

MEDICINE

MOORE, THOMAS

Provider ID: 208643

Board Certified Specialty: No

THOMAS R MOORE

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1184682379

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL

MEDICINE

D3. 专科提供者名录

REIMERS, REBECCA

Provider ID: 294648

Board Certified Specialty: No
REBECCA M REIMERS

7910 FROST ST STE 220
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294647

Board Certified Specialty: Yes
REBECCA M REIMERS

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 939-4102

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE

Provider ID: 214436

Board Certified Specialty: No
ALVIE C RICHARDSON

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 939-4102

After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1154305977

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY

CHILDRENS HOSPITAL SAN
DIEGO, Sharp Grossmont

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE

Provider ID: 277314

Board Certified Specialty: No
ALVIE C RICHARDSON

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1154305977

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY

CHILDRENS HOSPITAL SAN
DIEGO, Sharp Grossmont

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE

Provider ID: 277304

Board Certified Specialty: No

D3. 专科提供者名录

WADE D SCHWENDEMANN

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1477563302

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, TRI CITY
MEDICAL CTR, Sharp

Grossmont Hospital, Sharp

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE

Provider ID: 277307

Board Certified Specialty: No
WADE D SCHWENDEMANN

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 939-4102

After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1477563302

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, TRI CITY
MEDICAL CTR, Sharp

Grossmont Hospital, Sharp

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

SHANNON, KELLI

Provider ID: 208474

Board Certified Specialty: No
KELLI K SHANNON

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1922156397

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA

Provider ID: 287084

Board Certified Specialty: No

MELISSA L WESTERMANN

7910 FROST ST STE 220
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1760730758

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
EARL AND LORRAINE MILLER
CHILDRENS HSP, LONG





BEACH MEMORIAL MED CTR,
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, SHARP



D3. 专科提供者名录

MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
Sharp Grossmont Hospital,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE





WESTERMANN, MELISSA




Provider ID: 242522
Board Certified Specialty: No
MELISSA L WESTERMANN
 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
 Phone: (858) 966-6710
Fax: (858) 939-4102
 After Hours Phone: (858)
966-6710
Provider Gender: Female
NPI: 1760730758
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
EARL AND LORRAINE MILLER
CHILDRENS HSP, LONG
BEACH MEMORIAL MED CTR,
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, SHARP
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
Sharp Grossmont Hospital,

Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE





WESTERMANN, MELISSA

Provider ID: 277353
Board Certified Specialty: No
MELISSA L WESTERMANN
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-6710
Fax: (858) 966-6711
 After Hours Phone: (858)
966-6710
Provider Gender: Female
NPI: 1760730758
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
EARL AND LORRAINE MILLER
CHILDRENS HSP, LONG
BEACH MEMORIAL MED CTR,
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, SHARP
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
Sharp Grossmont Hospital,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19




American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE

WILLIAMS, KRISTIN

Provider ID: 277383
Board Certified Specialty: No
KRISTIN M WILLIAMS
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-6710
Fax: (858) 966-6711
 After Hours Phone: (858)
966-6710
Provider Gender: Female
NPI: 1992847131
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
SAN MATEO MEDICAL CTR,
SHARP MEMORIAL HOSPITAL,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, TRI CITY
MEDICAL CTR, CALIFORNIA
PACIFIC MED CTR,
CALIFORNIA PACIFIC MED
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

D3. 专科提供者名录

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*


MATERNAL AND FETAL MEDICINE

WILLIAMS, KRISTIN

Provider ID: 277387

*Board Certified Specialty: No
KRISTIN M WILLIAMS*

 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

 *Phone: (858) 966-6710*

Fax: (858) 966-6711

 *After Hours Phone: (858)
966-6710*

Provider Gender: Female

NPI: 1992847131



 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
SAN MATEO MEDICAL CTR,
SHARP MEMORIAL HOSPITAL,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, TRI CITY
MEDICAL CTR, CALIFORNIA
PACIFIC MED CTR,
CALIFORNIA PACIFIC MED
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19*

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

MATERNAL AND FETAL MEDICINE

WOLF, RICHARD


Provider ID: 209253

*Board Certified Specialty: No
RICHARD B WOLF*

 4910 DIRECTORS PL STE
200

SAN DIEGO, CA 92121

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1497713846

 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, PALOMAR
MEDICAL CENTER, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON*


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


NEONATAL / PERINATAL MEDICINE


BAI-TONG, SHIYU

Provider ID: 283285

*Board Certified Specialty: No
SHIYU S BAI-TONG*

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 *Phone: (858) 966-5818*

 *After Hours Phone: (858)
966-5818*

Provider Gender: Female

NPI: 1528454188


 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


NEONATAL / PERINATAL MEDICINE

CARROLL, JEANNE

Provider ID: 205727

*Board Certified Specialty: Yes
JEANNE M CARROLL*

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 *Phone: (858) 966-5818*

Fax: (858) 966-7483

 *After Hours Phone: (858)
966-5818*

D3. 专科提供者名录

Provider Gender: Female

NPI: 1386928224

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

DELROSARIO, PAMELA

Provider ID: 295000

Board Certified Specialty: No
PAMELA G DELROSARIO

📍 3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5888

📞 After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1952691941

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

FLEMING, SARAH

Provider ID: 205645

Board Certified Specialty: No
SARAH E FLEMING

📍 4077 5TH AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 260-7046

Fax: (619) 686-3843

📞 After Hours Phone: (619)
260-7046

Provider Gender: Female

NPI: 1679809826

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

GLENN, TARA

Provider ID: 283159

Board Certified Specialty: No
TARA JACKSON GLENN

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5818

Fax: (858) 966-7483

📞 After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1992060974

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

HIETALATI, SAMANTHA

Provider ID: 294251

Board Certified Specialty: Yes
SAMANTHA M HIETALATI

📍 3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5888

Fax: (858) 249-5839

📞 After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1245617489

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


D3. 专科提供者名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

Min/Max Age: 0\19


American Sign Language (ASL): American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

Min/Max Age: 0\19


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

HONOLD, JOSE


Provider ID: 242881


Board Certified Specialty: No

JOSE A HONOLD

 4077 5TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 691-7000

 After Hours Phone: (619) 691-7000

Provider Gender: Male

NPI: 1093886855

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, PIONEERS MEMORIAL

HOSPITAL, SOUTHWEST

HEALTHCARE INLAND VALLEY

HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, EL CENTRO REGIONAL

MEDICAL CENTER, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL

Medi-Cal Open Panel: Yes

NEONATAL / PERINATAL MEDICINE


HONOLD, JOSE

Provider ID: 205941

Board Certified Specialty: No

JOSE A HONOLD

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5818

Fax: (858) 966-7483

 After Hours Phone: (858) 966-5818

Provider Gender: Male

NPI: 1093886855

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, PIONEERS MEMORIAL

HOSPITAL, SOUTHWEST

HEALTHCARE INLAND VALLEY

HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, EL CENTRO REGIONAL

MEDICAL CENTER, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL

Medi-Cal Open Panel: Yes

NEONATAL / PERINATAL MEDICINE


LANE, BRIAN

Provider ID: 205707

Board Certified Specialty: No

BRIAN P LANE

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5818

Fax: (858) 966-7483

 After Hours Phone: (858) 966-5818

Provider Gender: Male

NPI: 1427129287

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS MEMORIAL

HOSPITAL, SHARP CHULA

VISTA MED CTR, SOUTHWEST

HEALTHCARE INLAND VALLEY

HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA


VISTA


Medi-Cal Open Panel: Yes

D3. 专科提供者名录

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

LE, CRYSTAL

Provider ID: 205630

Board Certified Specialty: No
CRYSTAL N LE

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5818
Fax: (858) 966-7483

 After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1003028416

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST

HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO
SPRINGS HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL



HOSPITAL ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A


NEONATAL / PERINATAL MEDICINE

MARC-AURELE, KRISHELLE

Provider ID: 206210

Board Certified Specialty: No
KRISHELLE L MARC-AURELE

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123
 Phone: (858) 966-8022

Fax: (858) 966-8457

 After Hours Phone: (858)
966-8022

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY

THORNTON, TRI CITY
MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

MARC-AURELE, KRISHELLE

Provider ID: 206208

Board Certified Specialty: No
KRISHELLE L MARC-AURELE

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5818
Fax: (858) 966-7483

 After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY

THORNTON, TRI CITY
MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

MARC-AURELE, KRISHELLE

Provider ID: 206206





Board Certified Specialty: No
KRISHELLE L MARC-AURELE

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (619) 543-3812

 After Hours Phone: (800)

D3. 专科提供者名录




926-8273
Provider Gender: Female
NPI: 1952503435
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

MATOBA, NANA






Provider ID: 297974
Board Certified Specialty: No
NANA MATOBA
 3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
 Phone: (858) 966-5888
Fax: (858) 249-5839
 After Hours Phone: (858)
966-5888
Provider Gender: Female
NPI: 1801952197
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Japanese
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




NEONATAL / PERINATAL MEDICINE

MATOBA, NANA

Provider ID: 297975
Board Certified Specialty: No
NANA MATOBA
 4077 5TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 260-7046
Fax: (619) 686-3843
 After Hours Phone: (619)
260-7046
Provider Gender: Female
NPI: 1801952197
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Japanese



Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19



American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE




MATOBA, NANA

Provider ID: 299894
Board Certified Specialty: No
NANA MATOBA
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-5888
Fax: (858) 966-7483
 After Hours Phone: (858)
966-5888

Provider Gender: Female
NPI: 1801952197



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Japanese
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

MCCULLEY, DAVID

Provider ID: 277177
Board Certified Specialty: No
DAVID J MCCULLEY
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-5818

D3. 专科提供者名录

Fax: (858) 966-7483

☎ After Hours Phone: (858)
966-5818

Provider Gender: Male

NPI: 1235304155

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

MESTAN, KAREN

Provider ID: 285932

Board Certified Specialty: No
KAREN K MESTAN

📍 3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5888

☎ After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1942253356

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

NIEMI, ANNA-KAISA

Provider ID: 262157

Board Certified Specialty: No

ANNA-KAISA NIEMI

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5818

Fax: (858) 966-7483

☎ After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1497941397

☑ Provider English Spoken: Y
☑ Provider Language(s)

Spoken: Finnish, French,
German, Spanish, Swedish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,

SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

NIEMI, ANNA-KAISA

Provider ID: 262158

Board Certified Specialty: No
ANNA-KAISA NIEMI

📍 4077 5TH AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 260-7107

☎ After Hours Phone: (619)
260-7107

Provider Gender: Female

NPI: 1497941397

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Finnish, French,
German, Spanish, Swedish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,

SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE









NYMAN, KATHERINE

Provider ID: 301822

Board Certified Specialty: No
KATHERINE N NYMAN






📍 4077 5TH AVE
SAN DIEGO, CA 92103




D3. 专科提供者名录

 Phone: (619) 260-7046
 Fax: (619) 686-3843
 After Hours Phone: (619) 260-7046
Provider Gender: Female
NPI: 1003260951
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE






NYMAN, KATHERINE




Provider ID: 301819
Board Certified Specialty: No
KATHERINE N NYMAN
 3010 CHILDRENS WAY FL 3 SAN DIEGO, CA 92123
 Phone: (858) 966-5888
 Fax: (858) 249-5839
 After Hours Phone: (858) 966-5888
Provider Gender: Female
NPI: 1003260951
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE







ODONNELL, F

Provider ID: 205578
Board Certified Specialty: No
F D ODONNELL
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-5818
 Fax: (858) 966-7483
 After Hours Phone: (858) 966-5818
Provider Gender: Female
NPI: 1477625325
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes



Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

RAMOS, CARLOS

Provider ID: 206060
Board Certified Specialty: No
CARLOS G RAMOS
 200 W ARBOR DR SAN DIEGO, CA 92103
 Phone: (619) 543-3759
 Fax: (619) 543-3812
 After Hours Phone: (619) 543-3759
Provider Gender: Male
NPI: 1205047545
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

D3. 专科提供者名录


 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

SAJTI, ENIKO


Provider ID: 206171
Board Certified Specialty: No
ENIKO C SAJTI

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-3759
Fax: (619) 543-3812

 After Hours Phone: (619)
543-3759


Provider Gender: Female
NPI: 1649433103


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES

Provider ID: 303906
Board Certified Specialty: No
CHARLES W SAUER


 4077 5TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 260-7046
 After Hours Phone: (619)
260-7046

Provider Gender: Male
NPI: 1538388988

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES


Provider ID: 303904
Board Certified Specialty: No
CHARLES W SAUER

 3010 CHILDRENS WAY FL 3
2205

SAN DIEGO, CA 92123
 Phone: (858) 966-5888
Fax: (858) 249-5839


 After Hours Phone: (858)
966-5888

Provider Gender: Male
NPI: 1538388988

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM








 Website: N/A

NEONATAL / PERINATAL MEDICINE

SONG, RICHARD

Provider ID: 206143
Board Certified Specialty: No
RICHARD S SONG

D3. 专科提供者名录

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-5818
Fax: (858) 966-7483
 After Hours Phone: (858)
966-5818
Provider Gender: Male
NPI: 1881893477
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR HEALTH,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, PALOMAR
MEDICAL CENTER,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




NEONATAL / PERINATAL MEDICINE

SPEZIALE, MARK

Provider ID: 206126
Board Certified Specialty: No
MARK V SPEZIALE

 3020 CHILDRENS WAY

SAN DIEGO, CA 92123
 Phone: (858) 966-5888
Fax: (858) 966-7483
 After Hours Phone: (858)
966-5888
Provider Gender: Male
NPI: 1801978143
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL, SCRIPPS
MERCY HOSPITAL, UCSD
MEDICAL CTR, UCSD MEDICAL
CTR, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




NEONATAL / PERINATAL MEDICINE

SUTTNER, DENISE

Provider ID: 265085
Board Certified Specialty: No
DENISE M SUTTNER

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5818
Fax: (858) 966-7483
 After Hours Phone: (858)
966-5818
Provider Gender: Female
NPI: 1457433799
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

SWEENEY, NATHALY

Provider ID: 206182
Board Certified Specialty: No
NATHALY M SWEENEY

 3020 CHILDRENS WAY

D3. 专科提供者名录

SAN DIEGO, CA 92123
☎ Phone: (858) 966-5818
Fax: (858) 966-7483
🕒 After Hours Phone: (858) 966-5818
Provider Gender: Female
NPI: 1164572632
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

VOLLER, STEPHANNIE

Provider ID: 303807
Board Certified Specialty: No
STEPHANNIE M VOLLER
📍 8001 FROST ST
SAN DIEGO, CA 92123
☎ Phone: (858) 966-8052
Fax: (858) 966-7789
🕒 After Hours Phone: (858) 966-8052
Provider Gender: Female
NPI: 1417121971
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

VOLLER, STEPHANNIE

Provider ID: 303808
Board Certified Specialty: No
STEPHANNIE M VOLLER
📍 3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
☎ Phone: (858) 966-5888
Fax: (858) 249-5839
🕒 After Hours Phone: (858) 966-5888
Provider Gender: Female
NPI: 1417121971
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

VOLLER, STEPHANNIE

Provider ID: 303806
Board Certified Specialty: No
STEPHANNIE M VOLLER
📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
☎ Phone: (858) 966-5888
Fax: (858) 966-7483
🕒 After Hours Phone: (858) 966-5888
Provider Gender: Female
NPI: 1417121971
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE


WEISS, KATHERINE

Provider ID: 264677
Board Certified Specialty: No
KATHERINE J WEISS
📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
☎ Phone: (858) 966-5818
Fax: (858) 966-7483
🕒 After Hours Phone: (858) 966-5818

D3. 专科提供者名录

Provider Gender: Female

NPI: 1053541862

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


NEONATAL / PERINATAL MEDICINE

WEST, JULIE

Provider ID: 297073

Board Certified Specialty: No
JULIE E WEST

 3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123


 Phone: (858) 966-5888

Fax: (858) 249-5839

 After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 181151848

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEPHROLOGY

BALBOA NEPHROLOGY MED GRP INC,

Provider ID: 308472

BALBOA NEPHROLOGY MED
GRP INC


 8010 FROST ST STE 100
SAN DIEGO, CA 92123

 Phone: (858) 637-4700

Fax: (858) 637-4701

 After Hours Phone: (858)
637-4700

NPI: 1316997505

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: No

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: www.balboacare.c
om

NEPHROLOGY


QUEVEDO, JUAN

Provider ID: 269998

Board Certified Specialty: No
JUAN M QUEVEDO

 995 GATEWAY CENTER
WAY STE 207

SAN DIEGO, CA 92102

 Phone: (619) 263-9729

Fax: (619) 263-9730

 After Hours Phone: (619)

263-9729

Provider Gender: Male

NPI: 1093902496

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, RIVERSIDE


COMMUNITY HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


NEPHROLOGY

SHAH, MITA

Provider ID: 262230

Board Certified Specialty: No
MITA M SHAH

 8010 FROST ST STE 510
SAN DIEGO, CA 92123

 Phone: (858) 637-4700

Fax: (858) 637-4701

 After Hours Phone: (858)
637-4700

Provider Gender: Female

NPI: 1194773010

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

D3. 专科提供者名录

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


NEPHROLOGY

ZHONG, YAN

Provider ID: 296054

Board Certified Specialty: No
YAN ZHONG

 4060 4TH AVE STE 220
SAN DIEGO, CA 92103


 Phone: (619) 299-2350

Fax: (619) 297-8379

 After Hours Phone: (619)
299-2350

Provider Gender: Female

NPI: 1467683540

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, LAC RANCHO

LOS AMIGOS NATIONAL

REHAB CENTER, SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, KECK

HOSPITAL OF USC, Los Angeles

General Medical Center,

SELECT SPECIALTY HOSPITAL

SAN DIEGO, SELECT

SPECIALTY HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):


N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

NEPHROLOGY


ZHONG, YAN

Provider ID: 296053

Board Certified Specialty: No

YAN ZHONG

 4060 4TH AVE STE 220
SAN DIEGO, CA 92103


 Phone: (619) 299-2350

Fax: (619) 297-8379

 After Hours Phone: (619)
299-2350

Provider Gender: Female

NPI: 1467683540

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, LAC RANCHO

LOS AMIGOS NATIONAL

REHAB CENTER, SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, KECK

HOSPITAL OF USC, Los Angeles

General Medical Center,

SELECT SPECIALTY HOSPITAL

SAN DIEGO, SELECT

SPECIALTY HOSPITAL SAN


DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

NEUROLOGY

BEVINS, ELIZABETH


Provider ID: 241943

Board Certified Specialty: No
ELIZABETH A BEVINS

 4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1013395151

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


NEUROLOGY

BUI, JONATHAN

Provider ID: 206005

Board Certified Specialty: No
JONATHAN D BUI

 8001 FROST ST
SAN DIEGO, CA 92123

 Phone: (858) 966-5999

Fax: (858) 966-4930

 After Hours Phone: (858)

D3. 专科提供者名录

966-5999
Provider Gender: Male
NPI: 1730247974
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish,
Vietnamese
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY

BUI, JONATHAN

Provider ID: 303227
Board Certified Specialty: No
JONATHAN D BUI
 3030 CHILDRENS WAY FL
4
SAN DIEGO, CA 92123
 Phone: (858) 966-5819
Fax: (858) 966-4930
 After Hours Phone: (858)
966-5819
Provider Gender: Male
NPI: 1730247974
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish,
Vietnamese
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY

COUGHLIN, DAVID

Provider ID: 240949
Board Certified Specialty: Yes
DAVID G COUGHLIN
 4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1740543784
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY

COUGHLIN, DAVID

Provider ID: 304172
Board Certified Specialty: No
DAVID G COUGHLIN
 6655 ALVARADO RD

SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1740543784
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

NEUROLOGY

COUGHLIN, DAVID

Provider ID: 240951
Board Certified Specialty: No
DAVID G COUGHLIN
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1740543784
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY

D3. 专科提供者名录

DOVE, KATHERINE

Provider ID: 302784

Board Certified Specialty: No
KATHERINE M DOVE

📍 3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5819

Fax: (858) 966-4930

🕒 After Hours Phone: (858)
966-5819

Provider Gender: Female

NPI: 1033642574

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEUROLOGY

DUNN-PIRIO, ANASTASIE

Provider ID: 203235

Board Certified Specialty: No
ANASTASIE M DUNN-PIRIO

📍 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

☎ Phone: (619) 543-3500

Fax: (888) 539-8781

🕒 After Hours Phone: (619)
543-3500

Provider Gender: Female

NPI: 1700177136

🗣 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEUROLOGY

DUNN-PIRIO, ANASTASIE

Provider ID: 304160

Board Certified Specialty: No
ANASTASIE M DUNN-PIRIO

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1700177136

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

NEUROLOGY

FREDERICK, ALIYA

Provider ID: 283152

Board Certified Specialty: Yes

ALIYA L FREDERICK

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5999

Fax: (858) 576-8412

🕒 After Hours Phone: (858)
966-5999

Provider Gender: Female

NPI: 1548657992

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEUROLOGY

GOLD, JEFFREY

Provider ID: 283335

Board Certified Specialty: No
JEFFREY J GOLD

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5999

Fax: (858) 576-8412

🕒 After Hours Phone: (858)
966-5999

Provider Gender: Male

NPI: 1568773984

🗣 Provider English Spoken: Y
Cultural Competency: N


D3. 专科提供者名录


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


NEUROLOGY

GOLD, JEFFREY


Provider ID: 303287

Board Certified Specialty: No
JEFFREY J GOLD

 3030 CHILDRENS WAY FL
4
SAN DIEGO, CA 92123

 Phone: (858) 966-5819

Fax: (858) 966-4930

 After Hours Phone: (858)
966-5819

Provider Gender: Male

NPI: 1568773984

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF


CHILDREN'S HOSPITAL
OAKLAND, SHARP MEMORIAL
HOSPITAL


Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


NEUROLOGY

GUIDO-ESTRADA, NATALIE

Provider ID: 303271

Board Certified Specialty: No
NATALIE M GUIDO-ESTRADA

 3030 CHILDRENS WAY FL
4
SAN DIEGO, CA 92123

 Phone: (858) 966-5819

Fax: (858) 966-4930

 After Hours Phone: (858)
966-5819

Provider Gender: Female

NPI: 1528353521

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


GUNDOGDU, MELEK


Provider ID: 201623

Board Certified Specialty: No
MELEK B GUNDOGDU

 200 W ARBOR DR FL 1


SAN DIEGO, CA 92103


 Phone: (619) 543-3500

 After Hours Phone: (619)
543-3500

Provider Gender: Female

NPI: 1437253671

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Turkish


Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY

HANNAWI, ANDREW

Provider ID: 283154

Board Certified Specialty: Yes
ANDREW P HANNAWI

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5999

Fax: (858) 576-8412

 After Hours Phone: (858)
966-5999

Provider Gender: Male

NPI: 1194179135

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

D3. 专科提供者名录


DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


IRAGUIMADOZ, VICENTE

Provider ID: 304154

Board Certified Specialty: No
VICENTE J IRAGUIMADOZ

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1053326710


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

NEUROLOGY


KHAMISHON, BORIS


Provider ID: 269923

Board Certified Specialty: No
BORIS KHAMISHON

 6699 ALVARADO RD STE
2301

SAN DIEGO, CA 92120

 Phone: (619) 582-2595

 After Hours Phone: (619)
582-2595

Provider Gender: Male

NPI: 1104922038

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Russian

Cultural Competency: N


Hospital Affiliation: ALVARADO
HOSPITAL LLC


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-4:00PM
F 8:00AM-3:00PM

 Website: N/A

NEUROLOGY


KIMMCMANUS, OLIVIA

Provider ID: 303229


Board Certified Specialty: No
OLIVIA S KIMMCMANUS

 3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123

 Phone: (858) 966-5819

Fax: (858) 966-4930

 After Hours Phone: (858)
966-5819

Provider Gender: Female

NPI: 1174870067

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:


UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, CHILDRENS
HOSPITAL OF ORANGE
COUNTY, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


LAVERTY, CHAMINDRA

Provider ID: 303258

Board Certified Specialty: No
CHAMINDRA G LAVERTY

 3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123

 Phone: (858) 966-5819

Fax: (858) 966-4930

 After Hours Phone: (858)
966-5819

Provider Gender: Female

NPI: 1538320395

 Provider English Spoken: Y
Cultural Competency: N




Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

D3. 专科提供者名录

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*


NEUROLOGY

LEE, DAVID

Provider ID: 304198

*Board Certified Specialty: No
DAVID J LEE*


 *6655 ALVARADO RD
SAN DIEGO, CA 92120*


 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1871884130

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Korean*

Cultural Competency: N

*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*

NEUROLOGY

LEE, DAVID

Provider ID: 246263

*Board Certified Specialty: No
DAVID J LEE*


 *200 W ARBOR DR FL 1
SAN DIEGO, CA 92103*


 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1871884130

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Korean*

Cultural Competency: N

*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


NEUROLOGY

LONGARDNER, KATHERINE

Provider ID: 304197

*Board Certified Specialty: No
KATHERINE M LONGARDNER*


 *6655 ALVARADO RD
SAN DIEGO, CA 92120*

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1801215926

 *Provider English Spoken: Y*


Cultural Competency: N

*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*


NEUROLOGY

LONGARDNER, KATHERINE

Provider ID: 268346

*Board Certified Specialty: No
KATHERINE M LONGARDNER*

 *4520 EXECUTIVE DR
SAN DIEGO, CA 92121*

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1801215926

 *Provider English Spoken: Y*

Cultural Competency: N

*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

NEUROLOGY

QAYOUMI, WALI

Provider ID: 284370

*Board Certified Specialty: No
WALI Z QAYOUMI*

 *4510 EXECUTIVE DR STE
325*

D3. 专科提供者名录

SAN DIEGO, CA 92121
☎ Phone: (619) 294-3746
Fax: (888) 539-8781
🕒 After Hours Phone: (619) 294-3746
Provider Gender: Male
NPI: 1093178220
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

NEUROLOGY

QAYOUMI, WALI

Provider ID: 304161
Board Certified Specialty: No
WALI Z QAYOUMI
📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1093178220
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: French
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

NEUROLOGY

RIGGINS, NINA

Provider ID: 304200
Board Certified Specialty: No
NINA Y RIGGINS
📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1568655264
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Russian
Cultural Competency: N
Hospital Affiliation: UCSF MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

NEUROLOGY

RIGGINS, NINA

Provider ID: 285968
Board Certified Specialty: No
NINA Y RIGGINS
📍 4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1568655264
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Russian
Cultural Competency: N
Hospital Affiliation: UCSF MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

NEUROLOGY

SCHORR, EMILY

Provider ID: 305020
Board Certified Specialty: No
EMILY M SCHORR
📍 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1255862041
☐ Provider English Spoken: Y
Cultural Competency: N

D3. 专科提供者名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Medi-Cal Open Panel: Yes

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

NEUROLOGY


SCHORR, EMILY


Provider ID: 305021

Board Certified Specialty: No

EMILY M SCHORR

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255862041

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

NEUROLOGY


SCHORR, EMILY


Provider ID: 305023

Board Certified Specialty: No

EMILY M SCHORR

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255862041

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

NEUROLOGY

SWEAT, MARIE


Provider ID: 303831

Board Certified Specialty: No

MARIE E SWEAT

 3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123

 Phone: (858) 966-5819

Fax: (858) 966-4930

 After Hours Phone: (858)
966-5819

Provider Gender: Female

NPI: 1861929036

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


YANG, JENNIFER

Provider ID: 301593

Board Certified Specialty: No

JENNIFER H YANG

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5999

Fax: (858) 576-8412

 After Hours Phone: (858)
966-5999

Provider Gender: Female

NPI: 1528420619

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


ZIMBRIC, MICHAEL

Provider ID: 206272

Board Certified Specialty: No

MICHAEL R ZIMBRIC

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5999

Fax: (858) 966-4930


 After Hours Phone: (858)
966-5999



Provider Gender: Male

NPI: 1487819546

 Provider English Spoken: Y



D3. 专科提供者名录



 *Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19*

*American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A*

NEUROLOGY

ZIMBRIC, MICHAEL


*Provider ID: 303284
Board Certified Specialty: No
MICHAEL R ZIMBRIC
 3030 CHILDRENS WAY FL
4
SAN DIEGO, CA 92123
 Phone: (858) 966-5819
Fax: (858) 966-4930
 After Hours Phone: (858)
966-5819
Provider Gender: Male
NPI: 1487819546*

 *Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND*

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\19*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*


NEUROLOGY CHILD

GRAVES, JENNIFER


*Provider ID: 261037
Board Certified Specialty: No
JENNIFER S GRAVES*

 *3020 CHILDRENS WAY
SAN DIEGO, CA 92123*

 *Phone: (858) 966-8800*

 *After Hours Phone: (858)
966-8800*


*Provider Gender: Female
NPI: 1992849863*

 *Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF
Medical Center At Mission Bay,
UCSF MEDICAL CENTER AT
MOUNT ZION, UCSF MEDICAL
CENTER, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, RADY
CHILDRENS HOSPITAL SAN
DIEGO*

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\19*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*

NEUROLOGY CHILD

GUIDO-ESTRADA, NATALIE

*Provider ID: 205825
Board Certified Specialty: No
NATALIE M GUIDO-ESTRADA*


 *8001 FROST ST
SAN DIEGO, CA 92123*

 *Phone: (858) 966-5999*

Fax: (858) 966-4930

 *After Hours Phone: (858)
966-5999*


*Provider Gender: Female
NPI: 1528353521*

 *Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\19*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*

NEUROLOGY CHILD

SAHAGIAN, MICHELLE

*Provider ID: 206074
Board Certified Specialty: No
MICHELLE L SAHAGIAN*

 *3020 CHILDRENS WAY
SAN DIEGO, CA 92123*

 *Phone: (858) 966-5999*

Fax: (858) 966-4930

 *After Hours Phone: (858)
966-5999*

Provider Gender: Female

D3. 专科提供者名录

NPI: 1275604035

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

ASLIAN, AZITA

Provider ID: 308270

Board Certified Specialty: No
AZITA ASLIAN

950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

Fax: (619) 662-4158

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1851667661

Provider English Spoken: Y

Provider Language(s)
Spoken: Faroese, Fataleka

Cultural Competency: N

Hospital Affiliation: Hemet

Global Medical Center, Menifee

Global Medical Center,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): 279-8111

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

BLAKE, GARY

Provider ID: 290731

Board Certified Specialty: No
GARY D BLAKE

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1497738439

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

COHEN, MANSOUR

Provider ID: 205940

Board Certified Specialty: Yes
MANSOUR J COHEN

7695 CARDINAL CT STE
390

SAN DIEGO, CA 92123

Phone: (858) 279-8111

Fax: (858) 279-4703

After Hours Phone: (858)

Provider Gender: Male

NPI: 1346225356

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Farsi,
Hebrew, Persian, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
9:00AM-4:00PM

Website: N/A

Email:

JOSHUACOHENMD@YAHOO.COM

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291330

Board Certified Specialty: No

LAURA M DELCORE

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL


D3. 专科提供者名录


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291326

Board Certified Specialty: No
LAURA M DELCORE

 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291327

Board Certified Specialty: No
LAURA M DELCORE

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Website: N/A

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291328

Board Certified Specialty: No
LAURA M DELCORE

 6030 VILLAGE WAY
SAN DIEGO, CA 92130

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Website: N/A

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291329

Board Certified Specialty: No
LAURA M DELCORE

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291339

Board Certified Specialty: No
AMY M DRIEBE

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730507567

 Provider English Spoken: Y
Cultural Competency: N

D3. 专科提供者名录

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291338

Board Certified Specialty: No
AMY M DRIEBE

 6030 VILLAGE WAY
SAN DIEGO, CA 92130

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730507567


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291340

Board Certified Specialty: No
AMY M DRIEBE

 330 LEWIS ST

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730507567

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291337

Board Certified Specialty: No
AMY M DRIEBE

 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730507567

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY


FRUGONI, GINA

Provider ID: 270056

Board Certified Specialty: No
GINA R FRUGONI

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (619) 400-5074

 After Hours Phone: (619)
400-5074

Provider Gender: Female

NPI: 1578729315


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

GROGAN, BRIAN


Provider ID: 296002

Board Certified Specialty: No
BRIAN D GROGAN

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4682

 After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1235218439

D3. 专科提供者名录

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OBSTETRICS / GYNECOLOGY

GROGAN, BRIAN

Provider ID: 296001
Board Certified Specialty: No
BRIAN D GROGAN

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700
Provider Gender: Male

NPI: 1235218439

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OBSTETRICS / GYNECOLOGY

GUPTA, PRATIMA

Provider ID: 257548
Board Certified Specialty: No
PRATIMA GUPTA

4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1891749842

Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

GUPTA, PRATIMA

Provider ID: 257547
Board Certified Specialty: No
PRATIMA GUPTA

16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1891749842

Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT

Provider ID: 278917
Board Certified Specialty: No
SCOTT A HARVEY

4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1457662868

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

D3. 专科提供者名录

OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT

Provider ID: 278915

Board Certified Specialty: No

SCOTT A HARVEY

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1457662868

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

HOANG, MAI

Provider ID: 208294

Board Certified Specialty: No

MAI P HOANG

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104143593

Provider English Spoken: Y
Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

HOM-TEDLA, MARIANNE

Provider ID: 242751

Board Certified Specialty: No

MARIANNE S HOM-TEDLA

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1972047397

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

KLEIN, DAVID

Provider ID: 271560

Board Certified Specialty: No

DAVID A KLEIN

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1780073635

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

KLEIN, DAVID

Provider ID: 271561

Board Certified Specialty: No

DAVID A KLEIN

6030 VILLAGE WAY
SAN DIEGO, CA 92130


Phone: (800) 926-8273

D3. 专科提供者名录

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1780073635

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OBSTETRICS / GYNECOLOGY

KOHATSU, KAREN

Provider ID: 205481

Board Certified Specialty: No
KAREN E KOHATSU

 11939 RANCHO BERNARDO
RD STE 110
SAN DIEGO, CA 92128


 Phone: (858) 618-1156

Fax: (858) 618-3314

 After Hours Phone: (858)
618-1156

Provider Gender: Female

NPI: 1679517239

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: PALOMAR
HEALTH


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:30AM-4:30PM
F 8:30AM-2:00PM


 Website: N/A


OBSTETRICS / GYNECOLOGY


LAMALE-SMITH, LEAH

Provider ID: 208681

Board Certified Specialty: No
LEAH M LAMALE-SMITH


 4910 DIRECTORS PL STE
200
SAN DIEGO, CA 92121


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1396904876

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, EISENHOWER MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH

Provider ID: 285519

Board Certified Specialty: No
LEAH M LAMALE-SMITH

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1396904876

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, EISENHOWER MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY


MACKAY, GILLIAN

Provider ID: 200965

Board Certified Specialty: No
GILLIAN MACKAY

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

D3. 专科提供者名录

Provider Gender: Female

NPI: 1770702177


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN

Provider ID: 303064

Board Certified Specialty: No
GILLIAN MACKAY

 6030 VILLAGE WAY
SAN DIEGO, CA 92130

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770702177

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OBSTETRICS / GYNECOLOGY


MANI, PARVIN

Provider ID: 242345

Board Certified Specialty: No
PARVIN P MANI

 5555 RESERVOIR DR STE
208

SAN DIEGO, CA 92120


 Phone: (619) 583-7555

Fax: (619) 583-0555

 After Hours Phone: (619)
583-7555

Provider Gender: Female

NPI: 1518925015

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Faroese, Farsi

Cultural Competency: N


Hospital Affiliation:
GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 10\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

Email:

PARVINMANI@YAHOO.COM

OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA

Provider ID: 285741

Board Certified Specialty: No
AUDRA R MEADOWS

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1467585521

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA

Provider ID: 285742

Board Certified Specialty: No
AUDRA R MEADOWS

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1467585521

D3. 专科提供者名录

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

MELENDEZ, ARIANA

Provider ID: 299921
Board Certified Specialty: No
ARIANA L MELENDEZ

4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1295232973

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Website: N/A

OBSTETRICS / GYNECOLOGY

MELENDEZ, ARIANA

Provider ID: 299922
Board Certified Specialty: No
ARIANA L MELENDEZ

200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1295232973

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299982
Board Certified Specialty: No
CHARLOTTE M PICKETT

200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1447530696

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER
 Website: N/A

OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299979
Board Certified Specialty: No
CHARLOTTE M PICKETT

4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1447530696

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299978
Board Certified Specialty: No
CHARLOTTE M PICKETT

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
 Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1447530696

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

D3. 专科提供者名录

Min/Max Age: 16\999

American Sign Language (ASL):  Provider English Spoken: Y
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299980

Board Certified Specialty: No
CHARLOTTE M PICKETT

 6030 VILLAGE WAY
SAN DIEGO, CA 92130

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447530696

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299981

Board Certified Specialty: No
CHARLOTTE M PICKETT

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447530696

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

RIVAS, RENEE

Provider ID: 284298

Board Certified Specialty: No
RENEE N RIVAS

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295263861

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

SUYAMA, JULIE

Provider ID: 284291

Board Certified Specialty: No
JULIE A SUYAMA

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1306372800

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

SUYAMA, JULIE

Provider ID: 284290

Board Certified Specialty: No
JULIE A SUYAMA

 4520 EXECUTIVE DR STE
360

SAN DIEGO, CA 92121
 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

D3. 专科提供者名录

Provider Gender: Female
NPI: 1306372800
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA
Provider ID: 285174
Board Certified Specialty: No
SAMANTHA L THOMSON
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1689013468
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CEDARS
SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes

Min/Max Age: 16\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA
Provider ID: 285176
Board Certified Specialty: No
SAMANTHA L THOMSON
 4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1689013468
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CEDARS
SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER

Provider ID: 290128
Board Certified Specialty: No
JENNIFER C TRUJILLO
 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
Fax: (619) 662-4158
 After Hours Phone: (619)
662-4100

Provider Gender: Female
NPI: 1053407593
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OCCUPATIONAL THERAPIST


BOND, KIMBERLEE
Provider ID: 206549
Board Certified Specialty: No
KIMBERLEE A BOND
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1669770939
 Provider English Spoken: Y
Cultural Competency: N

D3. 专科提供者名录

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OCCUPATIONAL THERAPIST


BOND, KIMBERLEE

Provider ID: 206548

Board Certified Specialty: No

KIMBERLEE A BOND

 8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1669770939

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OCCUPATIONAL THERAPIST


LARSEN, JULIE

Provider ID: 258359

Board Certified Specialty: No

JULIE L LARSEN

 8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122

 Phone: (855) 543-0333

Fax: (858) 657-1809

 After Hours Phone: (855)
543-0333

Provider Gender: Female

NPI: 1497009179


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OCCUPATIONAL THERAPIST


MIKUT, ALYSSA

Provider ID: 258415

Board Certified Specialty: No

ALYSSA M MIKUT

 8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122

 Phone: (858) 249-0832

Fax: (858) 657-1809

 After Hours Phone: (858)
249-0832

Provider Gender: Female

NPI: 1952816134


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


BANSAL, PREETI

Provider ID: 205620

Board Certified Specialty: Yes

PREETI BANSAL

 7910 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 309-7702

Fax: (858) 966-7403

 After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1871664631

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT

HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, SCRIPPS


MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL

HOSPITAL, TRI CITY MEDICAL
CTR


D3. 专科提供者名录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  200 W ARBOR DR STE 101
SAN DIEGO, CA 92103

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

BAXTER, SALLY

Provider ID: 272788

Board Certified Specialty: No
SALLY L BAXTER

 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1912325184

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):  N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


BAXTER, SALLY

Provider ID: 272789

Board Certified Specialty: No

SALLY L BAXTER

 200 W ARBOR DR STE 101
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1912325184

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):  N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY

BEAZER, ALEX

Provider ID: 272803

Board Certified Specialty: No
ALEX P BEAZER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1942662168

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):  N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

BHATIA, SHAGUN

Provider ID: 240636

Board Certified Specialty: No
SHAGUN K BHATIA

 7910 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 309-7702

Fax: (858) 966-7403

 After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1104237353

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS


HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 专科提供者名录

OPHTHALMOLOGY

CAMP, ANDREW

Provider ID: 260020

Board Certified Specialty: No
ANDREW S CAMP

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Provider Gender: Male

NPI: 1326300377

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

RADY CHILDRENS HOSPITAL

SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

GUALTIERI, CHRISTOPHER

Provider ID: 252313

Board Certified Specialty: Yes
CHRISTOPHER J GUALTIERI

3969 4TH AVE STE 300
SAN DIEGO, CA 92103

Phone: (619) 688-2648

Fax: (619) 688-2626

After Hours Phone: (619)
688-2648

Provider Gender: Male

NPI: 1790769156

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 6\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

Email:

MYNEWEYES@HOTMAIL.COM

OPHTHALMOLOGY

HENNEIN, LAUREN

Provider ID: 297009

Board Certified Specialty: No
LAUREN M HENNEIN

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1699216010

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

HENNEIN, LAUREN

Provider ID: 297011

Board Certified Specialty: No
LAUREN M HENNEIN

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1699216010

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

HUYNH, PAUL

Provider ID: 245200

Board Certified Specialty: No

D3. 专科提供者名录

PAUL D HUYNH

4844 UNIVERSITY AVE STE A

SAN DIEGO, CA 92105

Phone: (619) 283-1303

Fax: (619) 283-1666

After Hours Phone: (619) 283-1303

Provider Gender: Male

NPI: 1871577056

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

SA 8:00AM-5:00PM

Website: N/A

Email:

DOCTORPAUL@SBCGLOBAL.NET

OPHTHALMOLOGY

HUYNH, PAUL

Provider ID: 295645

Board Certified Specialty: No

PAUL D HUYNH

4844 UNIVERSITY AVE STE A

SAN DIEGO, CA 92105

Phone: (619) 283-1303

Fax: (619) 283-1666

After Hours Phone: (619) 283-1303

Provider Gender: Male

NPI: 1871577056

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

SA 8:00AM-5:00PM

Website: N/A

Email:

DOCTORPAUL@SBCGLOBAL.NET

OPHTHALMOLOGY

JACOBSEN, BRADLEY

Provider ID: 302869

Board Certified Specialty: No

BRADLEY H JACOBSEN

7695 CARDINAL CT STE 100 SAN DIEGO, CA 92123

Phone: (858) 609-7100

Fax: (858) 609-7106

After Hours Phone: (858) 609-7100

Provider Gender: Male

NPI: 1760845184

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

KHATIB, NORA

Provider ID: 305375

Board Certified Specialty: No

NORA KHATIB

4060 4TH AVE STE 640 SAN DIEGO, CA 92103

Phone: (619) 642-2240

Fax: (619) 642-2245

After Hours Phone: (619) 642-2240

Provider Gender: Female

NPI: 1538487756

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP CHULA

VISTA MED CTR, GROSSMONT

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):

N

Accessibility: CONTACT

D3. 专科提供者名录

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPHTHALMOLOGY **KLING, LANNING**

Provider ID: 239915
Board Certified Specialty: No
LANNING B KLING

4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1841227477

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPHTHALMOLOGY **LI, ALEXANDRIA**

Provider ID: 272833
Board Certified Specialty: No
ALEXANDRIA L LI

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)

926-8273
Provider Gender: Female
NPI: 1841652864
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, SCRIPPS GREEN
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPHTHALMOLOGY **LIU, YUNXIANG**

Provider ID: 210803
Board Certified Specialty: No
YUNXIANG LIU

7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
After Hours Phone: (858)
309-7702

Provider Gender: Female
NPI: 1770849804

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
Website: N/A

OPHTHALMOLOGY **MOLL, ANGELA**



Provider ID: 205510
Board Certified Specialty: No
ANGELA M MOLL

7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858)
309-7702

Provider Gender: Female
NPI: 1861648602

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

D3. 专科提供者名录


 Hours: M-F
8:00AM-5:00PM
 Website: N/A


OPHTHALMOLOGY

MOVAGHAR, MANSOOR

Provider ID: 216412
Board Certified Specialty: No
MANSOOR MOVAGHAR


 7910 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 309-7702

 After Hours Phone: (858)
309-7702

Provider Gender: Male

NPI: 1497792220

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

OPHTHALMOLOGY


OHALLORAN, HENRY

Provider ID: 205888
Board Certified Specialty: No
HENRY S OHALLORAN

 7910 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 309-7702

Fax: (858) 966-7403

 After Hours Phone: (858)
309-7702

Provider Gender: Male

NPI: 1235287947

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

OPHTHALMOLOGY

PHAN, RYAN

Provider ID: 295646
Board Certified Specialty: No
RYAN PHAN

 10737 CAMINO RUIZ
SAN DIEGO, CA 92126


 Phone: (858) 549-3200

Fax: (858) 549-3207

 After Hours Phone: (858)
549-3200

Provider Gender: Male

NPI: 1588027213

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR, GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

OPHTHALMOLOGY

PHAN, RYAN

Provider ID: 287883
Board Certified Specialty: No
RYAN PHAN

 10737 CAMINO RUIZ
SAN DIEGO, CA 92126

 Phone: (858) 549-3200

Fax: (858) 549-3207

 After Hours Phone: (858)
549-3200

Provider Gender: Male

NPI: 1588027213

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL




Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

D3. 专科提供者名录




N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*




OPHTHALMOLOGY

PHAN, RYAN

Provider ID: 305445
Board Certified Specialty: No
RYAN PHAN

 10737 CAMINO RUIZ STE 100
SAN DIEGO, CA 92126
 *Phone: (858) 549-3200*
Fax: (858) 549-3207
 *After Hours Phone: (858) 549-3200*
Provider Gender: Male
NPI: 1588027213
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Vietnamese*
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):



N



 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

OPHTHALMOLOGY




PHAN, RYAN

Provider ID: 302925
Board Certified Specialty: No
RYAN PHAN

 4844 UNIVERSITY AVE STE A
SAN DIEGO, CA 92105
 *Phone: (619) 283-1303*
Fax: (619) 283-1666
 *After Hours Phone: (619) 283-1303*

Provider Gender: Male
NPI: 1588027213
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Vietnamese*
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*





OPHTHALMOLOGY




PHAN, RYAN

Provider ID: 295647
Board Certified Specialty: No
RYAN PHAN

 4844 UNIVERSITY AVE STE

A




SAN DIEGO, CA 92105
 *Phone: (619) 283-1303*
Fax: (619) 283-1666
 *After Hours Phone: (619) 283-1303*
Provider Gender: Male
NPI: 1588027213
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Vietnamese*
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*





OPHTHALMOLOGY

PUIG LLANO, MANUEL

Provider ID: 299964
Board Certified Specialty: No
MANUEL PUIG LLANO



 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1427102979



D3. 专科提供者名录

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, German,
Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OPHTHALMOLOGY

SATTERFIELD, KELLIE

Provider ID: 305302
Board Certified Specialty: No
KELLIE R SATTERFIELD
 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
 Phone: (858) 450-1010
Fax: (858) 450-9451
 After Hours Phone: (858)
450-1010
Provider Gender: Female
NPI: 1629509336


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 305305
Board Certified Specialty: No
CATHERINE R SHEILS
 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
 Phone: (858) 450-1010
Fax: (858) 450-9451
 After Hours Phone: (858)
450-1010
Provider Gender: Female
NPI: 1932605649







 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-TU
8:30AM-4:00PM
W-F 8:30AM-1:00PM
 Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 299936
Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1932605649
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE


Provider ID: 305306
Board Certified Specialty: No
CATHERINE R SHEILS
 3939 3RD AVE
SAN DIEGO, CA 92103
 Phone: (800) 765-2737
Fax: (619) 291-6577
 After Hours Phone: (800)
765-2737
Provider Gender: Female
NPI: 1932605649
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes


D3. 专科提供者名录

Min/Max Age: 18\999

American Sign Language (ASL): KENTARO E YAMADA

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU
8:30AM-4:00PM

W-F 8:30AM-1:00PM

 Website: N/A


OPHTHALMOLOGY

SONG, DELU

Provider ID: 302872

Board Certified Specialty: No
DELU SONG

 7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123


 Phone: (858) 609-7100

Fax: (858) 609-7106

 After Hours Phone: (858)
609-7100

Provider Gender: Male

NPI: 1437689536

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY

YAMADA, KENTARO


Provider ID: 295848

Board Certified Specialty: No


KENTARO E YAMADA

 1040 UNIVERSITY AVE STE
B209A

SAN DIEGO, CA 92103


 Phone: (619) 299-1100

Fax: (619) 299-7156

 After Hours Phone: (619)
299-1100

Provider Gender: Male

NPI: 1629047188

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Japanese, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

OPTOMETRIST

AOTO, KIM

Provider ID: 268723

Board Certified Specialty: No

KIM N AOTO

 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (800) 898-2020

Fax: (844) 897-3788

 After Hours Phone: (800)
898-2020

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A

OPTOMETRIST


AOTO, KIM

Provider ID: 268718

Board Certified Specialty: No

KIM N AOTO

 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

 Phone: (858) 565-8822

Fax: (858) 565-2449

 After Hours Phone: (858)
565-8822

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 9:00AM-5:00PM
TU 8:30AM-4:30PM

W 7:30AM-4:30PM

TH 9:30AM-5:00PM

D3. 专科提供者名录


 F 8:30AM-4:00PM
 Website: N/A


OPTOMETRIST

AOTO, KIM

Provider ID: 296795
Board Certified Specialty: No
KIM N AOTO


 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

 Phone: (858) 565-8822
Fax: (858) 565-2449

 After Hours Phone: (858)
565-8822

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M 9:00AM-5:00PM

TU 8:30AM-4:30PM

W 7:30AM-4:30PM

TH 9:30AM-5:00PM

F 8:30AM-4:00PM

 Website: N/A

OPTOMETRIST


JOMOC, CAITLIN

Provider ID: 304156

Board Certified Specialty: No

CAITLIN JOMOC


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861164642

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OPTOMETRIST

JOMOC, CAITLIN

Provider ID: 304155

Board Certified Specialty: No
CAITLIN JOMOC


 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861164642

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OPTOMETRIST


KIM, PHILIP

Provider ID: 287910


Board Certified Specialty: No

PHILIP KIM

 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

 Phone: (800) 926-8372

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

Provider Gender: Male

NPI: 1376929034


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPTOMETRIST

SCHWAB, GARY

Provider ID: 290411

Board Certified Specialty: No
GARY G SCHWAB

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250
Fax: (858) 633-4681

 After Hours Phone: (619)
563-0250

Provider Gender: Male

NPI: 1740274372

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D3. 专科提供者名录

 Website: N/A


OPTOMETRIST

SCHWAB, GARY


Provider ID: 290410

Board Certified Specialty: No
GARY G SCHWAB

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1740274372

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OPTOMETRIST


VO, ANDREW

Provider ID: 201312

Board Certified Specialty: No
ANDREW M VO


 200 W ARBOR DR STE 101
SAN DIEGO, CA 92103

 Phone: (619) 543-7907

 After Hours Phone: (619)
543-7907

Provider Gender: Male

NPI: 1790291565

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPTOMETRIST

VO, ANDREW

Provider ID: 304147

Board Certified Specialty: No
ANDREW M VO

 16950 VIA TAZON
SAN DIEGO, CA 92127


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790291565

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OPTOMETRIST

YU, CAROL

Provider ID: 301684

Board Certified Specialty: No
CAROL Y YU

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639697451

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


OPTOMETRIST

YU, CAROL

Provider ID: 301683

Board Certified Specialty: No
CAROL Y YU

 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639697451

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

D3. 专科提供者名录

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

OPTOMETRIST

YU, CAROL

Provider ID: 301680

*Board Certified Specialty: No
CAROL Y YU*

 200 W ARBOR DR
SAN DIEGO, CA 92103


 *Phone: (800) 926-8273*


Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1639697451

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Chinese*


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

ORAL MAXILLOFACIAL

SURGEON


DENTICO-OLIN, MARC

Provider ID: 304727

*Board Certified Specialty: No
MARC DENTICO-OLIN*

 2878 CAMINO DEL RIO S
STE 210

SAN DIEGO, CA 92108

 *Phone: (619) 298-2200*

Fax: (619) 298-2250

 *After Hours Phone: (619)*

298-2200

Provider Gender: Male

NPI: 1629205174

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN*

DIEGO, SCRIPPS GREEN

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

ORAL MAXILLOFACIAL

SURGEON


DENTICO-OLIN, MARC

Provider ID: 273663

*Board Certified Specialty: No
MARC DENTICO-OLIN*

 501 WASHINGTON ST STE
710

SAN DIEGO, CA 92103

 *Phone: (619) 295-6774*

Fax: (619) 295-6776

 *After Hours Phone: (619)
295-6774*

Provider Gender: Male

NPI: 1629205174

 *Provider English Spoken: Y
Cultural Competency: N*

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS GREEN

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


OTOLARYNGOLOGY

BLISS, MORGAN

Provider ID: 272565

*Board Certified Specialty: Yes
MORGAN R BLISS*

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 *Phone: (858) 309-7701*

Fax: (858) 966-8038

 *After Hours Phone: (858)
309-7701*

Provider Gender: Female

NPI: 1760707657

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN*


DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

OTOLARYNGOLOGY

BRUMUND, KEVIN

D3. 专科提供者名录

Provider ID: 299635
Board Certified Specialty: No
KEVIN T BRUMUND
8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1033193669

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Website: N/A

OTOLARYNGOLOGY **BRUMUND, KEVIN**

Provider ID: 299634
Board Certified Specialty: No
KEVIN T BRUMUND
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1033193669

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A

OTOLARYNGOLOGY **CALIFANO, JOSEPH**

Provider ID: 299461
Board Certified Specialty: No
JOSEPH A CALIFANO III
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1881652972

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Website: N/A

OTOLARYNGOLOGY **CALIFANO, JOSEPH**

Provider ID: 299462
Board Certified Specialty: No
JOSEPH A CALIFANO III
8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1881652972

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Website: N/A

OTOLARYNGOLOGY **CALIFANO, JOSEPH**

Provider ID: 299457
Board Certified Specialty: No
JOSEPH A CALIFANO III
200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1881652972

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Website: N/A

OTOLARYNGOLOGY **CARVALHO, DANIELA**

D3. 专科提供者名录

Provider ID: 205628

Board Certified Specialty: No
DANIELA CARVALHO

3030 CHILDRENS WAY STE 109
SAN DIEGO, CA 92123

Phone: (858) 309-7702

After Hours Phone: (858) 309-7702

Provider Gender: Female

NPI: 1154492916

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

CARVALHO, DANIELA

Provider ID: 272557

Board Certified Specialty: No
DANIELA CARVALHO

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

Phone: (858) 309-7701

Fax: (858) 966-8038

After Hours Phone: (858) 309-7701

Provider Gender: Female

NPI: 1154492916

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

CHANG, EDWARD

Provider ID: 309535

Board Certified Specialty: No
EDWARD W CHANG

5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121

Phone: (858) 909-0770

Fax: (858) 909-0880

After Hours Phone: (858) 909-0770

Provider Gender: Male

NPI: 1528146008

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM
Website: N/A

OTOLARYNGOLOGY

COFFEY, CHARLES

Provider ID: 299582

Board Certified Specialty: No
CHARLES S COFFEY

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1932297330

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Website: N/A

OTOLARYNGOLOGY

COFFEY, CHARLES

Provider ID: 299583

Board Certified Specialty: No
CHARLES S COFFEY

8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122

Phone: (800) 926-8273


Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

D3. 专科提供者名录

Provider Gender: Male

NPI: 1932297330

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS


GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

COFFEY, CHARLES


Provider ID: 299579

Board Certified Specialty: No


CHARLES S COFFEY

 200 W ARBOR DR

SAN DIEGO, CA 92103


 Phone: (619) 543-6631

Fax: (619) 471-0656

 After Hours Phone: (619) 543-6631

Provider Gender: Male

NPI: 1932297330

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS


GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY

DECONDE, ADAM

Provider ID: 299569

Board Certified Specialty: No


ADAM S DECONDE

 200 W ARBOR DR

SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1588988919

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

DECONDE, ADAM

Provider ID: 299568


Board Certified Specialty: No

ADAM S DECONDE

 8899 UNIVERSITY CENTER

LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1588988919

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

DECONDE, ADAM

Provider ID: 299567

Board Certified Specialty: No

ADAM S DECONDE

 16950 VIA TAZON

SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1588988919

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299530

Board Certified Specialty: No

D3. 专科提供者名录

RICK A FRIEDMAN

16950 VIA TAZON

SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982708558

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTH COAST GLOBAL MEDICAL CENTER INC, ANAHEIM GLOBAL MEDICAL CENTER, ORANGE COUNTY GLOBAL MEDICAL CENTER INC, CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

N

Accessibility: CONTACT PROVIDER

Website: N/A

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299531

Board Certified Specialty: No

RICK A FRIEDMAN

8899 UNIVERSITY CENTER LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982708558

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTH COAST GLOBAL MEDICAL CENTER INC, ANAHEIM GLOBAL MEDICAL CENTER, ORANGE COUNTY GLOBAL MEDICAL CENTER INC, CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

N

Accessibility: CONTACT PROVIDER

Website: N/A

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299532

Board Certified Specialty: No

RICK A FRIEDMAN

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982708558

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTH COAST GLOBAL MEDICAL CENTER INC, ANAHEIM GLOBAL MEDICAL CENTER, ORANGE COUNTY GLOBAL MEDICAL CENTER INC, CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

N

Accessibility: CONTACT PROVIDER

Website: N/A

OTOLARYNGOLOGY

FRIESEN, TZYYNONG

Provider ID: 272604

Board Certified Specialty: Yes

TZYYNONG L FRIESEN

3030 CHILDRENS WAY FL 1

D3. 专科提供者名录

SAN DIEGO, CA 92123
☎ Phone: (858) 309-7701
Fax: (858) 966-8038
🕒 After Hours Phone: (858) 309-7701

Provider Gender: Female
NPI: 1952740177

☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299560

Board Certified Specialty: No
SAPIDEH GILANI

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1003825571

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299561

Board Certified Specialty: No
SAPIDEH GILANI

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1003825571

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299559

Board Certified Specialty: No
SAPIDEH GILANI

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1003825571

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

GREENE, JACQUELINE

Provider ID: 298396

Board Certified Specialty: No
JACQUELINE J GREENE

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1144583931

☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

GREENE, JACQUELINE

Provider ID: 272959

Board Certified Specialty: No

D3. 专科提供者名录

JACQUELINE J GREENE

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1144583931

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

GREENE, JACQUELINE

Provider ID: 298397

Board Certified Specialty: No

JACQUELINE J GREENE

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1144583931

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Website: N/A

OTOLARYNGOLOGY

HARRIS, JEFFREY

Provider ID: 299576

Board Certified Specialty: No

JEFFREY P HARRIS

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1417988783

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

HARRIS, JEFFREY

Provider ID: 299575

Board Certified Specialty: No

JEFFREY P HARRIS

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1417988783

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299514

Board Certified Specialty: No

DAVID B HOM

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1659305027

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

D3. 专科提供者名录

OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299515

Board Certified Specialty: No

DAVID B HOM

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1659305027

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299511

Board Certified Specialty: No

DAVID B HOM

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (858) 657-8590

After Hours Phone: (858)
657-8590

Provider Gender: Male

NPI: 1659305027

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

HUSSEMAN, JACOB

Provider ID: 301052

Board Certified Specialty: No

JACOB W HUSSEMAN

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124034053

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

HUSSEMAN, JACOB

Provider ID: 301053

Board Certified Specialty: No

JACOB W HUSSEMAN

16950 VIA TAZON

SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124034053

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

JIANG, WEN

Provider ID: 272660

Board Certified Specialty: Yes

WEN A JIANG

3030 CHILDRENS WAY FL 1

SAN DIEGO, CA 92123

Phone: (858) 309-7701


Fax: (858) 966-8038

After Hours Phone: (858)
309-7701

D3. 专科提供者名录

Provider Gender: Female

NPI: 1659305753

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY


KARI, ELINA

Provider ID: 299446

Board Certified Specialty: No
ELINA KARI

 8899 UNIVERSITY CENTER
LN

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780860536

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY


KARI, ELINA

Provider ID: 299443

Board Certified Specialty: No
ELINA KARI

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-6631

 After Hours Phone: (619)
543-6631

Provider Gender: Female

NPI: 1780860536

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299445

Board Certified Specialty: No
ELINA KARI

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780860536


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

LEUIN, SHELBY

Provider ID: 272637

Board Certified Specialty: No
SHELBY C LEUIN

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 309-7701
Fax: (858) 966-8038

D3. 专科提供者名录

☎ After Hours Phone: (858) 309-7701

Provider Gender: Female

NPI: 1124230909

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 272767

Board Certified Specialty: Yes

ANTHONY E MAGIT

📍 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

☎ Phone: (855) 309-7701

Fax: (858) 966-4062

☎ After Hours Phone: (855) 309-7701

Provider Gender: Male

NPI: 1891858379

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
9:00AM-5:00PM

🌐 Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299481

Board Certified Specialty: No

ANTHONY E MAGIT

📍 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1891858379

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299482

Board Certified Specialty: No

ANTHONY E MAGIT

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1891858379

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299480

Board Certified Specialty: No

ANTHONY E MAGIT

📍 16950 VIA TAZON

SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1891858379

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

D3. 专科提供者名录

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO


Provider ID: 299590

Board Certified Specialty: No

AKIHIRO MATSUOKA

 16950 VIA TAZON

SAN DIEGO, CA 92127


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1669630653

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO


Provider ID: 299592

Board Certified Specialty: No

AKIHIRO MATSUOKA

 200 W ARBOR DR

SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1669630653

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO


Provider ID: 299591

Board Certified Specialty: No

AKIHIRO MATSUOKA

 8899 UNIVERSITY CENTER LN

SAN DIEGO, CA 92122


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1669630653

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

NGUYEN, QUYEN

Provider ID: 299607

Board Certified Specialty: No

QUYEN T NGUYEN

 8899 UNIVERSITY CENTER LN

SAN DIEGO, CA 92122


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

NGUYEN, QUYEN


Provider ID: 299603

Board Certified Specialty: No

QUYEN T NGUYEN

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (619) 543-6631

Fax: (619) 543-6532

 After Hours Phone: (619) 543-6631

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS


GREEN HOSPITAL


Medi-Cal Open Panel: Yes

D3. 专科提供者名录

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY

NGUYEN, QUYEN

Provider ID: 299606

Board Certified Specialty: No
QUYEN T NGUYEN


 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY

PATEL, VIJAY


Provider ID: 297037

Board Certified Specialty: No


VIJAY PATEL

 3030 CHILDRENS WAY STE
1

SAN DIEGO, CA 92123


 Phone: (858) 309-7701

Fax: (858) 966-8038

 After Hours Phone: (858)
309-7701

Provider Gender: Male

NPI: 1508250747

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW


Provider ID: 299508

Board Certified Specialty: No
ANDREW M

VAHABZADEH-HAGH

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346506920

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED
CTR, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY


VAHABZADEH-HAGH, ANDREW

Provider ID: 299509

Board Certified Specialty: No
ANDREW M

VAHABZADEH-HAGH

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346506920

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED
CTR, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

D3. 专科提供者名录

Min/Max Age: 0\999

American Sign Language (ASL): DEBORAH WATSON

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


VAHABZADEH-HAGH, ANDREW

Provider ID: 299507

Board Certified Specialty: No
ANDREW M

VAHABZADEH-HAGH

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346506920

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED
CTR, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


WATSON, DEBORAH

Provider ID: 299641

Board Certified Specialty: No

DEBORAH WATSON

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346270816

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Website: N/A



OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299639

Board Certified Specialty: No
DEBORAH WATSON

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-6631
 After Hours Phone: (619)
543-6631

Provider Gender: Female

NPI: 1346270816

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299642

Board Certified Specialty: No
DEBORAH WATSON

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122
 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346270816


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299615

Board Certified Specialty: No
PHILIP A WEISSBROD

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122
 Phone: (800) 926-8273

D3. 专科提供者名录

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1366590853

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299610

Board Certified Specialty: No
PHILIP A WEISSBROD

📍 200 W ARBOR DR STE 505
SAN DIEGO, CA 92103

☎ Phone: (858) 657-8590

☎ After Hours Phone: (858) 657-8590

Provider Gender: Male

NPI: 1366590853

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299614

Board Certified Specialty: No
PHILIP A WEISSBROD

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1366590853

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298412

Board Certified Specialty: No
CAROL H YAN

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1619237260

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298414

Board Certified Specialty: No
CAROL H YAN

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1619237260

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Chinese

Cultural Competency: N
Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

D3. 专科提供者名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Provider ID: 275756

N

 Accessibility: CONTACT PROVIDER


 Website: N/A


OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298413

Board Certified Specialty: No
CAROL H YAN

 8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1619237260

 Provider English Spoken: Y

 Provider Language(s) Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PATHOLOGY ANATOMIC

CLINICAL


ALLEN, ELIZABETH

Provider ID: 275756

Board Certified Specialty: No

ELIZABETH S ALLEN

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1174814065

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS

MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A

PATHOLOGY ANATOMIC


CLINICAL

BROOME, HELEN

Provider ID: 275720

Board Certified Specialty: No
HELEN E BROOME

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1184674145

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A

PATHOLOGY ANATOMIC


CLINICAL

BROOME, HELEN

Provider ID: 275721

Board Certified Specialty: No
HELEN E BROOME

 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273





Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1184674145






D3. 专科提供者名录



 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

BUI, JACK

Provider ID: 247581
Board Certified Specialty: No
JACK D BUI
 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1942529821
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


PATHOLOGY ANATOMIC

CLINICAL




BUI, JACK

Provider ID: 247580
Board Certified Specialty: No
JACK D BUI
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1942529821

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N






 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




PATHOLOGY ANATOMIC

CLINICAL

QUINTANA, PAULINA

Provider ID: 296765
Board Certified Specialty: No
QUINTANA, PAULINA

 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
 Phone: (619) 266-3332
Fax: (619) 266-6000
 After Hours Phone: (619)
266-3332
Provider Gender: Female
NPI: 1164482477
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PARADISE
VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PATHOLOGY ANATOMIC

CLINICAL


ROMA, ANDRES

Provider ID: 275826
Board Certified Specialty: No
ANDRES A ROMA

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1295912657

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

D3. 专科提供者名录

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

SHABAIK, AHMED


Provider ID: 275781

Board Certified Specialty: No

AHMED S SHABAIK

 200 W ARBOR DR

SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1679521579

 Provider English Spoken: Y

 Provider Language(s) Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

SONG, WEI

Provider ID: 300001

Board Certified Specialty: No

WEI SONG

 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1306164157

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PATHOLOGY ANATOMIC

CLINICAL


STEPHENS, LAURA

Provider ID: 300042

Board Certified Specialty: No

LAURA D STEPHENS

 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1942561212

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

VAVINSKAYA, VERA


Provider ID: 275789

Board Certified Specialty: No

VERA VAVINSKAYA

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1174757181

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

WANG, DEHUA

Provider ID: 289153

D3. 专科提供者名录

Board Certified Specialty: No
DEHUA WANG

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

Phone: (858) 966-6776

Fax: (858) 966-6707

After Hours Phone: (858)
966-6776

Provider Gender: Female

NPI: 1578790655

Provider English Spoken: Y

Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PEDIATRIC ALLERGY /

IMMUNOLOGY

ALKATIB, RHONDA

Provider ID: 291226

Board Certified Specialty: No

RHONDA E ALKATIB

2655 CAMINO DEL RIO N
STE 425

SAN DIEGO, CA 92108

Phone: (619) 286-6687

Fax: (619) 286-6695

After Hours Phone: (619)
286-6687

Provider Gender: Female

NPI: 1417363086

Provider English Spoken: Y

Provider Language(s)

Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: ALVARADO

HOSPITAL LLC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PEDIATRIC ALLERGY /

IMMUNOLOGY

COLLINS, CATHLEEN

Provider ID: 206083

Board Certified Specialty: No

CATHLEEN A COLLINS

3030 CHILDRENS WAY STE
2

SAN DIEGO, CA 92123

Phone: (858) 966-5961

After Hours Phone: (858)

966-5961

Provider Gender: Female

NPI: 1205128089

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: LUCILE

SALTER PACKARD CHILDRENS

HOSP, Stanford Health Care,

RADY CHILDRENS HOSPITAL

SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PEDIATRIC ALLERGY /

IMMUNOLOGY

COLLINS, CATHLEEN

Provider ID: 285133

Board Certified Specialty: No

CATHLEEN A COLLINS

3020 CHILDRENS WAY

SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)

966-8800

Provider Gender: Female

NPI: 1205128089

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: LUCILE

SALTER PACKARD CHILDRENS

HOSP, Stanford Health Care,

RADY CHILDRENS HOSPITAL

SAN DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC ALLERGY /

IMMUNOLOGY

GENG, BOB




Provider ID: 205823


Board Certified Specialty: No




BOB GENG

5776 RUFFIN RD




D3. 专科提供者名录


 SAN DIEGO, CA 92123
 Phone: (858) 292-1144
 After Hours Phone: (858) 292-1144
Provider Gender: Male
NPI: 1356570758

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N




 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY
GENG, BOB
Provider ID: 205824
Board Certified Specialty: No
BOB GENG




 3030 CHILDRENS WAY STE 2
SAN DIEGO, CA 92123
 Phone: (858) 966-5961
 After Hours Phone: (858) 966-5961
Provider Gender: Male
NPI: 1356570758



 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN



SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY
GREINER, ALEXANDER
Provider ID: 205697
Board Certified Specialty: No
ALEXANDER N GREINER




 5776 RUFFIN RD
SAN DIEGO, CA 92123
 Phone: (858) 966-4900
 After Hours Phone: (858) 966-4900
Provider Gender: Male
NPI: 1609801299


 Provider English Spoken: Y
 Provider Language(s) Spoken: French, German, Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N




 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM SA 8:00AM-0:00PM

 Website: N/A




PEDIATRIC ALLERGY / IMMUNOLOGY
LEIBEL, SYDNEY
Provider ID: 205724
Board Certified Specialty: No
SYDNEY A LEIBEL

 5776 RUFFIN RD
SAN DIEGO, CA 92123
 Phone: (858) 292-1144
 After Hours Phone: (858) 292-1144
Provider Gender: Male
NPI: 1861666919

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY
LEIBEL, SYDNEY
Provider ID: 205725
Board Certified Specialty: No
SYDNEY A LEIBEL

 3030 CHILDRENS WAY FL 2 NORTH
SAN DIEGO, CA 92123
 Phone: (858) 966-5961
 After Hours Phone: (858) 966-5961

D3. 专科提供者名录

Provider Gender: Male
NPI: 1861666919
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC CARDIOLOGY

BOCK, MATTHEW

Provider ID: 280463
Board Certified Specialty: No
MATTHEW J BOCK

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
☎ Phone: (858) 966-5855
☒ Fax: (858) 966-7903

🕒 After Hours Phone: (858)
966-5855

Provider Gender: Male
NPI: 1356514624

☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: LOMA
LINDA UNIVERSITY MED CTR,
LOMA LINDA UNIVERSITY
CHILDRENS HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC CARDIOLOGY

BORQUEZ, ALEJANDRO

Provider ID: 284120
Board Certified Specialty: No
ALEJANDRO A BORQUEZ

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
☎ Phone: (858) 966-5855
☒ Fax: (858) 966-7903

🕒 After Hours Phone: (858)
966-5855

Provider Gender: Female
NPI: 1114277787

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC CARDIOLOGY

CHAU, PETER

Provider ID: 271427
Board Certified Specialty: No
PETER CHAU

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
☎ Phone: (858) 966-5855
☒ Fax: (858) 966-7903
🕒 After Hours Phone: (858)
966-5855

Provider Gender: Male
NPI: 1407146947

☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: LOMA
LINDA UNIVERSITY
CHILDRENS HOSPITAL, LOMA
LINDA UNIVERSITY MED CTR,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC CARDIOLOGY

DAVIS, CHRISTOPHER

Provider ID: N/A
Board Certified Specialty: No
CHRISTOPHER K DAVIS

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
☎ Phone: (858) 966-5855
☒ Fax: (858) 966-7903

🕒 After Hours Phone: (858)
966-5855

Provider Gender: Male
NPI: 1760691950

☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY


D3. 专科提供者名录


CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

DO, THOMAS

Provider ID: 206162

Board Certified Specialty: No
THOMAS B DO

 3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 366-5855

Fax: (858) 966-7423

 After Hours Phone: (858)
366-5855

Provider Gender: Male

NPI: 1053545376

 Provider English Spoken: Y
Cultural Competency: N



Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, CHILDRENS HOSPITAL
AT MISSION, CHILDRENS
HOSPITAL OF ORANGE
COUNTY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


PEDIATRIC CARDIOLOGY

DUMMER, KIRSTEN

Provider ID: 260595

Board Certified Specialty: No
KRISTEN B DUMMER

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Female

NPI: 1780642280

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

GOLDING, IAN

Provider ID: 210823

Board Certified Specialty: No
IAN F GOLDING

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male


NPI: 1962974956


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

GORDON, BRENT

Provider ID: 295391

Board Certified Specialty: No
BRENT M GORDON

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1669480083

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: POMONA
VALLEY HOSP MED CTR,
SANTA MONICA UCLA MED
CTR, SAN ANTONIO COMM
HOSP, LOMA LINDA


UNIVERSITY CHILDRENS
HOSPITAL, LOMA LINDA
UNIVERSITY MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

D3. 专科提供者名录

American Sign Language (ASL):  3020 CHILDRENS WAY
SAN DIEGO, CA 92123

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

HALEY, JESSICA

Provider ID: 205687

Board Certified Specialty: No
JESSICA E HALEY

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855
Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Female

NPI: 1023329885

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRIC CARDIOLOGY

JUSTINO, HENRI

Provider ID: 284123

Board Certified Specialty: No
HENRI JUSTINO

 Phone: (858) 966-5855
Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1518036821

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC CARDIOLOGY

LEHNERTSCHUCHARDT, ELEANOR


Provider ID: 262250

Board Certified Specialty: No

ELEANOR L

LEHNERTSCHUCHARDT

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855
Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Female

NPI: 1760707210

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN


DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

MCCANDLESS, RACHEL

Provider ID: 206147

Board Certified Specialty: No
RACHEL T MCCANDLESS

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-4912
Fax: (858) 966-7903

 After Hours Phone: (858)
966-4912

Provider Gender: Female

NPI: 1487821815

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 专科提供者名录

PEDIATRIC CARDIOLOGY

MUELLER, DANA

Provider ID: 245535

Board Certified Specialty: No
DANA M MUELLER

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855

After Hours Phone: (858)
966-5855

Provider Gender: Female

NPI: 1184915712

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC CARDIOLOGY

NARAYAN, HARI

Provider ID: 205349

Board Certified Specialty: No
HARI K NARAYAN

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1376705707

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

RAO, ROHIT

Provider ID: 206122

Board Certified Specialty: No
ROHIT P RAO

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1063452779

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

SILVASEPULVEDA, JOSE

Provider ID: 206297

Board Certified Specialty: Yes
JOSE A SILVASEPULVEDA

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1417222472

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

STEINBERG, LEONARD

Provider ID: 248208

Board Certified Specialty: No
LEONARD G STEINBERG

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855

After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1538279484

Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

D3. 专科提供者名录

Min/Max Age: 0\19

American Sign Language (ASL): SHILPA

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PEDIATRIC CARDIOLOGY


VAUGHN, GABRIELLE

Provider ID: 205643

Board Certified Specialty: No

GABRIELLE R VAUGHN

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 576-1700

Fax: (858) 966-7423

 After Hours Phone: (858)
576-1700

Provider Gender: Female

NPI: 1891004461

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

PEDIATRIC CARDIOLOGY

VELLOREGOVARDHAN,

SHILPA


Provider ID: 271454

Board Certified Specialty: No

SHILPA

VELLOREGOVARDHAN

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Female

NPI: 1477702165

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC CARDIOLOGY


WERHO, DAVID

Provider ID: 206316

Board Certified Specialty: No

DAVID K WERHO

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1235391863

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC CARDIOLOGY


WILLIAMS, MATTHEW

Provider ID: 206287

Board Certified Specialty: No

MATTHEW R WILLIAMS

 3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7423

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1831423250


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSF BENIOFF CHILDREN'S
HOSPITAL OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 专科提供者名录

PEDIATRIC CARDIOLOGY

YOUNOSZAI, ADEL

Provider ID: 303133

Board Certified Specialty: No
ADEL YOUNOSZAI

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855
Fax: (858) 966-7903

After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1952493819

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC DERMATOLOGY

EICHENFIELD, DAWN

Provider ID: 303679

Board Certified Specialty: No
DAWN Z EICHENFIELD

7910 FROST ST STE 120
SAN DIEGO, CA 92123

Phone: (858) 966-6795
Fax: (858) 966-7479

After Hours Phone: (858)
966-6795

Provider Gender: Female

NPI: 1295198091

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC DERMATOLOGY

EICHENFIELD, DAWN

Provider ID: 283142

Board Certified Specialty: No
DAWN Z EICHENFIELD

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-6795
Fax: (858) 966-7479

After Hours Phone: (858)
966-6795

Provider Gender: Female

NPI: 1295198091

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

AGHILI, ROXANA

Provider ID: 303780

Board Certified Specialty: No
ROXANA AGHILI

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1851927883

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: KAISER
FOUNDATION HOSPITAL SAN
DIEGO, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE




AGHILI, ROXANA

Provider ID: 304918

Board Certified Specialty: No


D3. 专科提供者名录

ROXANA AGHILI

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1851927883

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: KAISER
FOUNDATION HOSPITAL SAN
DIEGO, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER




 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

AMIRNOVIN, RAMBOD


Provider ID: 297673


Board Certified Specialty: No
RAMBOD AMIRNOVIN

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1629104492

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Persian,
Spanish

Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS
ANGELES, LOMA LINDA
UNIVERSITY CHILDRENS
HOSPITAL, LOMA LINDA
UNIVERSITY MED CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, LONG BEACH
MEMORIAL MED CTR, EARL
AND LORRAINE MILLER
CHILDRENS HSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER




 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

AUSTIN-PAGE, LUKAS


Provider ID: 205589

Board Certified Specialty: No
LUKAS R AUSTIN-PAGE

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1326301862

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:


CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


BIALOSTOZKY, MARIO

Provider ID: 206011

Board Certified Specialty: No
MARIO M BIALOSTOZKY

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1609281450

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

D3. 专科提供者名录

PEDIATRIC EMERGENCY MEDICINE

BRYL, AMY

Provider ID: 205967

Board Certified Specialty: No
AMY W BRYL

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1497079487

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
UCSF BENIOFF CHILDREN'S
HOSPITAL OAKLAND,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

CAMPBELL, SARA

Provider ID: 206335

Board Certified Specialty: No
SARA S CAMPBELL

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1841687563

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

CHOO, SUN

Provider ID: 296535

Board Certified Specialty: No
SUN H CHOO

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1700047628

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

CHOO, SUN

Provider ID: 296536

Board Certified Specialty: No
SUN H CHOO

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1700047628

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE


D3. 专科提供者名录


CONRAD, HEATHER

Provider ID: 205960

Board Certified Specialty: No
HEATHER B CONRAD

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1205813409

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SHARP CHULA

VISTA MED CTR, UCSF


BENIOFF CHILDREN'S
HOSPITAL OAKLAND,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


DELRE, ANGELO

Provider ID: 206081

Board Certified Specialty: No
ANGELO M DELRE

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1275761371

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


DEVERA, GEMMIE

Provider ID: 288572

Board Certified Specialty: No
GEMMIE S DEVERA

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1366622078

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


DO, STEPHANIE

Provider ID: 287393

Board Certified Specialty: No
STEPHANIE T DO

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1750513644

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Martin
Luther King Jr Community
Hospital, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

DONOFRIO-ODMANN, JOY

Provider ID: 205375

D3. 专科提供者名录

Board Certified Specialty: No
JOY J DONOFRIO

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1740571165

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: VALLEY
CHILDRENS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

EKPENYONG, ATIM

Provider ID: 205722

Board Certified Specialty: No
ATIM O EKPENYONG

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 576-1700

After Hours Phone: (858)
576-1700

Provider Gender: Female

NPI: 1932318565

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

FISHER, JAY

Provider ID: 295690

Board Certified Specialty: No
JAY FISHER

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1629118518

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

GIBONEY, JENNIFER

Provider ID: 205925

Board Certified Specialty: No
JENNIFER C GIBONEY

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1275895849

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

GORHAM, LAURA

Provider ID: 275784

Board Certified Specialty: No
LAURA M GORHAM

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

D3. 专科提供者名录

Fax: (858) 633-4682

☎ After Hours Phone: (619)
280-2058

Provider Gender: Female

NPI: 1316162324

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

SA 8:00AM-2:00PM

🌐 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

GROSS, MATTHEW

Provider ID: 297172

Board Certified Specialty: No

MATTHEW F GROSS

📍 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

☎ Phone: (619) 280-2905

Fax: (619) 283-1614

☎ After Hours Phone: (619)
280-2905

Provider Gender: Male

NPI: 1942223664

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

🌐 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

GROSS, MATTHEW

Provider ID: 297174

Board Certified Specialty: No

MATTHEW F GROSS

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-8800

☎ After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1942223664

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

HERSKOVITZ, SCOTT

Provider ID: 261045

Board Certified Specialty: Yes

SCOTT A HERSKOVITZ

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-8800

☎ After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1225393499

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

HUNTER, WENDY

Provider ID: 206278

Board Certified Specialty: No

WENDY L HUNTER

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-8800

☎ After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1053515551

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY

D3. 专科提供者名录


CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


INDRA, SEAN

Provider ID: 302625

Board Certified Specialty: No
SEAN W INDRA

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1427349091


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

ISHIMINE, PAUL

Provider ID: 206236

Board Certified Specialty: No
PAUL T ISHIMINE

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1437184421

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

JACKSON, TAYLOR

Provider ID: 302127

Board Certified Specialty: No
TAYLOR J JACKSON

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5999

Fax: (858) 966-8519

 After Hours Phone: (858)
966-5999

Provider Gender: Male

NPI: 1326543752

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


KHAN, SHAHFAR

Provider ID: 294094

Board Certified Specialty: No
SHAHFAR KHAN

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1013361815

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Urdu

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

D3. 专科提供者名录


 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


KINGDON, JOANNA

Provider ID: 302317


Board Certified Specialty: No
JOANNA E KINGDON

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

 Phone: (619) 280-2905
Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Female
NPI: 1609495399

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


MCDANIEL, MICHELE

Provider ID: 248071

Board Certified Specialty: No
MICHELE A MCDANIEL

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1366761959

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

RADY CHILDRENS HOSPITAL

SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY


MEDICINE

MENDES, CHANTAL

Provider ID: 295668

Board Certified Specialty: No
CHANTAL M MENDES

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105


 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1134681265

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A

PEDIATRIC EMERGENCY


MEDICINE


MESIWALA, ADNAN

Provider ID: 275654

Board Certified Specialty: Yes
ADNAN K MESIWALA

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1528483955

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Gujarati

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes



Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER




D3. 专科提供者名录

 Hours: M-F
8:00AM-5:00PM
 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

METCALF, ASHLEY

Provider ID: 205348
Board Certified Specialty: No
ASHLEY M METCALF

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800


Provider Gender: Female
NPI: 1073740205

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM




 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

MILLS, DAVID

Provider ID: 302146
Board Certified Specialty: No

DAVID M MILLS

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800

Provider Gender: Male
NPI: 1194145946

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

MURRAY, MATTHEW

Provider ID: 205759
Board Certified Specialty: No
MATTHEW P MURRAY

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800

Provider Gender: Male
NPI: 1215103023


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER




 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

NGUYEN, MARGARET

Provider ID: 270705
Board Certified Specialty: No
MARGARET B NGUYEN

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800

Provider Gender: Female
NPI: 1942485248


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL

OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY

D3. 专科提供者名录


MEDICINE


NGUYEN, MYLINH

Provider ID: 262299

Board Certified Specialty: No
MYLINH T NGUYEN

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1730428053

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


OZCAN, ALI

Provider ID: 287923

Board Certified Specialty: No
ALI K OZCAN



 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1265867683

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Turkish
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, LOMA LINDA
UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


PADE, KATHRYN

Provider ID: 262411

Board Certified Specialty: No
KATHRYN H PADE

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1215375183

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


PARK, BRIAN

Provider ID: 302352

Board Certified Specialty: No
BRIAN L PARK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1710418744


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


PARK, RONALD

Provider ID: 295457

Board Certified Specialty: No
RONALD E PARK

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2905


D3. 专科提供者名录

Fax: (619) 283-1614

 After Hours Phone: (619) 280-2905

Provider Gender: Male

NPI: 1881695914

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE


PARKER, SHERINE


Provider ID: 205784

Board Certified Specialty: No

SHERINE B PARKER


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1477626513

 Provider English Spoken: Y

 Provider Language(s) Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: GLENDALE

ADVENTIST MED CTR,
GLENDALE MEMORIAL HOSP
AND HEALTH CTR, TRI CITY

MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE


QUINONES-PEREZ, BIANCA


Provider ID: 206947

Board Certified Specialty: No

BIANCA N QUINONES-PEREZ

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-8800

 After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1124360565

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

QUINONES-PEREZ, BIANCA


Provider ID: 206949

Board Certified Specialty: No

BIANCA N QUINONES-PEREZ

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619) 280-2905

Provider Gender: Female

NPI: 1124360565

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

RANASURIYA, DUNISHA

Provider ID: 216970

Board Certified Specialty: No

D3. 专科提供者名录

DUNISHA G RANASURIYA

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1740468057

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

RUIZ, MONICA

Provider ID: 305340

Board Certified Specialty: No
MONICA O RUIZ

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1982059689

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

RUSSELL, SAMUEL

Provider ID: 301249

Board Certified Specialty: No
SAMUEL RUSSELL

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1215564265

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

RUSSELL, SAMUEL

Provider ID: 301250

Board Certified Specialty: No
SAMUEL RUSSELL

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)
280-2905

Provider Gender: Male

NPI: 1215564265

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

SALEH, FAREED

Provider ID: 206216

Board Certified Specialty: No
FAREED R SALEH

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1366691115

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

D3. 专科提供者名录

DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): KIMBERLY A SHERER

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


SCHROTER, STEPHANIE

Provider ID: 243830

Board Certified Specialty: No
STEPHANIE SCHROTER

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1073951828

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


SHERER, KIMBERLY

Provider ID: 284168

Board Certified Specialty: No

KIMBERLY A SHERER

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1992202964

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


SHETH, SARIKA


Provider ID: 248171

Board Certified Specialty: No

SARIKA K SHETH

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1336503234

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


SOUDER, CHRISTOPHER

Provider ID: 301635

Board Certified Specialty: No
CHRISTOPHER D SOUDER

 3030 CHILDRENS WAY FL
3

SAN DIEGO, CA 92123

 Phone: (858) 966-6789

Fax: (858) 966-6706

 After Hours Phone: (858)
966-6789

Provider Gender: Male

NPI: 1851540199


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

SOUDER, CHRISTOPHER

Provider ID: 301636

Board Certified Specialty: No

D3. 专科提供者名录

CHRISTOPHER D SOUDER

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1851540199

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

TAMAS, VANESSA

Provider ID: 206212

Board Certified Specialty: No
VANESSA L TAMAS

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 576-1700
After Hours Phone: (858)
576-1700

Provider Gender: Female

NPI: 1326225368

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, CHILDRENS HOSP

OF LOS ANGELES,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

TANG, ANDREW

Provider ID: 294677

Board Certified Specialty: No
ANDREW S TANG

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1184071516

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

TODD, SARAH

Provider ID: 302800

Board Certified Specialty: No

SARAH C TODD

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1407299787

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

TRAN, THERESA

Provider ID: 301834

Board Certified Specialty: No
THERESA T TRAN

3020 CHILDRENS WAY

D3. 专科提供者名录

SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800

Provider Gender: Female
NPI: 1417496985

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

TRAUT, JOEL

Provider ID: 205475
Board Certified Specialty: No
JOEL TRAUT

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 576-1700
After Hours Phone: (858)
576-1700

Provider Gender: Male
NPI: 1982792065

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
KAMALA VAIDYA
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

ULRICH, STACEY

Provider ID: 205847
Board Certified Specialty: No
STACEY L ULRICH

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8036
After Hours Phone: (858)
966-8036

Provider Gender: Female
NPI: 1619049236

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

VAIDYA, KAMALA

Provider ID: 205809
Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800
After Hours Phone: (858)
966-8800

Provider Gender: Female
NPI: 1083840920

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

VAIDYA, KAMALA

Provider ID: 205811
Board Certified Specialty: No
KAMALA VAIDYA

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

Phone: (619) 280-2905
Fax: (619) 283-1614

After Hours Phone: (619)
280-2905

Provider Gender: Female
NPI: 1083840920

Provider English Spoken: Y


D3. 专科提供者名录

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM*


 *Website: N/A*


PEDIATRIC EMERGENCY MEDICINE

VANE, JACKSON

Provider ID: 205883
Board Certified Specialty: No JACKSON VANE

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 *Phone: (858) 966-8800*

 *After Hours Phone: (858) 966-8800*

Provider Gender: Male


NPI: 1952608580


 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


PEDIATRIC EMERGENCY MEDICINE


VANWOY, LAUREN

Provider ID: 301574

Board Certified Specialty: No LAUREN E VANWOY



 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 *Phone: (858) 966-8800*

 *After Hours Phone: (858) 966-8800*

Provider Gender: Female

NPI: 1568959161

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N


Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


PEDIATRIC EMERGENCY MEDICINE

VARGAS, JACLYN

Provider ID: 285935

Board Certified Specialty: No JACLYN F VARGAS

 3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

 *Phone: (858) 576-1700*

Fax: (858) 966-8479

 *After Hours Phone: (858) 576-1700*

Provider Gender: Female

NPI: 1619359718

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, Los Angeles General Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


PEDIATRIC EMERGENCY MEDICINE

VARGAS, JACLYN


Provider ID: 285934

Board Certified Specialty: Yes JACLYN F VARGAS

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 *Phone: (858) 966-5841*

Fax: (858) 966-6728

 *After Hours Phone: (858) 966-5841*

Provider Gender: Female

NPI: 1619359718

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, Los Angeles General Medical Center


Medi-Cal Open Panel: Yes


D3. 专科提供者名录

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

VARGAS, JACLYN


Provider ID: 296486

Board Certified Specialty: No

JACLYN F VARGAS

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1619359718

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN


DIEGO, Los Angeles General
Medical Center


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A

PEDIATRIC EMERGENCY


MEDICINE


VAYNGORTIN, TATYANA

Provider ID: 263012

Board Certified Specialty: No
TATYANA VAYNGORTIN

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1578967907

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S
HOSPITAL OAKLAND,

CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY


MEDICINE


WANG, YVETTE

Provider ID: 263416

Board Certified Specialty: No
YVETTE L WANG

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1710321278

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE


WANG, VINCENT

Provider ID: 309661

Board Certified Specialty: No

VINCENT J WANG

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

Fax: (858) 966-7433

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1083713655

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO



Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

D3. 专科提供者名录

 Accessibility: CONTACT PROVIDER
 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


YAPHOCKUN, KARENKIM

Provider ID: 206184

Board Certified Specialty: No
KARENKIM K YAPHOCKUN

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 576-1700

 After Hours Phone: (858)
576-1700

Provider Gender: Female

NPI: 1861880817

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC ENDOCRINOLOGY


CYMBALUK, ANNA

Provider ID: 294214


Board Certified Specialty: Yes
ANNA L CYMBALUK

 3030 CHILDRENS WAY STE
4

SAN DIEGO, CA 92123

 Phone: (858) 966-4032

Fax: (858) 966-6227

 After Hours Phone: (858)
966-4032

Provider Gender: Female

NPI: 1043674849

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC ENDOCRINOLOGY


PATTERSON, MARY

Provider ID: 206059

Board Certified Specialty: No
MARY E PATTERSON

 3030 CHILDRENS WAY FL
4 NORTH

SAN DIEGO, CA 92123

 Phone: (858) 966-4032

Fax: (858) 966-6227

 After Hours Phone: (858)
966-4032

Provider Gender: Female

NPI: 1912112020

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC ENDOCRINOLOGY


SINGH, PUJA

Provider ID: 302818


Board Certified Specialty: No
PUJA SINGH

 3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123

 Phone: (858) 966-4032

Fax: (858) 966-6227

 After Hours Phone: (858)
966-4032

Provider Gender: Female

NPI: 1841721172

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC ENDOCRINOLOGY

VARGASTRUJILLO, MARCELA

Provider ID: 205605

Board Certified Specialty: No
MARCELA VARGASTRUJILLO

 3030 CHILDRENS WAY FL

D3. 专科提供者名录

4
SAN DIEGO, CA 92123
☎ Phone: (858) 966-4032
☎ Fax: (858) 966-4032
📞 After Hours Phone: (858) 966-4032
Provider Gender: Female
NPI: 1952534091
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC GASTROENTEROLOGY

CHU, CHRISTOPHER
Provider ID: 301639
Board Certified Specialty: No
CHRISTOPHER CHU
📍 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123
☎ Phone: (858) 966-4003
☎ Fax: (858) 560-6798
📞 After Hours Phone: (858)
966-4003
Provider Gender: Male
NPI: 1912369273
☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish, Yue

Chinese
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC GASTROENTEROLOGY

GOYAL, NIDHI
Provider ID: 205598
Board Certified Specialty: No
NIDHI P GOYAL
📍 3030 CHILDRENS WAY FL
2 SOUTH
SAN DIEGO, CA 92123
☎ Phone: (858) 966-4003
☎ Fax: (858) 560-6798
📞 After Hours Phone: (858)
966-4003
Provider Gender: Female
NPI: 1598029332
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC GASTROENTEROLOGY **HARTMANN, PHILLIPP**

Provider ID: 294228
Board Certified Specialty: Yes
PHILLIPP HARTMANN
📍 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123
☎ Phone: (858) 966-4003
☎ Fax: (858) 560-6798
📞 After Hours Phone: (858)
966-4003
Provider Gender: Male
NPI: 1356796536
☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: French, German
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC
GASTROENTEROLOGY
LIN, TOM
Provider ID: 297707

D3. 专科提供者名录

Board Certified Specialty: No
TOM K LIN

3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

Phone: (858) 966-4003

Fax: (858) 560-6798

After Hours Phone: (858)
966-4003

Provider Gender: Male

NPI: 1114136934

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC

GASTROENTEROLOGY

SCHWARZ, KATHLEEN

Provider ID: 205885

Board Certified Specialty: No
KATHLEEN B SCHWARZ

3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

Phone: (858) 966-4003

Fax: (858) 560-6798

After Hours Phone: (858)
966-4003

Provider Gender: Female

NPI: 1265465918

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC

GASTROENTEROLOGY

YOUNG, JOCELYN

Provider ID: 294675

Board Certified Specialty: No
JOCELYN A YOUNG

3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

Phone: (858) 966-4003

Fax: (858) 560-6798

After Hours Phone: (858)
966-4003

Provider Gender: Female

NPI: 1306227491

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UC DAVIS
MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY

BRIGGS, BENJAMIN

Provider ID: 274689

Board Certified Specialty: Yes
BENJAMIN J BRIGGS

3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858)
966-5811

Provider Gender: Male

NPI: 1952695777

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, NAVAL MEDICAL CTR
SD RBE

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY

BUSH, KELLY

Provider ID: 274408


Board Certified Specialty: No

D3. 专科提供者名录

KELLY A BUSH

 3010 CHILDRENS WAY STE 2

SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858) 966-5811

Provider Gender: Female

NPI: 1073831079

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY


CHOO, SUN

Provider ID: 206115

Board Certified Specialty: No
SUN H CHOO

 3010 CHILDRENS WAY STE 2-WEST

SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858) 966-5811

Provider Gender: Female

NPI: 1700047628

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

DING, HILDA

Provider ID: 206173

Board Certified Specialty: No
HILDA H DING

 3010 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858) 966-5811

Provider Gender: Female

NPI: 1780813923

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

ELSTER, JENNIFER

Provider ID: 205769

Board Certified Specialty: Yes
JENNIFER D ELSTER

 3010 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858) 966-5811

Provider Gender: Female

NPI: 1588866115

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

GANESAN, ANUSHA

Provider ID: 205882

Board Certified Specialty: No
ANUSHA P GANESAN

 3010 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)

D3. 专科提供者名录

966-5811
Provider Gender: Female
NPI: 1982091740
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY

JAFFRAY, JULIE

Provider ID: 296760
Board Certified Specialty: No
JULIE A JAFFRAY
 3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
 Phone: (858) 966-5811
Fax: (858) 966-8035
 After Hours Phone: (858)
966-5811
Provider Gender: Female
NPI: 1396942470
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): Provider ID: 307300
N

Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY

KUO, DENNIS

Provider ID: 205433
Board Certified Specialty: No
DENNIS J KUO
 3010 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-5811
Fax: (858) 966-8035
 After Hours Phone: (858)
966-5811
Provider Gender: Male
NPI: 1750492146

Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY

LI, HOJUN

Board Certified Specialty: No
HOJUN LI
 3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
 Phone: (858) 966-5811
Fax: (858) 966-8035
 After Hours Phone: (858)
966-5811
Provider Gender: Male
NPI: 1730455239
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY

SRIDHAR, SUNITA

Provider ID: 302088
Board Certified Specialty: Yes
SUNITA SRIDHAR
 3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
 Phone: (858) 966-5811
Fax: (858) 966-8035
 After Hours Phone: (858)
966-5811
Provider Gender: Female
NPI: 1649707365
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY

D3. 专科提供者名录


CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

WONG, VICTOR

Provider ID: 206149

Board Certified Specialty: No
VICTOR WONG

 3010 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Male

NPI: 1154692473


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

YU, HELENA


Provider ID: 301583

Board Certified Specialty: No
HELENA YU

 3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123


 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1881127736

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

YU, JENNIFER

Provider ID: 206148

Board Certified Specialty: No
JENNIFER C YU

 3010 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1326315599

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY


ZAGE, PETER

Provider ID: 206315

Board Certified Specialty: No
PETER E ZAGE

 3010 CHILDRENS WAY STE
2W

SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Male

NPI: 1912003161

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

D3. 专科提供者名录

American Sign Language (ASL): CAITLIN E CARTER

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC INFECTIOUS DISEASES

MILDER, EDMUND

Provider ID: 289138

Board Certified Specialty: No
EDMUND A MILDER

 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123

 Phone: (858) 966-7785

Fax: (858) 966-8658

 After Hours Phone: (858)
966-7785

Provider Gender: Male

NPI: 1760460026

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC NEPHROLOGY


CARTER, CAITLIN

Provider ID: 302777

Board Certified Specialty: No

 8110 BIRMINGHAM WAY FL
1

SAN DIEGO, CA 92123

 Phone: (858) 966-8052

Fax: (858) 966-7789

 After Hours Phone: (858)
966-8052

Provider Gender: Female

NPI: 1255514618

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS GREEN

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL, UCSD

MEDICAL CTR, SHARP

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC NEPHROLOGY


INGULLI, ELIZABETH

Provider ID: 302778


Board Certified Specialty: No
ELIZABETH G INGULLI

 8110 BIRMINGHAM WAY
STE 28

SAN DIEGO, CA 92123

 Phone: (858) 966-8052

Fax: (858) 966-7789

 After Hours Phone: (858)
966-8052

Provider Gender: Female

NPI: 1811919244

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC NEPHROLOGY


MAK, ROBERT

Provider ID: 302776


Board Certified Specialty: No
ROBERT H MAK

 8110 BIRMINGHAM WAY FL
1

SAN DIEGO, CA 92123

 Phone: (858) 966-8052

Fax: (858) 966-7789

 After Hours Phone: (858)
966-8052

Provider Gender: Male

NPI: 1740295252

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
RADY CHILDRENS HOSPITAL
SAN DIEGO

D3. 专科提供者名录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC NEPHROLOGY


PERENS, ELLIOT

Provider ID: 302765

Board Certified Specialty: No
ELLIOT A PERENS

 8110 BIRMINGHAM WAY FL
1

SAN DIEGO, CA 92123

 Phone: (858) 966-8052

Fax: (858) 966-7789

 After Hours Phone: (858)
966-8052

Provider Gender: Male

NPI: 1922328947

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND, UCSF MEDICAL
CENTER, SHARP MEMORIAL
HOSPITAL, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY


AKONG, KATHRYN

Provider ID: 205673

Board Certified Specialty: No
KATHRYN A AKONG

 3030 CHILDRENS WAY STE
2

SAN DIEGO, CA 92123

 Phone: (858) 966-5846

Fax: (858) 966-8457

 After Hours Phone: (858)
966-5846

Provider Gender: Female

NPI: 1912169061

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY


BHATTACHARJEE, RAKESH

Provider ID: 205950

Board Certified Specialty: No
RAKESH BHATTACHARJEE

 3030 CHILDRENS WAY FL
2 NORTH

SAN DIEGO, CA 92123

 Phone: (858) 966-5846

Fax: (858) 966-8457

 After Hours Phone: (858)
966-5846

Provider Gender: Male

NPI: 1588781173

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC PULMONOLOGY


BHATTACHARJEE, RAKESH

Provider ID: 246060

Board Certified Specialty: No
RAKESH BHATTACHARJEE

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 576-1700

 After Hours Phone: (858)
576-1700

Provider Gender: Male

NPI: 1588781173

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D3. 专科提供者名录

PROVIDER
Website: N/A

PEDIATRIC PULMONOLOGY **CERNELC-KOHAN, MATEJKA**

Provider ID: 243042
Board Certified Specialty: No
MATEJKA CERNELC-KOHAN

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5846
Fax: (858) 966-8457

After Hours Phone: (858)
966-5846

Provider Gender: Female
NPI: 1871752451

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC PULMONOLOGY **CERNELC-KOHAN, MATEJKA**

Provider ID: 243041
Board Certified Specialty: No
MATEJKA CERNELC-KOHAN

3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123

Phone: (858) 966-5846
Fax: (858) 966-8457

After Hours Phone: (858)
966-5846

Provider Gender: Female
NPI: 1871752451

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC PULMONOLOGY **FINCH, CHRISTINA**

Provider ID: 302581
Board Certified Specialty: No
CHRISTINA E FINCH

3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123

Phone: (858) 966-5846
Fax: (858) 966-8457

After Hours Phone: (858)
966-5846

Provider Gender: Female
NPI: 1598255325

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC PULMONOLOGY **FIREIZEN, YARON**

Provider ID: 302329
Board Certified Specialty: No
YARON FIREIZEN

3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123

Phone: (858) 966-5846
Fax: (858) 966-8457

After Hours Phone: (858)
966-5846

Provider Gender: Male
NPI: 1699123927

Provider English Spoken: Y
Provider Language(s)
Spoken: Hebrew

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

D3. 专科提供者名录

PEDIATRIC PULMONOLOGY

LANDEOGUTIERREZ, JEREMY

Provider ID: 284177

Board Certified Specialty: No
JEREMY S

LANDEOGUTIERREZ

3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

Phone: (858) 966-5846

Fax: (858) 966-8457

After Hours Phone: (858)
966-5846

Provider Gender: Male

NPI: 1255750360

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC PULMONOLOGY

LANDEOGUTIERREZ, JEREMY

Provider ID: 284176

Board Certified Specialty: No
JEREMY S

LANDEOGUTIERREZ

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5846

Fax: (858) 569-9052

After Hours Phone: (858)

966-5846

Provider Gender: Male

NPI: 1255750360

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC PULMONOLOGY

LENHART-PENDERGRASS,

PATRICIA

Provider ID: 294641

Board Certified Specialty: Yes
PATRICIA M

LENHART-PENDERGRASS

3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

Phone: (858) 966-5846

Fax: (858) 966-8457

After Hours Phone: (858)
966-5846

Provider Gender: Female

NPI: 1144615659

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-4:30PM

Website: N/A

PEDIATRIC PULMONOLOGY

RAO, APARNA

Provider ID: 206124

Board Certified Specialty: No
APARNA R RAO

3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

Phone: (858) 966-5846

Fax: (858) 966-5847

After Hours Phone: (858)
966-5846

Provider Gender: Female

NPI: 1649222340

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC PULMONOLOGY


RAO, APARNA

Provider ID: 206123

D3. 专科提供者名录

Board Certified Specialty: No
APARNA R RAO

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5846


Fax: (858) 569-9052

 After Hours Phone: (858)
966-5846

Provider Gender: Female

NPI: 1649222340

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi

Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC PULMONOLOGY

RYU, JULIE

Provider ID: 206218

Board Certified Specialty: No
JULIE RYU

 3030 CHILDRENS WAY FL
2 NORTH
SAN DIEGO, CA 92123


 Phone: (858) 966-5846

Fax: (858) 569-5847

 After Hours Phone: (858)
966-5846

Provider Gender: Female

NPI: 1568533321

 Provider English Spoken: Y

Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC PULMONOLOGY

TANTISIRA, KELAN

Provider ID: 277183

Board Certified Specialty: No
KELAN G TANTISIRA

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5846

Fax: (858) 569-9052

 After Hours Phone: (858)
966-5846

Provider Gender: Male

NPI: 1760420434

 Provider English Spoken: Y

Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC RHEUMATOLOGY


CHANG, JOHANNA

Provider ID: 246394

Board Certified Specialty: No
JOHANNA C CHANG

 3030 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8082

 After Hours Phone: (858)
966-8082

Provider Gender: Female

NPI: 1821242199

 Provider English Spoken: Y

Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC RHEUMATOLOGY

SHEETS, ROBERT


Provider ID: 255900

Board Certified Specialty: No
ROBERT M SHEETS

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 966-8082






Fax: (858) 966-4067

 After Hours Phone: (858)
966-8082

Provider Gender: Male

NPI: 1013088772


D3. 专科提供者名录



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-4:30PM
 Website: N/A

PEDIATRICS

ALAGIRI, MADHU




Provider ID: 206387
Board Certified Specialty: No
MADHU ALAGIRI
 7920 FROST ST STE 200
SAN DIEGO, CA 92123
 Phone: (858) 966-7484
Fax: (858) 966-4064
 After Hours Phone: (858)
966-7484
Provider Gender: Male
NPI: 1619083961





 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRICS

ALLSUP, VICTORIA

Provider ID: 302345
Board Certified Specialty: No
VICTORIA G ALLSUP
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700
Provider Gender: Female
NPI: 1437786944


 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRICS

ALLSUP, VICTORIA




Provider ID: 302344
Board Certified Specialty: No
VICTORIA G ALLSUP
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680
 After Hours Phone: (858)
279-0925
Provider Gender: Female


NPI: 1437786944

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRICS

ANDREE, GREGOR

Provider ID: 293220
Board Certified Specialty: No
GREGOR ANDREE
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700
Provider Gender: Male
NPI: 1467436063

 Provider English Spoken: Y
 Provider Language(s)
Spoken: German, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

PEDIATRICS

ANDREE, GREGOR

Provider ID: 293219
Board Certified Specialty: No

D3. 专科提供者名录

GREGOR ANDREE

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

Fax: (858) 633-4682

After Hours Phone: (619)
280-2058

Provider Gender: Male

NPI: 1467436063

Provider English Spoken: Y

Provider Language(s)

Spoken: German, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRICS

BEAUCHAMP-WALTERS, JULIA

Provider ID: 270063

Board Certified Specialty: No

JULIA BEAUCHAMP-WALTERS

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1457420713

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRICS

CAMERON, MELISSA

Provider ID: 205965

Board Certified Specialty: No

MELISSA A CAMERON

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1902983752

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PEDIATRICS

CANTU, ALICIA

Provider ID: 205753

Board Certified Specialty: No

ALICIA O CANTU

3030 CHILDRENS WAY STE

300

SAN DIEGO, CA 92123

Phone: (858) 966-8974

Fax: (858) 966-6721

After Hours Phone: (858)
966-8974

Provider Gender: Female

NPI: 1922179688

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PEDIATRICS

CANTU, ALICIA

Provider ID: 205752

Board Certified Specialty: No

ALICIA O CANTU

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1922179688

Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

D3. 专科提供者名录

American Sign Language (ASL):  4305 UNIVERSITY AVE STE 150

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS


CHONG, AMY

Provider ID: 259993

Board Certified Specialty: Yes

AMY CHONG

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5803
Fax: (858) 966-5992

 After Hours Phone: (858)
966-5803

Provider Gender: Female

NPI: 1720423288

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRICS

DOAN STEPHENS, CRYSTAL

Provider ID: 293274

Board Certified Specialty: No
CRYSTAL T DOAN STEPHENS

 Phone: (619) 280-2058

Fax: (858) 633-4682

 After Hours Phone: (619)
280-2058

Provider Gender: Female

NPI: 1730570144

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PEDIATRICS

DOAN STEPHENS, CRYSTAL

Provider ID: 293275

Board Certified Specialty: No
CRYSTAL T DOAN STEPHENS

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1730570144

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PEDIATRICS


DOSHI, AMI

Provider ID: 205330


Board Certified Specialty: No
AMI P DOSHI

 3030 CHILDRENS WAY STE
300

SAN DIEGO, CA 92123


 Phone: (858) 966-8974


Fax: (858) 966-6721

 After Hours Phone: (858)
966-8974

Provider Gender: Female

NPI: 1801099676

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Gujarati, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

DOSHI, AMI

Provider ID: 205329

Board Certified Specialty: No
AMI P DOSHI

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)

D3. 专科提供者名录

966-5841
Provider Gender: Female
NPI: 1801099676
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Gujarati, Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRICS

GIBONEY, JENNIFER

Provider ID: 296242
Board Certified Specialty: No
JENNIFER C GIBONEY
📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 810-8700
Fax: (858) 633-4680
🕒 After Hours Phone: (858)
810-8700
Provider Gender: Female
NPI: 1275895849
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL): **PEDIATRICS**
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M 8:30AM-5:30PM
TU 5:30PM-8:30PM
W 8:30AM-5:30PM
TH 5:30PM-8:30PM
F 8:30AM-5:30PM
SA 9:00AM-4:00PM
🌐 Website: N/A

PEDIATRICS

GIBONEY, JENNIFER

Provider ID: 296241
Board Certified Specialty: No
JENNIFER C GIBONEY
📍 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
☎ Phone: (619) 280-2058
Fax: (858) 633-4682
🕒 After Hours Phone: (619)
280-2058
Provider Gender: Female
NPI: 1275895849
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM
🌐 Website: N/A

GRAY, SARAH

Provider ID: 284224
Board Certified Specialty: No
SARAH M GRAY
📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
☎ Phone: (858) 966-5841
Fax: (858) 966-6728
🕒 After Hours Phone: (858)
966-5841
Provider Gender: Female
NPI: 1508210311
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N


♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRICS

HUANG, MARIA


Provider ID: 205974
Board Certified Specialty: No
MARIA Z HUANG
📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
☎ Phone: (858) 966-5841
Fax: (858) 966-6728
🕒 After Hours Phone: (858)
966-5841
Provider Gender: Female
NPI: 1770841140

D3. 专科提供者名录

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRICS

JIMENEZBACARDI, ADRIA

Provider ID: 294640
Board Certified Specialty: No
ADRIA JIMENEZBACARDI



 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841
Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Male



NPI: 1467847293

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: ST MARYS
HOSPITAL AND MEDICAL
CENTER, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N


 Accessibility: CONTACT


PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRICS

JINDAL, ANUJA


Provider ID: 303285
Board Certified Specialty: Yes
ANUJA V JINDAL

 3030 CHILDRENS WAY FL
4
SAN DIEGO, CA 92123

 Phone: (858) 966-5819
Fax: (858) 966-4930


 After Hours Phone: (858)
966-5819

Provider Gender: Female
NPI: 1194046581

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRICS

KARMAKAR, KANKA



Provider ID: 213847
Board Certified Specialty: No
KANKA KARMAKAR

 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126


 Phone: (844) 200-2426
Fax: (858) 578-4417

 After Hours Phone: (844)
200-2426

Provider Gender: Female
NPI: 1972536654

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Bengali, Hindi,
Polish, Spanish, Tagalog
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM


 Website: N/A


PEDIATRICS

KHARE, MANASWITHA


Provider ID: 206289
Board Certified Specialty: Yes
MANASWITHA KHARE

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841
Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female
NPI: 1912345307


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

D3. 专科提供者名录

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

LEE, BEGEM

Provider ID: 205923

Board Certified Specialty: No
LEE M BEGEM

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1053672444

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: UCSF


BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS


LOPEZ, XIMENA

Provider ID: 302856

Board Certified Specialty: No
XIMENA LOPEZ

 3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123


 Phone: (858) 966-4032


Fax: (858) 966-6227

 After Hours Phone: (858)
966-4032

Provider Gender: Female

NPI: 1740316405

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

MANNINOAVILA, ELIZABETH

Provider ID: 262161

Board Certified Specialty: No
ELIZABETH E MANNINOAVILA

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1164747127

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSF


BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

MARANO, RACHEL


Provider ID: 302438

Board Certified Specialty: No
RACHEL M MARANO

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1043673528

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:
HOLLYWOOD PRESBYTERIAN
MED CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

D3. 专科提供者名录

 Website: N/A

PEDIATRICS

MARC-AURELE, KRISHELLE

Provider ID: 301719

Board Certified Specialty: No
KRISHELLE L MARC-AURELE

 7910 FROST ST STE 230
SAN DIEGO, CA 92123

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, TRI CITY
MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRICS

NGO, MAI

Provider ID: 302114

Board Certified Specialty: No
MAI P NGO

 7910 FROST ST STE 195
SAN DIEGO, CA 92123


 Phone: (858) 966-8974


Fax: (858) 966-6721

 After Hours Phone: (858)
966-8974

Provider Gender: Female

NPI: 1508910787

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N
Hospital Affiliation: UCSF


BENIOFF CHILDREN'S
HOSPITAL OAKLAND, UCSF
MEDICAL CENTER, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

NGO, MAI

Provider ID: 302113

Board Certified Specialty: No
MAI P NGO

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-8974

Fax: (858) 966-4051

 After Hours Phone: (858)
966-8974

Provider Gender: Female

NPI: 1508910787

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N
Hospital Affiliation: UCSF


BENIOFF CHILDREN'S
HOSPITAL OAKLAND, UCSF
MEDICAL CENTER, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

PATEL, AARTI


Provider ID: 205865

Board Certified Specialty: No
AARTI R PATEL

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1871813105

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

D3. 专科提供者名录

 Website: N/A


PEDIATRICS

PIERCE, HEATHER

Provider ID: 205701

Board Certified Specialty: No
HEATHER PIERCE

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female


NPI: 1699955542


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS


POLICH, MICHELLE

Provider ID: 286390

Board Certified Specialty: Yes
MICHELLE A POLICH

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1780118018

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRICS

RHEE, KYUNG

Provider ID: 206114

Board Certified Specialty: No
KYUNG E RHEE

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1013996529


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
PALOMAR MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS


RIES, DAVID

Provider ID: 206082

Board Certified Specialty: No
DAVID C RIES


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

 After Hours Phone: (858)
966-5841

Provider Gender: Male


NPI: 1376705483


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

RUNGVIVATJARUS, TIRANUN


Provider ID: 206319

Board Certified Specialty: No
TIRANUN RUNGVIVATJARUS

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

D3. 专科提供者名录

NPI: 1407276363


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

SONG, RICHARD

Provider ID: 301716

Board Certified Specialty: No
RICHARD S SONG

 7910 FROST ST STE 230
SAN DIEGO, CA 92123

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1881893477

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR HEALTH,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL
ENCINITAS, PALOMAR
MEDICAL CENTER,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRICS


STOVER, LAURIE

Provider ID: 206196

Board Certified Specialty: No
LAURIE B STOVER

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1659442317

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS

SUTTNER, DENISE

Provider ID: 301721

Board Certified Specialty: No
DENISE M SUTTNER

 7910 FROST ST STE 230
SAN DIEGO, CA 92123

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1457433799

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL


ENCINITAS, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRICS

WEISS, KATHERINE

Provider ID: 301703

Board Certified Specialty: No

D3. 专科提供者名录

KATHERINE J WEISS

7910 FROST ST STE 230
SAN DIEGO, CA 92123

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1053541862

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICAL MEDICINE / REHABILITATION

ALGRA, JEFFREY

Provider ID: 287524

Board Certified Specialty: No
JEFFREY ALGRA

7910 FROST ST STE 195
SAN DIEGO, CA 92123

Phone: (858) 966-8974

After Hours Phone: (858)
966-8974

Provider Gender: Male

NPI: 1457664518

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICAL MEDICINE / REHABILITATION

BIFFL, SUSAN

Provider ID: 287453

Board Certified Specialty: No
SUSAN E BIFFL

7910 FROST ST STE 195
SAN DIEGO, CA 92123

Phone: (858) 966-8974

Fax: (858) 966-6721

After Hours Phone: (858)
966-8974

Provider Gender: Female

NPI: 1366589640

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICAL MEDICINE / REHABILITATION

DALAL, PRITHA

Provider ID: 287523

Board Certified Specialty: No
PRITHA B DALAL MD

7910 FROST ST STE 195
SAN DIEGO, CA 92123

Phone: (858) 966-8974

After Hours Phone: (858)
966-8974

Provider Gender: Female

NPI: 1609017532

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICAL MEDICINE / REHABILITATION

RICHARDSON, HENRY

Provider ID: 295276

Board Certified Specialty: No
HENRY A RICHARDSON

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Phone: (619) 325-1161

Fax: (619) 325-1717

After Hours Phone: (619)
325-1161

Provider Gender: Male

D3. 专科提供者名录

NPI: 1407052459


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICAL MEDICINE / REHABILITATION


RYAN, KYLE

Provider ID: 287520

Board Certified Specialty: No
KYLE J RYAN

 7910 FROST ST STE 195
SAN DIEGO, CA 92123

 Phone: (858) 966-8974

 After Hours Phone: (858)
966-8974


Provider Gender: Male


NPI: 1447645742

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICAL MEDICINE / REHABILITATION


SCOTT-WYARD, PHOEBE

Provider ID: 287519

Board Certified Specialty: No
PHOEBE R SCOTT-WYARD

 7910 FROST ST STE 195
SAN DIEGO, CA 92123

 Phone: (858) 966-8974

 After Hours Phone: (858)
966-8974

Provider Gender: Female

NPI: 1336356203

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:


CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICAL MEDICINE / REHABILITATION

SKALSKY, ANDREW

Provider ID: 287537

Board Certified Specialty: No
ANDREW J SKALSKY

 7910 FROST ST STE 195
SAN DIEGO, CA 92123

 Phone: (858) 966-8974

 After Hours Phone: (858)

966-8974

Provider Gender: Male

NPI: 1487635272


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


AINSWORTH, DELISSA

Provider ID: 243367

Board Certified Specialty: No
DELISSA M AINSWORTH

 4510 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1750734893

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
UCSD MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes


D3. 专科提供者名录

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

ALBRIGHT, KELSEY

Provider ID: 284763

Board Certified Specialty: No
KELSEY A ALBRIGHT

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 923-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
923-8273

Provider Gender: Female

NPI: 1235653148

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


ARMEEN, GARY


Provider ID: 247035

Board Certified Specialty: No

GARY P ARMEEN JR

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1760774863

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PHYSICIANS ASSISTANT


BERGEN, SOPHEA

Provider ID: 295518

Board Certified Specialty: No
SOPHEA R BERGEN

 6719 ALVARADO RD STE
308

SAN DIEGO, CA 92120

 Phone: (619) 265-7912

Fax: (619) 265-7922

 After Hours Phone: (619)
265-7912

Provider Gender: Female

NPI: 1558300665

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: ALVARADO

HOSPITAL LLC, PALOMAR
MEDICAL CENTER, SCRIPPS
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


BOYD, LISA

Provider ID: 217649

Board Certified Specialty: No
LISA N BOYD

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1871859421

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 专科提供者名录

PHYSICIANS ASSISTANT

BRUECKNER, TAMMIE

Provider ID: 255558

Board Certified Specialty: No
TAMMIE N BRUECKNER

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407212376

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA

Provider ID: 257530

Board Certified Specialty: No
PATRICIA CASTILLO

📍 3544 30TH ST
SAN DIEGO, CA 92104

☎ Phone: (619) 515-2424

🕒 After Hours Phone: (619)
515-2424

Provider Gender: Female

NPI: 1376550657

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:30AM-5:30PM
F 8:30AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

DERISSI, DANA

Provider ID: 301632

Board Certified Specialty: No
DANA A DERISSI

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-8800

🕒 After Hours Phone: (858)
966-8800

Provider Gender: Female
NPI: 1063829505

☑ Provider English Spoken: Y
☑ Provider Language(s)

Spoken: Farsi, Persian

Cultural Competency: N

Hospital Affiliation: LOMA

LINDA UNIVERSITY MED CTR,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PHYSICIANS ASSISTANT

GUTH, CARA

Provider ID: 299111

Board Certified Specialty: No
CARA A GUTH

📍 9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

☎ Phone: (858) 455-6460

Fax: (858) 455-5362

🕒 After Hours Phone: (858)
455-6460

Provider Gender: Female

NPI: 1992177182

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 21\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
9:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

HASEGAWA, CHRIS

Provider ID: 247206

Board Certified Specialty: No
CHRIS HASEGAWA

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225698962

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes


D3. 专科提供者名录

Min/Max Age: 0\999

American Sign Language (ASL): JOSHUA B HIGGINS

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

HASEGAWA, CHRIS

Provider ID: 287349

Board Certified Specialty: No
CHRIS HASEGAWA

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225698962

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


HIGGINS, JOSHUA

Provider ID: 287133

Board Certified Specialty: No

JOSHUA B HIGGINS

 203 W F ST
SAN DIEGO, CA 92101

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1861624181

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


HUNTER, JACOB

Provider ID: 287449

Board Certified Specialty: No
JACOB A HUNTER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1114459765


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


HUNTER, JACOB

Provider ID: 298430

Board Certified Specialty: No
JACOB A HUNTER

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122
 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1114459765

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298428

Board Certified Specialty: No
JACOB A HUNTER

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

D3. 专科提供者名录

Provider Gender: Male

NPI: 1114459765


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

LAM, DAVINA

Provider ID: 295651

Board Certified Specialty: No
DAVINA LAM

 6719 ALVARADO RD STE
308
SAN DIEGO, CA 92120

 Phone: (619) 265-7912

Fax: (619) 265-7922

 After Hours Phone: (619)
265-7912

Provider Gender: Female

NPI: 1245863737

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER, SCRIPPS
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


LAMBERT, GAGE

Provider ID: 214788

Board Certified Specialty: No
GAGE I LAMBERT

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1144672494

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

LEE, JENNIFER


Provider ID: 309998

Board Certified Specialty: No
JENNIFER C LEE

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1265081871

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PHYSICIANS ASSISTANT

LINDEMANN, CHRISTINA

Provider ID: 283760

Board Certified Specialty: No
CHRISTINA R LINDEMANN

 4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (858) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1194373514


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 专科提供者名录

PHYSICIANS ASSISTANT

MARTIN, HALEY

Provider ID: 305026

Board Certified Specialty: No

HALEY R MARTIN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093440836

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

MCADAMS, JOSEPH

Provider ID: 280611

Board Certified Specialty: No

JOSEPH MCADAMS

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1104371251

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

MERRILL, COREY

Provider ID: 258040

Board Certified Specialty: No

COREY M MERRILL

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1386032308

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

NAKAMITSU, ABIGAIL

Provider ID: 268666

Board Certified Specialty: No

ABIGAIL L NAKAMITSU

3030 CHILDRENS WAY FL
3
SAN DIEGO, CA 92123

Phone: (858) 966-6789

Fax: (858) 966-8519

After Hours Phone: (858)
966-6789

Provider Gender: Female

NPI: 1932459179

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

NGUYEN, KHANH

Provider ID: 310049

Board Certified Specialty: No

KHANH K NGUYEN

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427312644

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT

D3. 专科提供者名录

PROVIDER
Website: N/A

PHYSICIANS ASSISTANT

NGUYEN, KHANH

Provider ID: 310050

Board Certified Specialty: No
KHANH K NGUYEN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427312644

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

PAUL, ROBERT

Provider ID: 307945

Board Certified Specialty: No
ROBERT M PAUL

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123

Phone: (858) 571-3630

Fax: (858) 295-3948

After Hours Phone: (858)
571-3630

Provider Gender: Male

NPI: 1972811412

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-4:30PM

Website: N/A

PHYSICIANS ASSISTANT

PELIO, DARREN

Provider ID: 293441

Board Certified Specialty: No
DARREN A PELIO

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8275

Fax: (888) 539-8783

After Hours Phone: (800)
926-8275

Provider Gender: Male

NPI: 1386791028

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

PELIO, DARREN

Provider ID: 293444

Board Certified Specialty: No
DARREN A PELIO

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Phone: (800) 926-8278

Fax: (888) 539-8786

After Hours Phone: (800)
926-8278

Provider Gender: Male

NPI: 1386791028

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

PERREAULT, MARK

Provider ID: 283586

Board Certified Specialty: No
MARK R PERREAULT

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1356749451

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

D3. 专科提供者名录

PHYSICIANS ASSISTANT

PERREAULT, MARK

Provider ID: 283585

Board Certified Specialty: No
MARK R PERREAULT

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1356749451

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

PHUNG, AIVI

Provider ID: 293247

Board Certified Specialty: No
AIVI D PHUNG

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1639528110

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

PHUNG, AIVI

Provider ID: 293246

Board Certified Specialty: No
AIVI D PHUNG

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1639528110

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

PRIEST, VIVIAN

Provider ID: 272430

Board Certified Specialty: No
VIVIAN I NGUYEN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1225581754

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

PYLE, ALEXANDRA

Provider ID: 297718

Board Certified Specialty: No
ALEXANDRA P PYLE

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Phone: (858) 455-6460

Fax: (858) 455-7197

After Hours Phone: (858)
455-6460

Provider Gender: Female

NPI: 1225416472

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 20\999

American Sign Language (ASL):
N

Accessibility: CONTACT

D3. 专科提供者名录

PROVIDER
Hours: M-F
8:30AM-4:00PM
Website: N/A

PHYSICIANS ASSISTANT

QUIJANO, GLENN

Provider ID: 307067
Board Certified Specialty: No
GLENN QUIJANO
5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Phone: (858) 571-3630
Fax: (858) 295-3948
After Hours Phone: (858)
571-3630

Provider Gender: Male

NPI: 1407466030

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-4:30PM

Website: N/A

PHYSICIANS ASSISTANT

ROBERTS, AUDREY

Provider ID: 253253
Board Certified Specialty: No
AUDREY ELIZABETH
ZANZUCCHI

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-7777
After Hours Phone: (619)
543-7777

Provider Gender: Female

NPI: 1265960256
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE

Provider ID: 302452
Board Certified Specialty: No
ANNETTE A RODRIGUES

3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123

Phone: (858) 966-4003
Fax: (858) 560-6798

After Hours Phone: (858)
966-4003

Provider Gender: Female

NPI: 1205381845

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT

SCHMITT, EVA

Provider ID: 264176
Board Certified Specialty: No
EVA V SCHMITT
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1174715106

Provider English Spoken: Y
Provider Language(s)
Spoken: German

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SCHROEDER, JENNIFER

Provider ID: 256640
Board Certified Specialty: No
JENNIFER K SCHROEDER

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

D3. 专科提供者名录

📞 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1780851253

🗨️ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

SCHROEDER, JENNIFER

Provider ID: 256639

Board Certified Specialty: No

JENNIFER K SCHROEDER

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

📞 Phone: (800) 926-8273

Fax: (858) 453-1469

📞 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1780851253

🗨️ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

SCHULZ, STEFAN

Provider ID: 243419

Board Certified Specialty: No

STEFAN K SCHULZ

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

📞 Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1316102163

🗨️ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

SHAUL, SHERA

Provider ID: 247974

Board Certified Specialty: No

SHERA M SHAUL

📍 4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121

📞 Phone: (800) 926-8273

📞 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1336659507

🗨️ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

SPEH, BRIAN

Provider ID: 305009

Board Certified Specialty: No

BRIAN A SPEH

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

📞 Phone: (800) 926-8273

📞 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1124593926

🗨️ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PHYSICIANS ASSISTANT

STALLINGS, ANDREA

Provider ID: 255913

Board Certified Specialty: No

ANDREA M STALLINGS

📍 330 LEWIS ST
SAN DIEGO, CA 92103

📞 Phone: (619) 543-7496

📞 After Hours Phone: (619) 543-7496

Provider Gender: Female

NPI: 1972595478


🗨️ Provider English Spoken: Y
Cultural Competency: N


D3. 专科提供者名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


TESFAI, HELEN

Provider ID: 287372


Board Certified Specialty: No

HELEN S TESFAI

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1942724042

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


WAHLIN, TAMARA

Provider ID: 299600

Board Certified Specialty: No

TAMARA A WAHLIN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083823322

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PHYSICIANS ASSISTANT


WAHLIN, TAMARA

Provider ID: 299599

Board Certified Specialty: No

TAMARA A WAHLIN

 8899 UNIVERSITY CENTER
LN

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083823322

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PHYSICIANS ASSISTANT


WAHLIN, TAMARA

Provider ID: 299598

Board Certified Specialty: No

TAMARA A WAHLIN

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1083823322


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PHYSICIANS ASSISTANT


WEBB, SHANNON

Provider ID: 305285

Board Certified Specialty: No

SHANNON L WEBB

 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

 Phone: (858) 750-2983

Fax: (858) 750-2984

 After Hours Phone: (858)
750-2983

Provider Gender: Female

NPI: 1821271685

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

D3. 专科提供者名录

Min/Max Age: 18\999

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM


 Website: N/A


PHYSICIANS ASSISTANT

WEIR, JACQUELINE

Provider ID: 278203

Board Certified Specialty: No
JACQUELINE R WEIR

 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932494499

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

WEIR, JACQUELINE

Provider ID: 278201

Board Certified Specialty: No
JACQUELINE R WEIR

 330 LEWIS ST
SAN DIEGO, CA 92103


 Phone: (800) 925-8271

Fax: (888) 539-8781

 After Hours Phone: (800)
925-8271

Provider Gender: Female

NPI: 1932494499

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

WEIR, JACQUELINE

Provider ID: 278200

Board Certified Specialty: No
JACQUELINE R WEIR

 4168 FRONT ST
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932494499

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


WRIGHT, DEREK

Provider ID: 302388

Board Certified Specialty: No

DEREK J WRIGHT

 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

 Phone: (619) 325-1161

Fax: (619) 325-1717

 After Hours Phone: (619)
325-1161

Provider Gender: Male

NPI: 1629674858


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PREVENTATIVE MEDICINE

D3. 专科提供者名录

GENERAL

ROMERO, CAMILA

Provider ID: 293289

Board Certified Specialty: No

CAMILA X ROMERO

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1508912130

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PREVENTATIVE MEDICINE

GENERAL

ROMERO, CAMILA

Provider ID: 293290

Board Certified Specialty: No

CAMILA X ROMERO

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1508912130

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PREVENTATIVE MEDICINE

GENERAL

ROMERO, CAMILA

Provider ID: 303060

Board Certified Specialty: No

CAMILA X ROMERO

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1508912130

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PSYCHOLOGIST

ABERCROMBIE, SHERI

Provider ID: 293400

Board Certified Specialty: No

SHERI ABERCROMBIE

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1932292422

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:30AM-5:30PM

SA 8:30AM-4:00PM

Website: N/A

PSYCHOLOGIST

ABERCROMBIE, SHERI

Provider ID: 290770

Board Certified Specialty: No

SHERI ABERCROMBIE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Female

D3. 专科提供者名录


NPI: 1932292422

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PSYCHOLOGIST


BANKS, SARAH

Provider ID: 203173

Board Certified Specialty: No
SARAH J BANKS

 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1164701132

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST

BANKS, SARAH

Provider ID: 304195

Board Certified Specialty: No
SARAH J BANKS

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1164701132

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PSYCHOLOGIST


BANKS, SARAH


Provider ID: 203174

Board Certified Specialty: No
SARAH J BANKS

 4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1164701132

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

BASS, GURGIANA

Provider ID: 290752

Board Certified Specialty: No
GURGIANA BASS

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1639325277


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST


BASS, GURGIANA

Provider ID: 306550

Board Certified Specialty: No
GURGIANA BASS

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)

D3. 专科提供者名录

279-0925
Provider Gender: Female
NPI: 1639325277

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M 8:00AM-4:30PM
TU 8:00AM-0:00PM
W 8:00AM-4:30PM
TH 8:00AM-0:00PM
 Website: N/A

PSYCHOLOGIST

CHESHER, NICHOLAS

Provider ID: 273811
Board Certified Specialty: No
NICHOLAS J CHESHER

200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1124539697

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Hours: M-F

8:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST

CLEMENT, LUIS

Provider ID: 290745
Board Certified Specialty: No
LUIS F CLEMENT

2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
Fax: (619) 234-0206
 After Hours Phone: (619)
234-2158
Provider Gender: Male
NPI: 1235364712

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Website: N/A

PSYCHOLOGIST

DIOKNO, RHODA

Provider ID: 290800
Board Certified Specialty: No
ROHDA CARINO DIOKNO

2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
Fax: (619) 234-0206
 After Hours Phone: (619)
234-2158
Provider Gender: Female
NPI: 1629109483

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Website: N/A

PSYCHOLOGIST

FIRESTONE, MICHELLE

Provider ID: 290954
Board Certified Specialty: No
MICHELLE E FIRESTONE

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680
 After Hours Phone: (858)
279-0925

Provider Gender: Female
NPI: 1114687803

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Website: N/A

PSYCHOLOGIST

FIRESTONE, MICHELLE

Provider ID: 290773
Board Certified Specialty: No
MICHELLE E FIRESTONE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700

Provider Gender: Female

D3. 专科提供者名录


NPI: 1114687803

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PSYCHOLOGIST


FORZANI, CHRISTINA

Provider ID: 290780

Board Certified Specialty: No

CHRISTINA A FORZANI

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

Fax: (858) 633-4681

 After Hours Phone: (619)
563-0250

Provider Gender: Female


NPI: 1902939630

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PSYCHOLOGIST


GIAMONA, KRISTEN

Provider ID: 294171


Board Certified Specialty: No

KRISTEN M GIAMONA

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1376824383

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PSYCHOLOGIST


GIAMONA, KRISTEN

Provider ID: 290801

Board Certified Specialty: No

KRISTEN M GIAMONA

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1376824383

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST

GOMEZ, JUANITA

Provider ID: 291424

Board Certified Specialty: No
JUANITA GOMEZ

 6030 VILLAGE WAY
SAN DIEGO, CA 92130

 Phone: (800) 926-8372

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

Provider Gender: Female

NPI: 1790915759

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PSYCHOLOGIST


KLUEMPER, NICOLE

Provider ID: 296237

Board Certified Specialty: No

NICOLE S KLUEMPER

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1902125818



 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 2\999

American Sign Language (ASL):
N

D3. 专科提供者名录


 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

PSYCHOLOGIST



KLUEMPER, NICOLE

Provider ID: 290792
Board Certified Specialty: No
NICOLE S KLUEMPER
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 810-8700*
Fax: (858) 633-4680
 *After Hours Phone: (858) 810-8700*

Provider Gender: Female
NPI: 1902125818


 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 2\999

American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

PSYCHOLOGIST

LABIB, MICHAEL

Provider ID: 301617
Board Certified Specialty: No
MICHAEL LABIB
 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
 *Phone: (619) 662-4100*
Fax: (619) 785-3384
 *After Hours Phone: (619) 662-4100*


Provider Gender: Male
NPI: 1609055797

 *Provider English Spoken: Y*
 *Provider Language(s)*

Spoken: Arabic
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM


 *Website: N/A*

PSYCHOLOGIST

LEBENSOHN CHIALVO, FLORENCIA


Provider ID: 245225
Board Certified Specialty: No
FLORENCIA LEBENSOHN CHIALVO
 7910 FROST ST STE 350
SAN DIEGO, CA 92123
 *Phone: (858) 496-4800*
 *After Hours Phone: (858) 496-4800*


Provider Gender: Female
NPI: 1134788730

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F*
8:00AM-5:00PM



 *Website: N/A*

PSYCHOLOGIST


LEBENSOHN CHIALVO, FLORENCIA

Provider ID: 245224
Board Certified Specialty: No
FLORENCIA LEBENSOHN CHIALVO


 9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121


 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1134788730

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F*
8:00AM-5:00PM


 *Website: N/A*

PSYCHOLOGIST

LINKE, SARAH

Provider ID: 273638
Board Certified Specialty: No
SARAH E LINKE

 9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

D3. 专科提供者名录

NPI: 1487026415


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PSYCHOLOGIST

LINKE, SARAH

Provider ID: 273639

Board Certified Specialty: No
SARAH E LINKE

 4910 DIRECTORS PL STE
250
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1487026415


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

MAGINOT-CHESSER, TAMARA


Provider ID: 273223

Board Certified Specialty: No
TAMARA R MAGINOT
CHESSER

 4510 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (858) 534-8019

Fax: (858) 534-6727

 After Hours Phone: (858)
534-8019

Provider Gender: Female

NPI: 1043441165

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

MCCULLUM, TIFFANY

Provider ID: 290689

Board Certified Specialty: No
TIFFANY MCCULLUM

 286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

Fax: (619) 428-7952

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1528306206


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 13\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST

MONTOYA, JESSICA

Provider ID: 274619

Board Certified Specialty: No
JESSICA L MONTOYA

 4168 FRONT ST FL 3
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1003421256

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

D3. 专科提供者名录

American Sign Language (ASL): N
After Hours Phone: (858) 810-8700
Website: N/A

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

NING, GRACE

Provider ID: 296219

Board Certified Specialty: No
GRACE J NING

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1598911315

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Website: N/A

PSYCHOLOGIST

NING, GRACE

Provider ID: 290742

Board Certified Specialty: No
GRACE J NING

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

Provider Gender: Female

NPI: 1598911315

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Website: N/A

PSYCHOLOGIST

NORMAN, MARC

Provider ID: 276869

Board Certified Specialty: No
MARC A NORMAN

350 DICKINSON ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1922169101

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

NORMAN, MARC

Provider ID: 272916

Board Certified Specialty: No
MARC A NORMAN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-2827

After Hours Phone: (619)
543-2827

Provider Gender: Male

NPI: 1922169101

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

ORFF, HENRY

Provider ID: 273009

Board Certified Specialty: No
HENRY J ORFF

4520 EXECUTIVE DR STE
P2

SAN DIEGO, CA 92121





Phone: (844) 757-5337

After Hours Phone: (844)
757-5337

Provider Gender: Male

NPI: 1144685215

D3. 专科提供者名录

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST

ORTIZ, MARIA

Provider ID: 290721
Board Certified Specialty: No
MARIA E ORTIZ
 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
Fax: (619) 662-4158

 After Hours Phone: (619)
662-4100

Provider Gender: Female
NPI: 1497980775

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

PSYCHOLOGIST


PATTERSON-HYATT, KIMBERLY

Provider ID: 290730
Board Certified Specialty: No


KIMBERLY G
PATTERSON-HYATT
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
 Phone: (619) 662-4100
Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female
NPI: 1780997742

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST


PRINCE, RENEE

Provider ID: 303603
Board Certified Specialty: No
RENEE K PRINCE


 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
 Phone: (844) 200-2426
Fax: (619) 474-4008

 After Hours Phone: (844)
200-2426

Provider Gender: Female
NPI: 1467737908

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-6:00PM

 Website: N/A

PSYCHOLOGIST


RADOJEVIC, NATASHA

Provider ID: 290690
Board Certified Specialty: No
NATASHA RADOJEVIC


 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female
NPI: 1821365008

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU
8:30AM-5:30PM
TH-F 8:30AM-5:30PM

 Website: N/A

PSYCHOLOGIST

RADOJEVIC, NATASHA

Provider ID: 306574
Board Certified Specialty: No
NATASHA RADOJEVIC

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680

 After Hours Phone: (858)

D3. 专科提供者名录

279-0925
Provider Gender: Female
NPI: 1821365008
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TU
8:30AM-5:30PM
TH-F 8:30AM-5:30PM
 Website: N/A


PSYCHOLOGIST


SALO, STEPHANIE


Provider ID: 307831
Board Certified Specialty: No
STEPHANIE P SALO
 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
Fax: (858) 633-4681

 After Hours Phone: (619)
563-0250

Provider Gender: Female
NPI: 1477967784

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 17\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PSYCHOLOGIST

SCHELLINGER, KRISTON


Provider ID: 213752
Board Certified Specialty: No
KRISTON B SCHELLINGER

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (858) 246-1979

 After Hours Phone: (858)
246-1979


Provider Gender: Female
NPI: 1710234273

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST


SCHELLINGER, KRISTON

Provider ID: 213750
Board Certified Specialty: No
KRISTON B SCHELLINGER


 9333 GENESEE AVE STE
200

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1710234273


 Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST


SCHELLINGER, KRISTON

Provider ID: 213751
Board Certified Specialty: No
KRISTON B SCHELLINGER


 9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

 Phone: (858) 246-1979

 After Hours Phone: (858)
246-1979

Provider Gender: Female
NPI: 1710234273

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

D3. 专科提供者名录

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PSYCHOLOGIST

TARLE, STEPHANIE

Provider ID: 303115
Board Certified Specialty: No
STEPHANIE J TARLE

6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1659920403

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PSYCHOLOGIST

TO, TUAN

Provider ID: 290283
Board Certified Specialty: No
TUAN TO

4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681

After Hours Phone: (619)
563-0250

Provider Gender: Male
NPI: 1255696183

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 5\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PSYCHOLOGIST

TO, TUAN

Provider ID: 290285
Board Certified Specialty: No
TUAN TO

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Male
NPI: 1255696183

Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 5\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PSYCHOLOGIST

TO, TUAN

Provider ID: 290284
Board Certified Specialty: No
TUAN TO

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858)
810-8700

Provider Gender: Male
NPI: 1255696183

Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 5\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PSYCHOLOGIST

TWAMLEY, ELIZABETH

Provider ID: 290717
Board Certified Specialty: No
ELIZABETH W TWAMLEY

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
Fax: (619) 687-1067

After Hours Phone: (619)
233-8500

Provider Gender: Female
NPI: 1700089141

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-W

D3. 专科提供者名录

8:30AM-5:00PM
TH 8:30AM-9:00PM
F 8:30AM-5:00PM

 Website: N/A

PULMONARY DISEASES


BAILEY, JACOB

Provider ID: 299923

Board Certified Specialty: No

JACOB A BAILEY

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1598150039

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PULMONARY DISEASES

BAILEY, JACOB

Provider ID: 299924

Board Certified Specialty: No

JACOB A BAILEY

 4520 EXECUTIVE DR
SAN DIEGO, CA 92121


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1598150039

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PULMONARY DISEASES

JOSHUA, JISHA


Provider ID: 238061


Board Certified Specialty: No

JISHA K JOSHUA

 4520 EXECUTIVE DR STE
P2


SAN DIEGO, CA 92121


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1023436417

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Malayalam

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PULMONARY DISEASES


JOSHUA, JISHA


Provider ID: 238062

Board Certified Specialty: No

JISHA K JOSHUA

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1023436417

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Malayalam

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PULMONARY DISEASES

LE, HUAN


Provider ID: 27358

Board Certified Specialty: No

HUAN A LE

 5507 EL CAJON BLVD STE
C

SAN DIEGO, CA 92115

 Phone: (619) 582-1448

Fax: (619) 582-1081

 After Hours Phone: (619)
582-1448

Provider Gender: Male

NPI: 1780797381

D3. 专科提供者名录

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish,
Vietnamese
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PARADISE VALLEY
HOSPITAL, SHARP CHULA
VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\99
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-W
9:00AM-5:00PM
TH 8:00AM-1:00PM
F 9:00AM-6:00PM
SA 8:00AM-11:00AM
 Website: N/A

PULMONARY DISEASES

LE, HUAN



Provider ID: 300636
Board Certified Specialty: No
HUAN A LE
 5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115
 Phone: (619) 582-1448
Fax: (619) 582-1081
 After Hours Phone: (619)
582-1448
Provider Gender: Male
NPI: 1780797381
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish,
Vietnamese
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PARADISE VALLEY
HOSPITAL, SHARP CHULA
VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-W
9:00AM-5:00PM
TH 8:00AM-1:00PM
F 9:00AM-6:00PM
SA 8:00AM-11:00AM
 Website: N/A

PULMONARY DISEASES




MCGUIRE, WILLIAM

Provider ID: 299986
Board Certified Specialty: No
WILLIAM C MCGUIRE
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1841684081
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes




Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

PULMONARY DISEASES

PEARCE, ALEX




Provider ID: 300055
Board Certified Specialty: No
ALEX K PEARCE
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1265896856

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

RADIATION ONCOLOGY

CARMONA, RUBEN

Provider ID: 303100
Board Certified Specialty: No
RUBEN CARMONA
 7901 FROST ST
SAN DIEGO, CA 92123
 Phone: (858) 939-5010
Fax: (619) 740-8499
 After Hours Phone: (858)
939-5010
Provider Gender: Male

D3. 专科提供者名录

NPI: 1275929242

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp

Grossmont Hospital, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIATION ONCOLOGY

COLEMAN, LORI

Provider ID: 221091

Board Certified Specialty: No

LORI A COLEMAN

3075 HEALTH CENTER DR
SAN DIEGO, CA 92123

Phone: (858) 939-5010

Fax: (858) 939-5021

After Hours Phone: (858)
939-5010

Provider Gender: Female

NPI: 1053348920

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SHARP MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,

PALOMAR MEDICAL CENTER,

Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIATION ONCOLOGY

HATTANGADI-GLUTH, JONA

Provider ID: 262270

Board Certified Specialty: No

JONA A HATTANGADI-GLUTH

16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858)
649-5100

Provider Gender: Female

NPI: 1467625491

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-5:00PM

F 8:00AM-8:00PM

Website: N/A

RADIATION ONCOLOGY

HATTANGADI-GLUTH, JONA

Provider ID: 254496

Board Certified Specialty: No

JONA A HATTANGADI-GLUTH

16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858)
649-5100

Provider Gender: Female

NPI: 1467625491

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-5:00PM

F 8:00AM-8:00PM

Website: N/A

RADIATION ONCOLOGY

HOOPES, DAVID

Provider ID: 269725

Board Certified Specialty: No

DAVID J HOOPES

16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127

Phone: (858) 649-5100

Fax: (858) 649-5099


After Hours Phone: (858)
649-5100

Provider Gender: Male

NPI: 1962520080


Provider English Spoken: Y


D3. 专科提供者名录

 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:30AM-5:00PM


 *Website: N/A*


RADIATION ONCOLOGY

HOOPES, DAVID

Provider ID: 262206

Board Certified Specialty: No
DAVID J HOOPES


 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

 *Phone: (858) 649-5100*
Fax: (858) 649-5099

 *After Hours Phone: (858)*
649-5100

Provider Gender: Male

NPI: 1962520080

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:30AM-5:00PM


 *Website: N/A*


RADIATION ONCOLOGY


TRINGALE, KATHRYN

Provider ID: 306883

Board Certified Specialty: No
KATHRYN R TRINGALE

 9730 SUMMERS RIDGE RD
STE 101
SAN DIEGO, CA 92121

 *Phone: (858) 345-2445*
Fax: (858) 578-1144

 *After Hours Phone: (858)*
345-2445

Provider Gender: Female

NPI: 1780172031


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM


 *Website: N/A*


RADIATION ONCOLOGY

VOLPP, PAUL

Provider ID: 221105

Board Certified Specialty: No
PAUL B VOLPP

 3075 HEALTH CENTER DR
SAN DIEGO, CA 92123



 *Phone: (858) 939-5010*
Fax: (858) 939-5021

 *After Hours Phone: (858)*

939-5010

Provider Gender: Male

NPI: 1225186232

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,
GROSSMONT HOSPITAL,
PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


RADIOLOGY DIAGNOSTIC

BERMAN, ZACHARY

Provider ID: 269318

Board Certified Specialty: No
ZACHARY T BERMAN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)*
926-8273

Provider Gender: Male

NPI: 1033521190

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes


D3. 专科提供者名录

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

BERMAN, ZACHARY

Provider ID: 304163

Board Certified Specialty: No
ZACHARY T BERMAN

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1033521190


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC


BRANCH, CODY

Provider ID: 304199

Board Certified Specialty: No
CODY BRANCH

 6655 ALVARADO RD

SAN DIEGO, CA 92120

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1851770622


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

BRANCH, CODY

Provider ID: 283675

Board Certified Specialty: No
CODY BRANCH

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1851770622

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC


CARSWELL, AIMEE

Provider ID: 303054

Board Certified Specialty: No
AIMEE P CARSWELL

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (858) 554-1212
Fax: (858) 795-1195

 After Hours Phone: (858)
554-1212


Provider Gender: Female

NPI: 1619156635

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

CARSWELL, AIMEE

Provider ID: 304194

Board Certified Specialty: No
AIMEE P CARSWELL

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (858) 554-1212
Fax: (858) 795-1195

 After Hours Phone: (858)

D3. 专科提供者名录

554-1212

Provider Gender: Female

NPI: 1619156635

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC


CARSWELL, AIMEE

Provider ID: 303055


Board Certified Specialty: No

AIMEE P CARSWELL

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (858) 554-1212

Fax: (858) 795-1195

 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1619156635

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 283228

Board Certified Specialty: No
KAREN Y CHENG

 330 LEWIS ST STE 202
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427430511

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 304207

Board Certified Specialty: No
KAREN Y CHENG

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427430511

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 283226

Board Certified Specialty: No
KAREN Y CHENG

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427430511

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

D3. 专科提供者名录

 Website: N/A

RADIOLOGY DIAGNOSTIC


CHEWNING, RUSH

Provider ID: 301914

Board Certified Specialty: No

RUSH CHEWNING

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 966-8863

Fax: (858) 966-8863

 After Hours Phone: (858)
966-8863

Provider Gender: Male

NPI: 1083872212

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC


FAZELI, SOUDABEH

Provider ID: 299991

Board Certified Specialty: No

SOUDABEH FAZELI

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639553613

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC


FAZELI, SOUDABEH

Provider ID: 304171

Board Certified Specialty: No

SOUDABEH FAZELI

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639553613

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC


FAZELI, SOUDABEH

Provider ID: 299992

Board Certified Specialty: No

SOUDABEH FAZELI

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639553613

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC

FORCIER, NANCY

Provider ID: 286956

Board Certified Specialty: No

NANCY J FORCIER

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1497721724

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS


MEMORIAL HOSPITAL,

Providence Mission Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D3. 专科提供者名录

 Website: N/A

RADIOLOGY DIAGNOSTIC **FORCIER, NANCY**

Provider ID: 286954

Board Certified Specialty: No
NANCY J FORCIER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1497721724

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,

Providence Mission Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


RADIOLOGY DIAGNOSTIC **FOWLER, KATHRYN**

Provider ID: 201289

Board Certified Specialty: No
KATHRYN J FOWLER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255457941

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,
SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,
SCRIPPS GREEN HOSPITAL,


SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


RADIOLOGY DIAGNOSTIC **FOWLER, KATHRYN**

Provider ID: 201291

Board Certified Specialty: No
KATHRYN J FOWLER

 330 LEWIS ST STE 202
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255457941

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,
SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,
SCRIPPS GREEN HOSPITAL,


SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

RADIOLOGY DIAGNOSTIC **GRISSOM, MURRAY**

Provider ID: 271569

Board Certified Specialty: No
MURRAY J GRISSOM

 330 LEWIS ST STE 202
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1720465396

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,

Stanford Health Care,
STANFORD HEALTH CARE

TRI-VALLEY

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

D3. 专科提供者名录

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


RADIOLOGY DIAGNOSTIC

GRISSOM, MURRAY

Provider ID: 271567

*Board Certified Specialty: No
MURRAY J GRISSOM*

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273
Fax: (888) 539-8781*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1720465396

 *Provider English Spoken: Y
Cultural Competency: N*

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

Stanford Health Care,

STANFORD HEALTH CARE

TRI-VALLEY


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

RADIOLOGY DIAGNOSTIC


HANNSUN, GEMMY

Provider ID: 282789

Board Certified Specialty: No

GEMMY HANNSUN

 200 W ARBOR DR
SAN DIEGO, CA 92103


 *Phone: (800) 926-8273
Fax: (888) 539-8781*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1992120026

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Khmer, Spanish*

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


RADIOLOGY DIAGNOSTIC


HANNSUN, GEMMY

Provider ID: 282791

*Board Certified Specialty: No
GEMMY HANNSUN*


 330 LEWIS ST STE 202
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273
Fax: (888) 539-8781*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1992120026

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Khmer, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


RADIOLOGY DIAGNOSTIC

HORKY, LAURA

Provider ID: 241853

*Board Certified Specialty: No
LAURA L HORKY*

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273
After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1598967812

 *Provider English Spoken: Y
Cultural Competency: N*

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

D3. 专科提供者名录

RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL

Provider ID: 299957

Board Certified Specialty: No

PAUL M JAFFRAY

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1275700999

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Los Angeles

General Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL

Provider ID: 299958

Board Certified Specialty: No

PAUL M JAFFRAY

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1275700999

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Los Angeles

General Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL

Provider ID: 304165

Board Certified Specialty: No

PAUL M JAFFRAY

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1275700999

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Los Angeles

General Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER

Provider ID: 304167

Board Certified Specialty: No

SAMMER JAZBEH

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1770825457

Provider English Spoken: Y

Provider Language(s)

Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

PROVIDENCE LITTLE CO OF

MARY MED CTR TORRANCE,

PROVIDENCE LITTLE CO OF

MARY MED CTR SAN PEDRO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER

Provider ID: 271127

Board Certified Specialty: No

SAMMER JAZBEH

330 LEWIS ST STE 202
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1770825457

Provider English Spoken: Y

Provider Language(s)


Spoken: Arabic


Cultural Competency: N

D3. 专科提供者名录

*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
PROVIDENCE LITTLE CO OF
MARY MED CTR TORRANCE,
PROVIDENCE LITTLE CO OF
MARY MED CTR SAN PEDRO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER

Provider ID: 271126

*Board Certified Specialty: No
SAMMER JAZBEH*

 *200 W ARBOR DR
SAN DIEGO, CA 92103*

 *Phone: (800) 926-8273
Fax: (888) 539-8781*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1770825457

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Arabic*

Cultural Competency: N


*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
PROVIDENCE LITTLE CO OF
MARY MED CTR TORRANCE,
PROVIDENCE LITTLE CO OF
MARY MED CTR SAN PEDRO*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


RADIOLOGY DIAGNOSTIC

KHURANA, AMAN

Provider ID: 307768

*Board Certified Specialty: No
AMAN KHURANA*

 *200 W ARBOR DR
SAN DIEGO, CA 92103*

 *Phone: (800) 926-8273
Fax: (888) 539-8781*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1427496710


 *Provider English Spoken: Y
Cultural Competency: N*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*


RADIOLOGY DIAGNOSTIC

KHURANA, AMAN

Provider ID: 307765

*Board Certified Specialty: No
AMAN KHURANA*

 *6655 ALVARADO RD
SAN DIEGO, CA 92120*

 *Phone: (800) 926-8273
Fax: (888) 539-8781*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1427496710

 *Provider English Spoken: Y
Cultural Competency: N*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*


RADIOLOGY DIAGNOSTIC

KHURANA, AMAN

Provider ID: 307766

*Board Certified Specialty: No
AMAN KHURANA*

 *330 LEWIS ST
SAN DIEGO, CA 92103*

 *Phone: (800) 926-8273
Fax: (888) 539-8781*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male


NPI: 1427496710

 *Provider English Spoken: Y
Cultural Competency: N*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*

RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER

Provider ID: 283145

Board Certified Specialty: No

D3. 专科提供者名录

DHIMITER KONDILI

330 LEWIS ST STE 202
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699125450

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER

Provider ID: 283143

Board Certified Specialty: No

DHIMITER KONDILI

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699125450

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

MARKS, ROBERT

Provider ID: 300064

Board Certified Specialty: No

ROBERT M MARKS

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952389934

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ST MARY
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

MARKS, ROBERT

Provider ID: 300065

Board Certified Specialty: No

ROBERT M MARKS

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952389934

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ST MARY
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

RITCHIE, DAVID

Provider ID: 300031

Board Certified Specialty: No

DAVID J RITCHIE

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1407201916

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

SADAT, SAYED

D3. 专科提供者名录

Provider ID: 299968

Board Certified Specialty: No
SAYED W SADAT

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1679000806

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

SADAT, SAYED

Provider ID: 299969

Board Certified Specialty: No
SAYED W SADAT

📍 330 LEWIS ST
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1679000806

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

SADAT, SAYED

Provider ID: 304202

Board Certified Specialty: No
SAYED W SADAT

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1679000806

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

SCHULTZ, HEATHER

Provider ID: 240344

Board Certified Specialty: No
HEATHER M SCHULTZ

📍 330 LEWIS ST STE 202
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1871910810

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

SCHULTZ, HEATHER

Provider ID: 240342

Board Certified Specialty: No
HEATHER M SCHULTZ

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1871910810

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A







RADIOLOGY DIAGNOSTIC

SEARLEMAN, ADAM

Provider ID: 299948




Board Certified Specialty: No
ADAM C SEARLEMAN

D3. 专科提供者名录

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1134570641
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

RADIOLOGY DIAGNOSTIC

SEARLEMAN, ADAM




Provider ID: 299949
Board Certified Specialty: No
ADAM C SEARLEMAN
 330 LEWIS ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1134570641
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

RADIOLOGY DIAGNOSTIC

SLATER, JERRY

Provider ID: 283312
Board Certified Specialty: No
JERRY SLATER



 330 LEWIS ST STE 202
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1851746382
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
LOMA LINDA UNIVERSITY
MED CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A





RADIOLOGY DIAGNOSTIC

SLATER, JERRY

Provider ID: 283310
Board Certified Specialty: No
JERRY SLATER

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male

NPI: 1851746382

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
LOMA LINDA UNIVERSITY
MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

RADIOLOGY DIAGNOSTIC

SPENGLER, NATHAN

Provider ID: 303048
Board Certified Specialty: No
NATHAN M SPENGLER
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1992919666
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT

D3. 专科提供者名录

PROVIDER
 Website: N/A

RADIOLOGY DIAGNOSTIC


SPENGLER, NATHAN

Provider ID: 303049

Board Certified Specialty: No

NATHAN M SPENGLER

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1992919666

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC

STEPENOSKY, JAMES

Provider ID: 309702

Board Certified Specialty: No
JAMES E STEPENOSKY

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1598738577

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC

STEPENOSKY, JAMES

Provider ID: 309703

Board Certified Specialty: No
JAMES E STEPENOSKY

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1598738577

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC


STRAKA, CHRISTOPHER

Provider ID: 276875

Board Certified Specialty: No
CHRISTOPHER A STRAKA

 16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127

 Phone: (858) 649-5100

Fax: (858) 649-5099

 After Hours Phone: (858)
649-5100

Provider Gender: Male

NPI: 1801281399

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 17\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC


SWEET, JASON

Provider ID: 305028

Board Certified Specialty: No
JASON D SWEET

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1326197393



 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999



American Sign Language (ASL):

D3. 专科提供者名录

N
 Accessibility: CONTACT PROVIDER
 Website: N/A


RADIOLOGY DIAGNOSTIC **TADDONIO, MICHAEL**

Provider ID: 304179
Board Certified Specialty: No
MICHAEL A TADDONIO

 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781



 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1386987261

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR



Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):


N
 Accessibility: CONTACT PROVIDER
 Website: N/A

RADIOLOGY DIAGNOSTIC **TADDONIO, MICHAEL**

Provider ID: 240408
Board Certified Specialty: No
MICHAEL A TADDONIO

 4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273

 After Hours Phone: (800)


926-8273
Provider Gender: Male
NPI: 1386987261
 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC **TADDONIO, MICHAEL**

Provider ID: 240407
Board Certified Specialty: No
MICHAEL A TADDONIO

 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1386987261


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):

N



 Accessibility: CONTACT PROVIDER


 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC **TADDONIO, MICHAEL**

Provider ID: 240405
Board Certified Specialty: No
MICHAEL A TADDONIO

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273


Provider Gender: Male
NPI: 1386987261

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):



N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC **TADROS, ANTHONY**

Provider ID: 268546
Board Certified Specialty: No
ANTHONY S TADROS

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273

D3. 专科提供者名录

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1306112057

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

TADROS, ANTHONY

Provider ID: 304150

Board Certified Specialty: No

ANTHONY S TADROS

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1306112057

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

UNSDORFER, KYLE

Provider ID: 300035

Board Certified Specialty: No

KYLE M UNSDORFER

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1285165183

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

UNSDORFER, KYLE

Provider ID: 300034

Board Certified Specialty: No

KYLE M UNSDORFER

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1285165183

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

VAHDAT, NOUSHIN

Provider ID: 300071

Board Certified Specialty: No

NOUSHIN VAHDAT

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1396700852

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

VAHDAT, NOUSHIN

Provider ID: 300070

Board Certified Specialty: No

D3. 专科提供者名录

NOUSHIN VAHDAT

 330 LEWIS ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1396700852

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH

Provider ID: 283205

Board Certified Specialty: No
SIAVOSH VAKILIAN

 3366 5TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 230-0400

Fax: (858) 429-7936

 After Hours Phone: (619)
230-0400

Provider Gender: Male

NPI: 1427456151


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH

Provider ID: 283207

Board Certified Specialty: No
SIAVOSH VAKILIAN

 5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123

 Phone: (858) 505-4100

Fax: (858) 429-7939

 After Hours Phone: (858)
505-4100

Provider Gender: Male

NPI: 1427456151

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC

YORK, VINCENT

Provider ID: 283517

Board Certified Specialty: No
VINCENT M YORK

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790146611


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


RADIOLOGY DIAGNOSTIC

YORK, VINCENT

Provider ID: 283519

Board Certified Specialty: No
VINCENT M YORK

 330 LEWIS ST STE 202
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790146611


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC

ZAPALA, MATTHEW

Provider ID: 307676

Board Certified Specialty: No

D3. 专科提供者名录

MATTHEW A ZAPALA

330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346482809

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S
HOSPITAL OAKLAND, UCSF
MEDICAL CENTER, UCSF

Medical Center At Mission Bay,
UCSF MEDICAL CENTER AT
MOUNT ZION

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

ZAPALA, MATTHEW

Provider ID: 307675

Board Certified Specialty: No
MATTHEW A ZAPALA

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346482809

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S

HOSPITAL OAKLAND, UCSF

MEDICAL CENTER, UCSF
Medical Center At Mission Bay,
UCSF MEDICAL CENTER AT
MOUNT ZION

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

ZAPALA, MATTHEW

Provider ID: 307678

Board Certified Specialty: No
MATTHEW A ZAPALA

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346482809

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S
HOSPITAL OAKLAND, UCSF
MEDICAL CENTER, UCSF

Medical Center At Mission Bay,
UCSF MEDICAL CENTER AT
MOUNT ZION

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

REGISTERED PHYSICAL THERAPIST

AGUERO, PETER

Provider ID: 258299

Board Certified Specialty: No
PETER D AGUERO

9333 GENESEE AVE STE
310

SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982120861

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

AGUERO, PETER

Provider ID: 258298

Board Certified Specialty: No
PETER D AGUERO

8929 UNIVERSITY CENTER
LN STE 200

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

D3. 专科提供者名录


NPI: 1982120861


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


REGISTERED PHYSICAL THERAPIST

BARTZ, BRYAN

Provider ID: 273381

Board Certified Specialty: No
BRYAN M BARTZ

 8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669818993

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


REGISTERED PHYSICAL THERAPIST

BARTZ, BRYAN

Provider ID: 273380

Board Certified Specialty: No
BRYAN M BARTZ

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669818993

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



REGISTERED PHYSICAL THERAPIST

BERGERON, PATRICK

Provider ID: 206534

Board Certified Specialty: No
PATRICK BERGERON

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
 After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1285061390


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


REGISTERED PHYSICAL THERAPIST

BUNOSKY, ABIGAIL

Provider ID: 258304

Board Certified Specialty: No
ABIGAIL S BUNOSKY

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780018416


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 专科提供者名录

REGISTERED PHYSICAL THERAPIST

BUNOSKY, ABIGAIL

Provider ID: 246022

Board Certified Specialty: No
ABIGAIL S BUNOSKY

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780018416

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

CORTEZ, AARON

Provider ID: 279194

Board Certified Specialty: No
AARON J CORTEZ

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1639693187

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

COSTELLO, MARK

Provider ID: 295634

Board Certified Specialty: No
MARK A COSTELLO

7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111

Phone: (818) 894-2273

Fax: (818) 357-2505

After Hours Phone: (818)
894-2273

Provider Gender: Male

NPI: 1710193602

Provider English Spoken: Y
Provider Language(s)

Spoken: Arabic, Armenian,
Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

REGISTERED PHYSICAL THERAPIST

DANG, KAYLEE

Provider ID: 279261

Board Certified Specialty: No
KAYLEE T DANG

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1316426356

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

DANG, ERIC

Provider ID: 258363

Board Certified Specialty: No
ERIC A DANG

8929 UNIVERSITY CENTER

D3. 专科提供者名录

LN STE 200
SAN DIEGO, CA 92122
☎ Phone: (858) 543-3333
Fax: (858) 657-1809
🕒 After Hours Phone: (858) 543-3333
Provider Gender: Male
NPI: 1891237756
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

FARRAR, COURTNEY
Provider ID: 295259
Board Certified Specialty: No
COURTNEY L FARRAR
📍 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
☎ Phone: (619) 325-1161
Fax: (619) 325-1717
🕒 After Hours Phone: (619) 325-1161
Provider Gender: Male
NPI: 1124577952
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 13\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

FARRAR, COURTNEY
Provider ID: 303843
Board Certified Specialty: No
COURTNEY L FARRAR
📍 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
☎ Phone: (619) 325-1161
Fax: (619) 325-1717
🕒 After Hours Phone: (619) 325-1161
Provider Gender: Male
NPI: 1124577952
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

JOHNSON, KENNADY
Provider ID: 305041
Board Certified Specialty: No
KENNADY L JOHNSON
📍 16950 VIA TAZON
SAN DIEGO, CA 92127
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female

NPI: 1730834417
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

MC ELROY, CARTER
Provider ID: 206523
Board Certified Specialty: No
CARTER J MC ELROY
📍 16950 VIA TAZON
SAN DIEGO, CA 92127
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1114472230
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Thai
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

REGISTERED PHYSICAL

D3. 专科提供者名录

THERAPIST

MC ELROY, CARTER

Provider ID: 206522

Board Certified Specialty: No

CARTER J MC ELROY

8929 UNIVERSITY CENTER
LN STE 200

SAN DIEGO, CA 92122

Phone: (855) 543-0333

Fax: (858) 657-6873

After Hours Phone: (855)
543-0333

Provider Gender: Male

NPI: 1114472230

Provider English Spoken: Y

Provider Language(s)
Spoken: Thai

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

NGUYEN, HARRY

Provider ID: 271871

Board Certified Specialty: No

HARRY D NGUYEN

16950 VIA TAZON

SAN DIEGO, CA 92127

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1629558499

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

RICKERTS, MATTHEW

Provider ID: 287652

Board Certified Specialty: No

MATTHEW RICKERTS PT

16950 VIA TAZON

SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1063882579

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

RUDD, CHRISTOPHER

Provider ID: 207560

Board Certified Specialty: No

CHRISTOPHER D RUDD

16950 VIA TAZON

SAN DIEGO, CA 92127

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1831539337

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

SKINNER, NICOLE

Provider ID: 206547

Board Certified Specialty: No

NICOLE J SKINNER

16950 VIA TAZON

SAN DIEGO, CA 92127

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1386964997

D3. 专科提供者名录

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


REGISTERED PHYSICAL THERAPIST

VANDEWIELE, EMILY

Provider ID: 285183

Board Certified Specialty: No
EMILY R VANDEWIELE

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1942818505

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


REGISTERED PHYSICAL THERAPIST

VASQUEZ, BENJAMIN

Provider ID: 302870

Board Certified Specialty: No
BENJAMIN P VASQUEZ

 4910 DIRECTORS PL
SAN DIEGO, CA 92121

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1568938413

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


REGISTERED PHYSICAL THERAPIST

WALKER, JULIE

Provider ID: 258489

Board Certified Specialty: No
JULIE C WALKER

 8929 UNIVERSITY CENTER
LN STE 200

SAN DIEGO, CA 92122
 Phone: (855) 543-0333

Fax: (858) 535-6422

 After Hours Phone: (855)
543-0333

Provider Gender: Female

NPI: 1720489503


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


REGISTERED PHYSICAL THERAPIST

WILLIAMS, STACY

Provider ID: 259684

Board Certified Specialty: No
STACY M WILLIAMS

 4520 EXECUTIVE DR STE 1
SAN DIEGO, CA 92121

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689962169

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON



Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D3. 专科提供者名录


 Hours: M-F
8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

WILLIAMS, STACY


Provider ID: 259683
Board Certified Specialty: No
STACY M WILLIAMS

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1689962169


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS

Provider ID: 296929
Board Certified Specialty: No
MIRELIS AROCHO-SALGADO

 11440 W BERNARDO CT
STE 300

SAN DIEGO, CA 92127
 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1063660165


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


 Website: N/A

SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS

Provider ID: 296932
Board Certified Specialty: No
MIRELIS AROCHO-SALGADO

 7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111

 Phone: (877) 757-8353
Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female
NPI: 1063660165

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS

Provider ID: 296930


Board Certified Specialty: No
MIRELIS AROCHO-SALGADO

 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

 Phone: (877) 757-8353
Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353


Provider Gender: Female
NPI: 1063660165

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


 Website: N/A

SPEECH PATHOLOGIST

CLARK, MELISSA

Provider ID: 296921
Board Certified Specialty: No
MELISSA A CLARK

 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

 Phone: (877) 757-8353
Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female
NPI: 1760546428

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Armenian,

Farsi, Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

D3. 专科提供者名录

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 7:00AM-7:00PM
M-F 7:00AM-7:00PM


 Website: N/A


SPEECH PATHOLOGIST

CLARK, MELISSA

Provider ID: 296922

Board Certified Specialty: No
MELISSA A CLARK

 7510 CLAIREMONT MESA
BLVD STE 102
SAN DIEGO, CA 92111


 Phone: (877) 757-8353


Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1760546428

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 7:00AM-9:00PM
M-F 7:00AM-9:00PM

 Website: N/A


SPEECH PATHOLOGIST


CLARK, MELISSA

Provider ID: 296920

Board Certified Specialty: No

MELISSA A CLARK

 11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127


 Phone: (877) 757-8353


Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1760546428

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 7:00AM-7:00PM
M-F 7:00AM-7:00PM


 Website: N/A


SPEECH PATHOLOGIST

DURNAN, CASSANDRA

Provider ID: 307882

Board Certified Specialty: No
CASSANDRA L DURNAN

 11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127


 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1073873501

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 7:00AM-7:00PM

 Website: N/A


SPEECH PATHOLOGIST

DURNAN, CASSANDRA

Provider ID: 307885

Board Certified Specialty: No
CASSANDRA L DURNAN

 8929 AERO DR STE E
SAN DIEGO, CA 92123

 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1073873501

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 7:00AM-7:00PM

 Website: N/A

SPEECH PATHOLOGIST

DURNAN, CASSANDRA

Provider ID: 307883

Board Certified Specialty: No
CASSANDRA L DURNAN

 9655 GRANITE RIDGE DR
STE 200

D3. 专科提供者名录

SAN DIEGO, CA 92123
☎ Phone: (877) 757-8353
☎ Fax: (818) 357-2505
🕒 After Hours Phone: (877) 757-8353

Provider Gender: Female
NPI: 1073873501

☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 7:00AM-7:00PM
🌐 Website: N/A

SPEECH PATHOLOGIST

SCHIEDERMAYER, BENJAMIN

Provider ID: 288937
Board Certified Specialty: No
BENJAMIN F

SCHIEDERMAYER

📍 8899 UNIVERSITY CENTER LN

SAN DIEGO, CA 92122
☎ Phone: (800) 926-8273
☎ Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1164979837

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT

PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

SPEECH PATHOLOGIST

UNGER, LINDSEY

Provider ID: 207202
Board Certified Specialty: No
LINDSEY A UNGER

📍 8929 UNIVERSITY CENTER LN STE 200
SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273
☎ Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1972936813

☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Sign Language

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL

Provider ID: 286384
Board Certified Specialty: No
SAMUEL EISENSTEIN

📍 4520 EXECUTIVE DR

SAN DIEGO, CA 92121
☎ Phone: (858) 657-7237
🕒 After Hours Phone: (858) 657-7237

Provider Gender: Male
NPI: 1194983932

☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL

Provider ID: 286363
Board Certified Specialty: No
SAMUEL EISENSTEIN

📍 4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273
☎ Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1194983932

☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

D3. 专科提供者名录

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL

Provider ID: 286364

Board Certified Specialty: No
SAMUEL EISENSTEIN

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1194983932

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY COLON SURGERY

LIU, SHANGLEI

Provider ID: 273363

Board Certified Specialty: No
SHANGLEI LIU

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1043558653

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY COLON SURGERY

LOPEZ, NICOLE

Provider ID: 286387

Board Certified Specialty: No
NICOLE E LOPEZ

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (619) 543-6886

📞 After Hours Phone: (619)
543-6886

Provider Gender: Female

NPI: 1518163005

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY COLON SURGERY

LOPEZ, NICOLE

Provider ID: 286366

Board Certified Specialty: No
NICOLE E LOPEZ

📍 4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1518163005

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY COLON SURGERY

PARRY, LISA

Provider ID: 286341

Board Certified Specialty: No
LISA A PARRY

📍 4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1235369067


🗣 Provider English Spoken: Y
Cultural Competency: N


D3. 专科提供者名录

*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


SURGERY COLON SURGERY

PARRY, LISA

Provider ID: 278553

*Board Certified Specialty: No
LISA A PARRY*

 *16950 VIA TAZON
SAN DIEGO, CA 92127*

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1235369067

 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA*


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*

SURGERY COLON SURGERY


RAMAMOORTHY, SONIA

Provider ID: 286370

*Board Certified Specialty: No
SONIA L RAMAMOORTHY*

 *4303 LA JOLLA VILLAGE
DR STE 2110*

SAN DIEGO, CA 92122

 *Phone: (800) 926-8273*

Fax: (888) 529-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1801812656

 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation: UCSD
MEDICAL CTR*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

SURGERY GENERAL


AL-NOURI, OMAR

Provider ID: 211903

*Board Certified Specialty: No
OMAR AL-NOURI*


 *200 W ARBOR DR
SAN DIEGO, CA 92103*

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1770742264

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Arabic

Cultural Competency: N


*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY*


*THORNTON, UCSD MEDICAL
CTR*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


SURGERY GENERAL


ARMANI, AVA

Provider ID: 282141

*Board Certified Specialty: Yes
AVA ARMANI*

 *200 W ARBOR DR
SAN DIEGO, CA 92103*

 *Phone: (858) 822-6100*

 *After Hours Phone: (858)
822-6100*

Provider Gender: Female

NPI: 1861759383

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: UCSF
MEDICAL CENTER, UCSF*

*Medical Center At Mission Bay,
UCSF MEDICAL CENTER AT*

*MOUNT ZION, UCSD LA JOLLA
JOHN SALLY THORNTON,*




UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

D3. 专科提供者名录


 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL


BARNES, RYAN

Provider ID: 129062
Board Certified Specialty: No
RYAN M BARNES




 7910 FROST ST STE 250
SAN DIEGO, CA 92123
 Phone: (858) 565-0104
Fax: (858) 565-0194

 After Hours Phone: (858)
565-0104

Provider Gender: Male
NPI: 1831493501

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, PALOMAR
HEALTH

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-4:30PM
 Website: N/A


SURGERY GENERAL

BARNES, RYAN


Provider ID: 299904
Board Certified Specialty: No
RYAN M BARNES

 7910 FROST ST STE 250
SAN DIEGO, CA 92123

 Phone: (858) 565-0104
Fax: (858) 565-0194


 After Hours Phone: (858)
565-0104


Provider Gender: Male
NPI: 1831493501

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, PALOMAR
HEALTH

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-4:30PM


 Website: N/A

SURGERY GENERAL

BENCH, SHAWN


Provider ID: 299895
Board Certified Specialty: Yes
SHAWN R BENCH

 7910 FROST ST STE 250
SAN DIEGO, CA 92123

 Phone: (858) 565-0104
Fax: (858) 565-0194


 After Hours Phone: (858)
565-0104

Provider Gender: Male
NPI: 1669700753

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP

CORONADO HOSP AND
HEALTHCARE CTR, KERN
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM


 Website: N/A


SURGERY GENERAL

BENCH, SHAWN


Provider ID: 129060
Board Certified Specialty: Yes
SHAWN R BENCH

 7910 FROST ST STE 250
SAN DIEGO, CA 92123

 Phone: (858) 565-0104
Fax: (858) 565-0194

 After Hours Phone: (858)
565-0104

Provider Gender: Male
NPI: 1669700753

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, KERN
MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH

D3. 专科提供者名录

9:00AM-5:00PM
F 9:00AM-4:00PM
Website: N/A

SURGERY GENERAL **BERUMEN, JENNIFER**

Provider ID: 260052
Board Certified Specialty: No
JENNIFER A BERUMEN

8001 FROST ST
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858)
966-5811
Provider Gender: Female
NPI: 1558566372
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,
RADY CHILDRENS HOSPITAL
SAN DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL **BRODERICK, RYAN**

Provider ID: 247073
Board Certified Specialty: No
RYAN C BRODERICK

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1619252418

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL **BRODERICK, RYAN**

Provider ID: 201617
Board Certified Specialty: Yes
RYAN C BRODERICK

4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121
Phone: (858) 657-8860
After Hours Phone: (858)
657-8860

Provider Gender: Male
NPI: 1619252418

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL **BRODERICK, RYAN**

Provider ID: 286342
Board Certified Specialty: No
RYAN C BRODERICK

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1619252418

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL **BRUBAKER, ALEAH**

Provider ID: 285272
Board Certified Specialty: No
ALEAH LIN BRUBAKER

4510 EXECUTIVE DR STE 7

D3. 专科提供者名录

SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1790104305
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

SURGERY GENERAL

BRUBAKER, ALEAH
Provider ID: 289164
Board Certified Specialty: No
ALEAH LIN BRUBAKER
📍 8001 FROST ST
SAN DIEGO, CA 92123
☎ Phone: (858) 966-8354
Fax: (858) 966-5815
🕒 After Hours Phone: (858) 966-8354
Provider Gender: Female
NPI: 1790104305
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER

PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO
Provider ID: 304608
Board Certified Specialty: No
SERGIO G CASILLAS BERUMEN
📍 6719 ALVARADO RD STE 303
SAN DIEGO, CA 92120
☎ Phone: (619) 500-7699
Fax: (619) 483-3997
🕒 After Hours Phone: (619) 500-7699
Provider Gender: Male
NPI: 1437470762
🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO
Provider ID: 304609
Board Certified Specialty: No
SERGIO G CASILLAS BERUMEN
📍 6402 EL CAJON BLVD STE 100
SAN DIEGO, CA 92115
☎ Phone: (619) 582-4490
Fax: (619) 501-9702
🕒 After Hours Phone: (619) 582-4490
Provider Gender: Male
NPI: 1437470762
🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

D3. 专科提供者名录

SURGERY GENERAL

FAIRBANKS, TIMOTHY

Provider ID: 260842

Board Certified Specialty: No

TIMOTHY J FAIRBANKS

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

Phone: (858) 966-7711

Fax: (858) 966-7712

After Hours Phone: (858)
966-7711

Provider Gender: Male

NPI: 1407010556

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

HORGAN, SANTIAGO

Provider ID: 286367

Board Certified Specialty: No

SANTIAGO HORGAN

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1932297231

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

HORGAN, SANTIAGO

Provider ID: 286379

Board Certified Specialty: No
SANTIAGO HORGAN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 471-0700

After Hours Phone: (619)
471-0700

Provider Gender: Male

NPI: 1932297231

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

IGNACIO, ROMEO

Provider ID: 217053

Board Certified Specialty: No
ROBERT C IGNACIO

8110 BIRMINGHAM WAY FL
2

SAN DIEGO, CA 92123

Phone: (858) 966-7711

After Hours Phone: (858)
966-7711

Provider Gender: Male

NPI: 1538147145

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

JACOBSEN, GARTH

Provider ID: 286356

Board Certified Specialty: No

D3. 专科提供者名录

GARTH R JACOBSEN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265649966

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

JACOBSEN, GARTH

Provider ID: 201729

Board Certified Specialty: No

GARTH R JACOBSEN

4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121

Phone: (858) 657-8860

After Hours Phone: (858)
657-8860

Provider Gender: Male

NPI: 1265649966

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

JACOBSEN, GARTH

Provider ID: 286355

Board Certified Specialty: No

GARTH R JACOBSEN

4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265649966

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

MUELLER, GEORGE

Provider ID: 54298

Board Certified Specialty: No

GEORGE A MUELLER

7910 FROST ST STE 250
SAN DIEGO, CA 92123

Phone: (858) 565-0104

Fax: (858) 565-0194

After Hours Phone: (858)
565-0104

Provider Gender: Male

NPI: 1629179684

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:30AM-5:00PM
F 8:30AM-4:00PM

Website: N/A

SURGERY GENERAL

MUELLER, GEORGE

Provider ID: 300091

Board Certified Specialty: No

GEORGE A MUELLER

7910 FROST ST STE 250
SAN DIEGO, CA 92123

Phone: (858) 565-0104

Fax: (858) 565-0194

After Hours Phone: (858)
565-0104

Provider Gender: Male


NPI: 1629179684


Provider English Spoken: Y
Provider Language(s)

D3. 专科提供者名录

Spoken: Spanish,
Vietnamese
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:30AM-5:00PM
F 8:30AM-4:00PM


 Website: N/A

SURGERY GENERAL

POLLACK, LARRY

Provider ID: 54346
Board Certified Specialty: Yes
LARRY H POLLACK

 7910 FROST ST STE 250
SAN DIEGO, CA 92123


 Phone: (858) 565-0104
Fax: (858) 565-0194

 After Hours Phone: (858)
565-0104

Provider Gender: Male


NPI: 1104998400


 Provider English Spoken: Y

 Provider Language(s)
Spoken: German, Spanish


Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH

9:00AM-5:00PM
F 9:00AM-4:00PM

 Website: N/A


SURGERY GENERAL

SANDLER, BRYAN

Provider ID: 286383

Board Certified Specialty: No
BRYAN J SANDLER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1043410186


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


SURGERY GENERAL

SANDLER, BRYAN

Provider ID: 286357

Board Certified Specialty: No
BRYAN J SANDLER

 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1043410186


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL

SANTORELLI, JARRETT

Provider ID: 272303

Board Certified Specialty: No
JARRETT E SANTORELLI

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033529201

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

D3. 专科提供者名录

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL **VASCULAR**

AL-NOURI, OMAR

Provider ID: 275349

Board Certified Specialty: No
OMAR AL-NOURI

4510 EXECUTIVE DR STE
215
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1770742264

Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic

Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

VASCULAR

BARLEBEN, ANDREW

Provider ID: 275372

Board Certified Specialty: No
ANDREW R BARLEBEN

4510 EXECUTIVE DR STE
215
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497936900

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY HAND

CAGE, DORI

Provider ID: 296731

Board Certified Specialty: No
DORI CAGE

8008 FROST ST STE 403
SAN DIEGO, CA 92123
Phone: (858) 715-9200
Fax: (858) 715-9202

After Hours Phone: (858)
715-9200

Provider Gender: Female

NPI: 1871592253

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, Sharp
Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

Email: DCAGE@SDHAND.ORG

SURGERY NEUROLOGICAL

BARBA, DAVID

Provider ID: 244087

Board Certified Specialty: No
DAVID BARBA

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 543-5720

After Hours Phone: (619)
543-5720

Provider Gender: Male

NPI: 1093730251

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, SCRIPPS
MEMORIAL HOSPITAL


D3. 专科提供者名录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY NEUROLOGICAL

BELVERUD, SHAWN


Provider ID: 202333

Board Certified Specialty: No

SHAWN A BELVERUD

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1073817268

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

SURGERY NEUROLOGICAL

BEN-HAIM, SHARONA


Provider ID: 304129

Board Certified Specialty: No

SHARONA BEN-HAIM

 6655 ALVARADO RD

SAN DIEGO, CA 92120


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1942469663

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

SURGERY NEUROLOGICAL


HATEFI, DUSTIN

Provider ID: 310033

Board Certified Specialty: No

DUSTIN HATEFI

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790072106

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA

IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

SURGERY NEUROLOGICAL


LEVY, MICHAEL

Provider ID: 298705

Board Certified Specialty: No

MICHAEL L LEVY

 7910 FROST ST STE 180
SAN DIEGO, CA 92123

 Phone: (858) 966-8574

Fax: (858) 966-7930

 After Hours Phone: (858)
966-8574

Provider Gender: Male

NPI: 1164593927

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,

CHILDRENS HOSP OF LOS

ANGELES


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

SURGERY NEUROLOGICAL

MARSHALL, LAWRENCE

Provider ID: 244150

Board Certified Specialty: No



LAWRENCE F MARSHALL

D3. 专科提供者名录

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1750306171


 Provider English Spoken: Y
 Provider Language(s)
Spoken: German, Spanish
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY NEUROLOGICAL

OSORIO, JOSEPH

Provider ID: 304170

Board Certified Specialty: No
JOSEPH A OSORIO

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437416591

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A



SURGERY NEUROLOGICAL

OSORIO, JOSEPH

Provider ID: 242007

Board Certified Specialty: No
JOSEPH A OSORIO

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437416591

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



SURGERY NEUROLOGICAL

PHAM, MARTIN

Provider ID: 244158

Board Certified Specialty: No
MARTIN H PHAM

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1609130921

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY NEUROLOGICAL

SOUMEKH, MASSOUD

Provider ID: 257468

Board Certified Specialty: Yes
MASSOUD HERTZEL

 8008 FROST ST STE 401
SAN DIEGO, CA 92123

 Phone: (858) 560-8544
Fax: (858) 560-8546

 After Hours Phone: (858)
560-8544

Provider Gender: Male

NPI: 1265495014

 Provider English Spoken: Y
Cultural Competency: N




Hospital Affiliation: ALVARADO
HOSPITAL LLC, SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR

D3. 专科提供者名录

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH
9:00AM-4:30PM
 Website: N/A
Email: JSOUMEKH@AOL.COM

SURGERY NEUROLOGICAL

TOMLIN, JEFFREY

Provider ID: 272950
Board Certified Specialty: No
JEFFREY M TOMLIN
 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
 Phone: (858) 657-8540
 After Hours Phone: (858)
657-8540

Provider Gender: Male

NPI: 1366530321


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A




SURGERY NEUROLOGICAL

U, HOI

Provider ID: 244132

Board Certified Specialty: No
HOI S U

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1164468146
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

SURGERY ORTHOPEDIC

ANDRY, JAMES

Provider ID: 302086
Board Certified Specialty: No
JAMES P ANDRY



 7910 FROST ST STE 340
SAN DIEGO, CA 92123

 Phone: (858) 824-1703
Fax: (858) 455-6473

 After Hours Phone: (858)
824-1703

Provider Gender: Male

NPI: 1679726103

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS MERCY


HOSPITAL, SHARP CHULA
VISTA MED CTR, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, Sharp
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


SURGERY ORTHOPEDIC

BALLARD, BROOKE

Provider ID: 262204
Board Certified Specialty: No
BROOKE L BALLARD



 5555 RESERVOIR DR STE
104

SAN DIEGO, CA 92120
 Phone: (619) 286-9480

Fax: (619) 286-4568
 After Hours Phone: (619)
286-9480

Provider Gender: Female

NPI: 1841447950

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N
Hospital Affiliation: ALVARADO
HOSPITAL LLC, SHARP
CORONADO HOSP AND

D3. 专科提供者名录

HEALTHCARE CTR, SHARP
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC


BUI, CHRISTOPHER


Provider ID: 241162

Board Certified Specialty: No

CHRISTOPHER N BUI

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1619231537

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC


BUKATA, SUSAN

Provider ID: 277948

Board Certified Specialty: No

SUSAN V BUKATA

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932140639

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC


BUKATA, SUSAN

Provider ID: 304181

Board Certified Specialty: No

SUSAN V BUKATA

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932140639

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

SURGERY ORTHOPEDIC


CAMPBELL, TANNER

Provider ID: 301633


Board Certified Specialty: No

TANNER R CAMPBELL

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-6789

Fax: (858) 966-8519

 After Hours Phone: (858)
966-6789

Provider Gender: Male

NPI: 1821593096

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

SURGERY ORTHOPEDIC

CHENG, YU-TSUN


Provider ID: 301903

Board Certified Specialty: No

YU-TSUN CHENG

 3030 CHILDRENS WAY FL
3

SAN DIEGO, CA 92123

 Phone: (858) 966-6789

Fax: (858) 966-6706

 After Hours Phone: (858)
966-6789

D3. 专科提供者名录

Provider Gender: Male
NPI: 1992982854
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

SURGERY ORTHOPEDIC

CHIARAPPA, FRANK

Provider ID: 304174
Board Certified Specialty: No
FRANK E CHIARAPPA
📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1932536828
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

SURGERY ORTHOPEDIC

CHOI, JIHOON

Provider ID: 284788
Board Certified Specialty: No
JIHOON CHOI
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1285097741

☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

SURGERY ORTHOPEDIC

CIDAMBI, EMILY

Provider ID: 246466
Board Certified Specialty: No
EMILY O CIDAMBI
📍 3030 CHILDRENS WAY FL
3

SAN DIEGO, CA 92123
☎ Phone: (858) 966-6789
Fax: (858) 966-6706
🕒 After Hours Phone: (858)
966-6789
Provider Gender: Female
NPI: 1659634699
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

SURGERY ORTHOPEDIC

CIDAMBI, EMILY

Provider ID: 296446
Board Certified Specialty: No
EMILY O CIDAMBI
📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
☎ Phone: (858) 966-8800
🕒 After Hours Phone: (858)
966-8800
Provider Gender: Female
NPI: 1659634699
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

SURGERY ORTHOPEDIC

D3. 专科提供者名录

EDMONDS, ERIC

Provider ID: 205495

Board Certified Specialty: No
ERIC W EDMONDS

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1013048412

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY ORTHOPEDIC

EDMONDS, ERIC

Provider ID: 260841

Board Certified Specialty: No
ERIC W EDMONDS

3030 CHILDRENS WAY FL
3
SAN DIEGO, CA 92123

Phone: (858) 966-6789

Fax: (858) 966-6706

After Hours Phone: (858)
966-6789

Provider Gender: Male

NPI: 1013048412

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

FLINT, JAMES

Provider ID: 203178

Board Certified Specialty: No
JAMES H FLINT

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (858) 657-8200

After Hours Phone: (858)
657-8200

Provider Gender: Male

NPI: 1629239140

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

FLINT, JAMES

Provider ID: 304177

Board Certified Specialty: No
JAMES H FLINT

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1629239140

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY ORTHOPEDIC

GOEB, YANNICK

Provider ID: 284794

Board Certified Specialty: No
YANNICK L GOEB

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273


Fax: (888) 539-8781


After Hours Phone: (800)
926-8273

D3. 专科提供者名录

Provider Gender: Male

NPI: 1730542747

 Provider English Spoken: Y

 Provider Language(s)

Spoken: German, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC


JACKSON, MADELEINE


Provider ID: 301818

Board Certified Specialty: No

MADELEINE E JACKSON

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1386140085

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Website: N/A

SURGERY ORTHOPEDIC


KUSNEZOV, NICHOLAS

Provider ID: 303196

Board Certified Specialty: No

NICHOLAS A KUSNEZOV

 7910 FROST ST STE 340
SAN DIEGO, CA 92123


 Phone: (858) 824-1703

Fax: (858) 455-6473

 After Hours Phone: (858)
824-1703

Provider Gender: Male

NPI: 1396185161

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TWIN

CITIES COMMUNITY
HOSPITAL, TRI CITY MEDICAL

CTR, PARADISE VALLEY

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, Sharp

Grossmont Hospital, Sharp

Grossmont Hospital, SHARP

MEMORIAL HOSPITAL, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC

PRUSS, ERIKA


Provider ID: 303797

Board Certified Specialty: No

ERIKA L PRUSS

 3030 CHILDRENS WAY FL
3

SAN DIEGO, CA 92123

 Phone: (858) 966-6789

Fax: (858) 966-6706

 After Hours Phone: (858)
966-6789

Provider Gender: Female

NPI: 1538402441

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC


SULLIVAN, THOMAS

Provider ID: 285247

Board Certified Specialty: No

THOMAS B SULLIVAN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

D3. 专科提供者名录

NPI: 1437565488


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC

SULLIVAN, THOMAS

Provider ID: 304164

Board Certified Specialty: No
THOMAS B SULLIVAN

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437565488

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Website: N/A



SURGERY ORTHOPEDIC

UPASANI, VIDYADHAR

Provider ID: 205914

Board Certified Specialty: No
VIDYADHAR V UPASANI

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1548417652

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


SURGERY ORTHOPEDIC


UPASANI, VIDYADHAR

Provider ID: 260953

Board Certified Specialty: No
VIDYADHAR V UPASANI

 3030 CHILDRENS WAY FL
3

SAN DIEGO, CA 92123
 Phone: (858) 966-6789
Fax: (858) 966-6706

 After Hours Phone: (858)
966-6789

Provider Gender: Male

NPI: 1548417652

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY PEDIATRIC

BICKLER, STEPHEN

Provider ID: 270090

Board Certified Specialty: No
STEPHEN W BICKLER

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 966-7711
Fax: (858) 966-7712

 After Hours Phone: (858)
966-7711

Provider Gender: Male

NPI: 1891866653

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

D3. 专科提供者名录

8:00AM-5:00PM
Website: N/A

SURGERY PEDIATRIC

GOSMAN, AMANDA

Provider ID: 205841

Board Certified Specialty: Yes
AMANDA A GOSMAN

7920 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 966-5999
Fax: (858) 966-4064

After Hours Phone: (858)
966-5999

Provider Gender: Female

NPI: 1164436291

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PEDIATRIC

KELLER, BENJAMIN

Provider ID: 285941

Board Certified Specialty: No
BENJAMIN A KELLER

3020 CHILDRENS WAY

SAN DIEGO, CA 92123

Phone: (858) 966-7711

Fax: (858) 966-7712

After Hours Phone: (858)
966-7711

Provider Gender: Male

NPI: 1285953364

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PEDIATRIC

KELLER, BENJAMIN

Provider ID: 272196

Board Certified Specialty: Yes
BENJAMIN A KELLER

7920 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 966-5999
Fax: (858) 966-4064

After Hours Phone: (858)
966-5999

Provider Gender: Male

NPI: 1285953364

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PEDIATRIC

KLING, KAREN

Provider ID: 283380

Board Certified Specialty: No
KAREN M KLING

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

Phone: (858) 966-7711
Fax: (858) 966-7712

After Hours Phone: (858)
966-7711

Provider Gender: Female

NPI: 1982775144

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MARY BIRCH HOSP

FOR WOMEN AND
NEWBORNS, NATIONAL
NAVAL MED CTR, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

D3. 专科提供者名录

SURGERY PEDIATRIC

KLING, KAREN

Provider ID: 205340

Board Certified Specialty: No
KAREN M KLING

8110 BIRMINGHAM WAY FL
2
SAN DIEGO, CA 92123

Phone: (858) 966-7711

Fax: (858) 966-7712

After Hours Phone: (858)
966-7711

Provider Gender: Female

NPI: 1982775144

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MARY BIRCH HOSP

FOR WOMEN AND
NEWBORNS, NATIONAL
NAVAL MED CTR, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PEDIATRIC

LAZAR, DAVID

Provider ID: 283140

Board Certified Specialty: No
DAVID A LAZAR

3030 CHILDRENS WAY FL 1

SAN DIEGO, CA 92123

Phone: (858) 966-7711

Fax: (858) 966-7712

After Hours Phone: (858)
966-7711

Provider Gender: Male

NPI: 1538365002

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PEDIATRIC

LAZAR, DAVID

Provider ID: 205606

Board Certified Specialty: No
DAVID A LAZAR

8110 BIRMINGHAM WAY FL
2

SAN DIEGO, CA 92123

Phone: (858) 966-7711

Fax: (858) 966-7712

After Hours Phone: (858)
966-7711

Provider Gender: Male

NPI: 1538365002

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PEDIATRIC

THANGARAJAH, HARIHARAN

Provider ID: 206172

Board Certified Specialty: No
HARIHARAN THANGARAJAH

8110 BIRMINGHAM WAY FL
2

SAN DIEGO, CA 92123

Phone: (858) 966-7711

Fax: (858) 966-7712

After Hours Phone: (858)
966-7711

Provider Gender: Male

NPI: 1598979593

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PEDIATRIC

THANGARAJAH, HARIHARAN

Provider ID: 256194

Board Certified Specialty: No

D3. 专科提供者名录

HARIHARAN THANGARAJAH

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

Phone: (858) 966-7711

After Hours Phone: (858)
966-7711

Provider Gender: Male

NPI: 1598979593

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PLASTIC

HINCHCLIFF, KATHARINE

Provider ID: 277965

Board Certified Specialty: No

KATHARINE M HINCHCLIFF

7920 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 966-5999

Fax: (858) 966-8394

After Hours Phone: (858)
966-5999

Provider Gender: Female

NPI: 1346674561

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PLASTIC

HINCHCLIFF, KATHARINE

Provider ID: 277288

Board Certified Specialty: Yes

KATHARINE M HINCHCLIFF

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346674561

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PLASTIC

KOLB, FREDERIC

Provider ID: 255575

Board Certified Specialty: No

FREDERIC J KOLB

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790341832

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PLASTIC

KOLB, FREDERIC

Provider ID: 255576

Board Certified Specialty: No

FREDERIC J KOLB

7920 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 966-5999

Fax: (858) 966-8394

After Hours Phone: (858)
966-5999




Provider Gender: Female

NPI: 1790341832

Provider English Spoken: Y







Provider Language(s)



D3. 专科提供者名录

Spoken: French
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY PLASTIC

KOLB, FREDERIC

Provider ID: 246240
Board Certified Specialty: No
FREDERIC J KOLB
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1790341832
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY PLASTIC

KOLB, FREDERIC







Provider ID: 246239
Board Certified Specialty: No
FREDERIC J KOLB
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1790341832

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY PLASTIC




LEWIS, PRIYA

Provider ID: 302132
Board Certified Specialty: No
PRIYA G LEWIS
 7920 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 966-5999
Fax: (858) 966-8394
 After Hours Phone: (858)
966-5999
Provider Gender: Female
NPI: 1720465024
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY PLASTIC


REID, CHRISTOPHER

Provider ID: 224795
Board Certified Specialty: No
CHRISTOPHER M REID
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1982964276
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

D3. 专科提供者名录

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


SURGERY PLASTIC

REID, CHRISTOPHER

Provider ID: 245523

*Board Certified Specialty: No
CHRISTOPHER M REID*

 7920 FROST ST STE 200
SAN DIEGO, CA 92123

 *Phone: (858) 966-5999*

Fax: (858) 966-8394

 *After Hours Phone: (858)
966-5999*

Provider Gender: Male

NPI: 1982964276

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA*


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


SURGERY PLASTIC

REID, CHRISTOPHER

Provider ID: 255564

*Board Certified Specialty: No
CHRISTOPHER M REID*

 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)*

926-8273

Provider Gender: Male

NPI: 1982964276

 *Provider English Spoken: Y
Cultural Competency: N*

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM

 *Website: N/A*


SURGERY THORACIC

FOX, KENNETH

Provider ID: 257841

*Board Certified Specialty: No
KENNETH A FOX*

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 *Phone: (858) 966-8030*

 *After Hours Phone: (858)*

966-8030

Provider Gender: Male

NPI: 1235153552

 *Provider English Spoken: Y
Cultural Competency: N*

Hospital Affiliation: RADY

*CHILDRENS HOSPITAL SAN
DIEGO*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


SURGERY THORACIC


GANTA, SRUJAN

Provider ID: 275611

*Board Certified Specialty: No
SRUJAN GANTA*

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 *Phone: (858) 966-8030*

 *After Hours Phone: (858)
966-8030*

Provider Gender: Male

NPI: 1265071005

 *Provider English Spoken: Y
Cultural Competency: N*

Hospital Affiliation: RADY

*CHILDRENS HOSPITAL SAN
DIEGO*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


SURGERY THORACIC


GANTA, SRUJAN

Provider ID: 256383

*Board Certified Specialty: No
SRUJAN GANTA*

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 *Phone: (858) 966-8030*

 *After Hours Phone: (858)
966-8030*

Provider Gender: Male

D3. 专科提供者名录


NPI: 1265071005


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY THORACIC

LEWIS, MICHAEL

Provider ID: 296906

Board Certified Specialty: Yes
MICHAEL J LEWIS

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8030
Fax: (858) 966-8032

 After Hours Phone: (858)
966-8030

Provider Gender: Male


NPI: 1780847533


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: No
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

SURGERY THORACIC


NIGRO, JOHN

Provider ID: 205367

Board Certified Specialty: Yes
JOHN J NIGRO

 3030 CHILDRENS WAY STE
202

SAN DIEGO, CA 92123

 Phone: (858) 966-8030
Fax: (858) 966-8032

 After Hours Phone: (858)
966-8030

Provider Gender: Male

NPI: 1881707818


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY THORACIC

VOSSLER, JOHN

Provider ID: 306389

Board Certified Specialty: No
JOHN D VOSSLER

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855
Fax: (858) 966-7903

 After Hours Phone: (858)

966-5855

Provider Gender: Male

NPI: 1659630572


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

TRANSPLANT SURGERY



MEKEEL, KRISTIN

Provider ID: 262109

Board Certified Specialty: Yes
KRISTIN L MEKEEL

 3020 CHILDRENS WAY STE
107

SAN DIEGO, CA 92123

 Phone: (858) 966-7711
 After Hours Phone: (858)
966-7711

Provider Gender: Female

NPI: 1104861947




 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

D3. 专科提供者名录

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

TRANSPLANT SURGERY

SCHNICKEL, GABRIEL


Provider ID: 262192
Board Certified Specialty: No
GABRIEL T SCHNICKEL

 8001 FROST ST
SAN DIEGO, CA 92123
 Phone: (858) 966-8354
Fax: (858) 966-5815

 After Hours Phone: (858)
966-8354

Provider Gender: Male

NPI: 1619111440

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
RADY CHILDRENS HOSPITAL
SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


UROLOGY

AHMADIEH, KIAN

Provider ID: 309729

Board Certified Specialty: No
KIAN AHMADIEH

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1932697190

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

UROLOGY


CHEN, TONY

Provider ID: 283960

Board Certified Specialty: No

TONY T CHEN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1245684497

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, PALOMAR MEDICAL
CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

UROLOGY

KATZ, JONATHAN

Provider ID: 299918

Board Certified Specialty: No
JONATHAN E KATZ

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952756207

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


UROLOGY

MONGA, MANOJ

Provider ID: 274480

Board Certified Specialty: No
MANOJ MONGA

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

D3. 专科提供者名录

NPI: 1174609127

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


UROLOGY

MONGA, MANOJ

Provider ID: 256847

Board Certified Specialty: No
MANOJ MONGA

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174609127

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


UROLOGY


PATEL, DEVIN

Provider ID: 246094

Board Certified Specialty: No
DEVIN N PATEL

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (858) 657-7876

 After Hours Phone: (858)
657-7876

Provider Gender: Male

NPI: 1437505559

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,


CEDARS SINAI MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


UROLOGY

SWORDS, KELLY

Provider ID: 206183

Board Certified Specialty: No
KELLY SWORDS

 7920 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 966-7484

Fax: (858) 966-4064

 After Hours Phone: (858)
966-7484

Provider Gender: Female

NPI: 1316101256

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF


CHILDREN'S HOSPITAL
OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


UROLOGY

UNTERBERG, STEPHEN

Provider ID: 295833

Board Certified Specialty: Yes
STEPHEN H UNTERBERG

 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

 Phone: (619) 297-4707

Fax: (858) 429-7927

 After Hours Phone: (619)
297-4707

Provider Gender: Male

NPI: 1215374210

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL


CENTER


Medi-Cal Open Panel: Yes

D3. 专科提供者名录

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


UROLOGY

UNTERBERG, STEPHEN


Provider ID: 284664

Board Certified Specialty: Yes
STEPHEN H UNTERBERG

 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

 Phone: (619) 297-4707

Fax: (858) 429-7927

 After Hours Phone: (619)
297-4707

Provider Gender: Male

NPI: 1215374210

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL
CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 16\110

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


UROLOGY

UNTERBERG, STEPHEN


Provider ID: 284665

Board Certified Specialty: No

STEPHEN H UNTERBERG

 11770 BERNARDO PLAZA
CT STE 270

SAN DIEGO, CA 92128

 Phone: (858) 485-0554

Fax: (858) 429-7933

 After Hours Phone: (858)
485-0554

Provider Gender: Male

NPI: 1215374210

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL
CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 16\110

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

UROLOGY


UNTERBERG, STEPHEN

Provider ID: 295834

Board Certified Specialty: No
STEPHEN H UNTERBERG

 11770 BERNARDO PLAZA
CT STE 270

SAN DIEGO, CA 92128


 Phone: (858) 485-0554

Fax: (858) 429-7933

 After Hours Phone: (858)
485-0554

Provider Gender: Male

NPI: 1215374210

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

UROLOGY

WANG, LUKE

Provider ID: 299933

Board Certified Specialty: No
LUKE L WANG

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033630173

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

SAN MARCOS

CARDIOVASCULAR DISEASE

D3. 专科提供者名录

LERNER, JONATHAN

Provider ID: 303448

Board Certified Specialty: No
JONATHAN H LERNER

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Phone: (760) 798-8855

Fax: (619) 616-2104

After Hours Phone: (760)
798-8855

Provider Gender: Male

NPI: 1962899823

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

CARRA, BARBARA

Provider ID: 308116

Board Certified Specialty: No
BARBARA CARRA

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1588173629

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Italian,
Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

CARRA, BARBARA

Provider ID: 303128

Board Certified Specialty: No
BARBARA CARRA

1595 GRAND AVE STE 100
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1588173629

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Italian,
Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

GONZALEZ, ANDRES

Provider ID: 298658

Board Certified Specialty: No
ANDRES D GONZALEZ

1595 GRAND AVE STE 100
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1841857729

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

BLAND, JACELIS

Provider ID: 296766

Board Certified Specialty: No
JACELIS BLAND

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744





After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1801522859

Provider English Spoken: Y




D3. 专科提供者名录






 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
SA 8:00AM-4:30PM
 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER

CABRAL, ALEJANDRA




Provider ID: 297888
Board Certified Specialty: No
ALEJANDRA P CABRAL
 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
Fax: (760) 736-6744
 *After Hours Phone: (760)*
736-6767
Provider Gender: Female
NPI: 1699222620






 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER

FODDA, RAMI

Provider ID: 296603
Board Certified Specialty: No
RAMI M FODDA
 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
 *Phone: (760) 736-6767*
Fax: (760) 736-6744
 *After Hours Phone: (760)*
736-6767
Provider Gender: Male
NPI: 1164660452

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Arabic
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-6:00PM
SA 8:00AM-5:00PM
 *Website: N/A*


CERTIFIED NURSE

PRACTITIONER

FREEMAN, WANDA

Provider ID: 305751
Board Certified Specialty: No
WANDA FREEMAN
 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
Fax: (760) 736-6744
 *After Hours Phone: (760)*
736-6767
Provider Gender: Female




NPI: 1659504264

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
SA 8:00AM-5:00PM
 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER

GARCIA, REGINA

Provider ID: 297837
Board Certified Specialty: No
REGINA J GARCIA
 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
Fax: (760) 736-6744
 *After Hours Phone: (760)*
736-6767
Provider Gender: Female
NPI: 1639673858

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER

D3. 专科提供者名录

HAN, ANGELA

Provider ID: 300215

Board Certified Specialty: No
ANGELA D HAN

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1629242839

Provider English Spoken: Y

Provider Language(s)
Spoken: Korean

Cultural Competency: N

Hospital Affiliation: JOHN

MUIR MEDICAL CENTER

WALNUT CREEK CAMPUS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

KOHOUT, KATHRYN

Provider ID: 291105

Board Certified Specialty: No
KATHRYN KOHOUT

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1316544331

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MOONEY, PATRICIA

Provider ID: 280382

Board Certified Specialty: No
PATRICIA J MOONEY

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Phone: (760) 747-8935

Fax: (760) 466-0078

After Hours Phone: (760)
747-8935

Provider Gender: Female

NPI: 1700470200

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

NGUYEN, VANESSA

Provider ID: 306716

Board Certified Specialty: No
VANESSA T NGUYEN

838 NORDAHL RDSTE 200
SAN MARCOS, CA 92069

Phone: (760) 281-3662

Fax: (760) 316-5268

After Hours Phone: (760)
281-3662

Provider Gender: Female

NPI: 1376219246

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

PARSONS, MEKRAE

Provider ID: 303220

Board Certified Specialty: No
MEKRAE L PARSONS

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female



NPI: 1972090306


Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

D3. 专科提供者名录

American Sign Language (ASL):  Phone: (760) 736-6767
N  Fax: (760) 736-6744

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE



PRACTITIONER


VAHDAT, VALERIE

Provider ID: 294758

Board Certified Specialty: No
VALERIE K VAHDAT

 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069

 Phone: (833) 867-4642
 Fax: (360) 462-5827

 After Hours Phone: (833)
867-4642

Provider Gender: Female

NPI: 1093474090


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

YCASAS, EMILY

Provider ID: 307853

Board Certified Specialty: No
EMILY JO YCASAS

 150 VALPRED A RD
SAN MARCOS, CA 92069

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1033841861


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED



NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 290739

Board Certified Specialty: No
TANYA M BELANGER

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767
 Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1407287469

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Website: N/A



CHIROPRACTOR

JIMENEZ, CLARIBEL

Provider ID: 307941

Board Certified Specialty: No
CLARIBEL JIMENEZ



 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767
 Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1801255484


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



DERMATOLOGY

BROWN, REGINA

Provider ID: 309982

Board Certified Specialty: No
REGINA E BROWN

 838 NORDAHL RD STE 250
SAN MARCOS, CA 92069


 Phone: (760) 738-7600
 Fax: (760) 738-7616

 After Hours Phone: (760)
738-7600


Provider Gender: Female

D3. 专科提供者名录

NPI: 1801424692

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE


NGUYEN, MINH

Provider ID: 308467

Board Certified Specialty: No
MINH Q NGUYEN


 1595 GRAND AVE STE 100
SAN MARCOS, CA 92078


 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1154403640

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

TOLENTINO, ARTURO

Provider ID: 298696

Board Certified Specialty: No
ARTURO M TOLENTINO

 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069


 Phone: (833) 867-4642


Fax: (360) 462-5827

 After Hours Phone: (833)
867-4642

Provider Gender: Male

NPI: 1609066018

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL

CENTER, LAKEWOOD


REGIONAL MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\17

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL


CARDIOLOGY

DO, HULBERT

Provider ID: 295941

Board Certified Specialty: No
HULBERT N DO

 955 BOARDWALK STE 100
SAN MARCOS, CA 92078

 Phone: (760) 798-8855

Fax: (619) 616-2104

 After Hours Phone: (760)
798-8855

Provider Gender: Male

NPI: 1679733760

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP


CHULA VISTA MED CTR, Sharp
Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

INTERVENTIONAL


CARDIOLOGY

DO, HULBERT

Provider ID: 291583

Board Certified Specialty: No
HULBERT N DO

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1679733760

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp
Grossmont Hospital

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

D3. 专科提供者名录

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-8:00PM
SA 8:00AM-8:00PM*

 *Website: N/A*


INTERVENTIONAL CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 245578

*Board Certified Specialty: No
BURHAN MOHAMEDALI*


 *955 BOARDWALK STE 100
SAN MARCOS, CA 92078*


 *Phone: (760) 798-8855
Fax: (760) 755-5245*

 *After Hours Phone: (760)
798-8855*

Provider Gender: Male

NPI: 1831393289

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish, Swahili
Cultural Competency: N*

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,


Adventist Health and Rideout


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
9:00AM-5:00PM*

 *Website: N/A*


INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 291607

*Board Certified Specialty: No
DEEPTHI SUDHAKAR*

 *150 VALPREDA RD
SAN MARCOS, CA 92069*

 *Phone: (760) 736-6767
Fax: (760) 736-6744*

 *After Hours Phone: (760)
736-6767*

Provider Gender: Female

NPI: 1811307051

 *Provider English Spoken: Y
Cultural Competency: N*

Hospital Affiliation: Sharp

Grossmont Hospital, SHARP

CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 15\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 296052

*Board Certified Specialty: No
DEEPTHI SUDHAKAR*

 *955 BOARDWALK STE 100
SAN MARCOS, CA 92078*

 *Phone: (760) 798-8855
Fax: (619) 616-2104*

 *After Hours Phone: (760)
798-8855*

Provider Gender: Female

NPI: 1811307051

 *Provider English Spoken: Y
Cultural Competency: N*

Hospital Affiliation: Sharp

Grossmont Hospital, SHARP

CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 15\99

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 295847

*Board Certified Specialty: No
DEEPTHI SUDHAKAR*

 *955 BOARDWALK STE 100
SAN MARCOS, CA 92078*

 *Phone: (760) 798-8855
Fax: (619) 616-2104*

 *After Hours Phone: (760)
798-8855*

Provider Gender: Female

NPI: 1811307051

 *Provider English Spoken: Y
Cultural Competency: N*

Hospital Affiliation: Sharp

Grossmont Hospital, SHARP

CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 15\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

D3. 专科提供者名录

NEUROLOGY

ANDER, AZIZ

Provider ID: 290382

Board Certified Specialty: No
AZIZ N ANDER

838 NORDAHL RD STE 310
SAN MARCOS, CA 92069

Phone: (442) 999-5977

Fax: (442) 999-5914

After Hours Phone: (442)
999-5977

Provider Gender: Male

NPI: 1316131832

Provider English Spoken: Y

Provider Language(s)
Spoken: Faroese, Pashto,
Persian, Urdu

Cultural Competency: N

Hospital Affiliation: DESERT
REGIONAL MED CTR, JOHN F
KENNEDY MEMORIAL HOSP,
PALOMAR HEALTH, PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-4:30PM

Website: N/A

NEUROLOGY

GUPTA, MONIKA

Provider ID: 307938

Board Certified Specialty: No
MONIKA A GUPTA

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Phone: (760) 281-3662

Fax: (760) 316-5268

After Hours Phone: (760)
281-3662

Provider Gender: Female

NPI: 1922243401

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TEMECULA
VALLEY HOSPITAL INC, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

HOSSEINZADEHMALEKI, ANA

Provider ID: 304998

Board Certified Specialty: No
ANA HOSSEINZADEHMALEKI

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Phone: (760) 281-3662

Fax: (760) 316-5268

After Hours Phone: (760)
281-3662

Provider Gender: Female

NPI: 1316471485

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Persian

Cultural Competency: N

Hospital Affiliation: TEMECULA
VALLEY HOSPITAL INC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

MANDEVILLE, ROSS

Provider ID: 309933

Board Certified Specialty: No
ROSS M MANDEVILLE

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Phone: (760) 281-3662

Fax: (760) 316-5268

After Hours Phone: (760)
281-3662

Provider Gender: Male

NPI: 1205084183

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

MAYERS MEMORIAL HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

D3. 专科提供者名录

NEUROLOGY

MAREK, MAKSYM

Provider ID: 306708

Board Certified Specialty: No

MAKSYM S MAREK

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Phone: (760) 281-3662

Fax: (619) 425-3842

After Hours Phone: (760)
281-3662

Provider Gender: Male

NPI: 1881182079

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish,
Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-6:00PM
SA 9:00AM-0:30PM

Website: N/A

NEUROLOGY

SORIALOPEZ, JOSE

Provider ID: 295745

Board Certified Specialty: No

JOSE A SORIALOPEZ

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Phone: (760) 281-3662

Fax: (760) 316-5268

After Hours Phone: (760)
281-3662

Provider Gender: Male

NPI: 1225474034

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, TEMECULA

VALLEY HOSPITAL INC

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-6:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

CABRERA, MICHELLE

Provider ID: 303025

Board Certified Specialty: No

MICHELLE M CABRERA

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1174774723

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: Adventist

Health and Rideout

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

HINSHAW, PAUL

Provider ID: 288907

Board Certified Specialty: No

PAUL W HINSHAW

120 CRAVEN RD STE 101
SAN MARCOS, CA 92078

Phone: (760) 740-2710

Fax: (858) 207-0003

After Hours Phone: (760)
740-2710

Provider Gender: Male

NPI: 1215170717

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRICS

LUMHO, RACHEL

Provider ID: 303150

D3. 专科提供者名录

Board Certified Specialty: No
RACHEL L LUMHO

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1215469283

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM

Website: N/A

PEDIATRICS

LUMHO, RACHEL

Provider ID: 304047

Board Certified Specialty: No
RACHEL L LUMHO

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1215469283

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM

Website: N/A

PEDIATRICS

POSADAS, EMERITO

Provider ID: 257536

Board Certified Specialty: No
EMERITO D POSADAS

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 566-1501

After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1720093198

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-6:00PM

Website: N/A

PEDIATRICS

QUINTERO, CAROLYN

Provider ID: 303142

Board Certified Specialty: No
CAROLYN S QUINTERO

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1023033156

Provider English Spoken: Y

Provider Language(s)
Spoken: Afar, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-6:00PM
SA 8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

CELESTINO, MISHEL

Provider ID: 302439

Board Certified Specialty: No
MISHEL N CELESTINO

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767




Provider Gender: Female

NPI: 1578263760

Provider English Spoken: Y

Provider Language(s)



D3. 专科提供者名录

Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

PHYSICIANS ASSISTANT


HERNANDEZ, MIRIAM

Provider ID: 298336
Board Certified Specialty: No
MIRIAM HERNANDEZ

 150 VALPREDA RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
Fax: (760) 736-6744

 *After Hours Phone: (760) 736-6767*

Provider Gender: Female
NPI: 1457903700

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


 *Website: N/A*

PHYSICIANS ASSISTANT

POLLEY, SHANNON


Provider ID: 296093
Board Certified Specialty: No
SHANNON POLLEY

 150 VALPREDA RD

SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
Fax: (760) 736-6744


 *After Hours Phone: (760) 736-6767*

Provider Gender: Female
NPI: 1225608722

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*



 *Hours: M-F*
8:00AM-8:00PM
SA 8:00AM-5:00PM

 *Website: N/A*

PHYSICIANS ASSISTANT


RUBIO, HALEY

Provider ID: 301290
Board Certified Specialty: No
HALEY M RUBIO

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
 *Phone: (760) 736-6767*
Fax: (760) 736-6744

 *After Hours Phone: (760) 736-6767*


Provider Gender: Female
NPI: 1598394371

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 2\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*



 *Hours: M-F*


8:00AM-5:00PM
 *Website: N/A*

PSYCHOLOGIST



ALTAMIRANO, LEON

Provider ID: 290362
Board Certified Specialty: No
LEON ALTAMIRANO

 150 VALPREDA RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
Fax: (760) 736-6744

 *After Hours Phone: (760) 736-6767*

Provider Gender: Male
NPI: 1619271517

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N



 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

PSYCHOLOGIST

ARIELLA, LYNDA

Provider ID: 299716
Board Certified Specialty: No
LYNDA R ARIELLA




 150 VALPREDA RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
Fax: (760) 736-6744

 *After Hours Phone: (760) 736-6767*

Provider Gender: Female
NPI: 1073518965

 *Provider English Spoken: Y*

D3. 专科提供者名录


Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 5\50
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

PSYCHOLOGIST

FLYNN, DANIELLE


Provider ID: 290795
Board Certified Specialty: No
DANIELLE I FLYNN

 150 VALPRED A RD
SAN MARCOS, CA 92069


 *Phone: (760) 736-6767*
Fax: (760) 736-6744

 *After Hours Phone: (760)*
736-6767

Provider Gender: Female
NPI: 1477785137

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


 *Website: N/A*

PSYCHOLOGIST

GEORGIEV, MARY-JO

Provider ID: 290793
Board Certified Specialty: No
MARY-JO GEORGIEV


 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

Fax: (760) 736-6744


 *After Hours Phone: (760)*
736-6767

Provider Gender: Female
NPI: 1518996875

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


 *Website: N/A*

PSYCHOLOGIST

IMAM, SYED



Provider ID: 298174
Board Certified Specialty: No
SYED IMAM

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*
Fax: (760) 736-6744

 *After Hours Phone: (760)*
736-6767


Provider Gender: Male
NPI: 1447428271

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Hindi, Urdu

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 15\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM


 *Website: N/A*

PSYCHOLOGIST

SIMPSON, ERIC


Provider ID: 290803
Board Certified Specialty: No
ERIC SIMPSON

 150 VALPRED A RD
SAN MARCOS, CA 92069


 *Phone: (760) 736-6767*
Fax: (760) 736-6744

 *After Hours Phone: (760)*
736-6767

Provider Gender: Male
NPI: 1710110416

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


 *Website: N/A*

PSYCHOLOGIST

TORRES, HECTOR



Provider ID: 290788
Board Certified Specialty: No
HECTOR M TORRES

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*
Fax: (760) 736-6744

 *After Hours Phone: (760)*
736-6767

Provider Gender: Male
NPI: 1720265614

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes

D3. 专科提供者名录

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RHEUMATOLOGY

ALNAHLAWI, BASMA

Provider ID: 290068

Board Certified Specialty: No
BASMA ALNAHLAWI

 334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078


 Phone: (760) 736-8091

Fax: (760) 736-8092

 After Hours Phone: (760)
736-8091

Provider Gender: Female

NPI: 1144455262

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: LOMA

LINDA UNIVERSITY MED CTR
MURRIETA, PALOMAR

MEDICAL CENTER, LOMA


LINDA UNIVERSITY MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RHEUMATOLOGY


ALNAHLAWI, BASMA

Provider ID: 295532

Board Certified Specialty: No
BASMA ALNAHLAWI

 960 W SAN MARCOS BLVD
STE 210

SAN MARCOS, CA 92078


 Phone: (760) 736-8091

Fax: (760) 736-8092

 After Hours Phone: (760)
736-8091

Provider Gender: Female

NPI: 1144455262

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: LOMA

LINDA UNIVERSITY MED CTR
MURRIETA, PALOMAR


MEDICAL CENTER, LOMA


LINDA UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

SAN YSIDRO

CERTIFIED NURSE

PRACTITIONER


KANTAS, PARIS

Provider ID: 306684

Board Certified Specialty: No
PARIS KANTAS

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1114329612

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 2\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


ROSCOE, SYDNEY

Provider ID: 306249

Board Certified Specialty: No
SYDNEY R ROSCOE

 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-5305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1992448864

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

D3. 专科提供者名录

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 294925
Board Certified Specialty: No
MIGUEL ALVAREZ-ESTRADA

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100
Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1588197826

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, PARADISE VALLEY
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

FAMILY PRACTICE

ARRIETA, NOEMI

Provider ID: 297794

Board Certified Specialty: No
NOEMI J ARRIETA

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6341

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1912223496

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

DALUGDUGAN, ESTHER

Provider ID: 302285

Board Certified Specialty: No

ESTHER D DALUGDUGAN

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100
Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1962662718

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

FAMILY PRACTICE

NAVARRO, VANESSAMARIA

Provider ID: 297756

Board Certified Specialty: No
VANESSAMARIA M NAVARRO

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

Phone: (619) 662-4100
Fax: (619) 785-3384

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1952563421

Provider English Spoken: Y

Provider Language(s)
Spoken: Filipino, Spanish,
Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA
MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM

SA 8:00AM-2:30PM

Website: N/A

D3. 专科提供者名录

FAMILY PRACTICE

ORTEGA, LUIS

Provider ID: 295225

Board Certified Specialty: No

LUIS M ORTEGA

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1558924936

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

FAMILY PRACTICE

QURESHI, SOFIA

Provider ID: 308756

Board Certified Specialty: No

SOFIA H QURESHI

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1902197544

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE GERIATRIC

MEDICINE

BULOW, KWI

Provider ID: 302346

Board Certified Specialty: No

KWI Y BULOW

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1073608576

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

GENERAL PRACTICE

SAMI, REMAN

Provider ID: 305484

Board Certified Specialty: No

REMAN A SAMI

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1295362242

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INFECTIOUS DISEASE

ALDOUS, JEANNETTE

Provider ID: 290421

Board Certified Specialty: No

JEANNETTE L ALDOUS

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1073650339

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

D3. 专科提供者名录

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

INFECTIOUS DISEASE

RAMIREZSANCHEZ, CLAUDIA

Provider ID: 296122
Board Certified Specialty: Yes
CLAUDIA C RAMIREZSANCHEZ
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
Fax: (619) 205-6305
 *After Hours Phone: (619)*
662-4100
Provider Gender: Female
NPI: 1659720555
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish





Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-8:00PM
SA 8:00AM-2:00PM

 *Website: N/A*

OBSTETRICS / GYNECOLOGY






DINH, MY

Provider ID: 290490
Board Certified Specialty: No
DINH, MY T
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
Fax: (619) 205-6305
 *After Hours Phone: (619)*
662-4100

Provider Gender: Female
NPI: 1316146996
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
9:00AM-5:00PM
 *Website: N/A*

OBSTETRICS / GYNECOLOGY









GOMEZ, DANIELA

Provider ID: 294885
Board Certified Specialty: No
DANIELA GOMEZ
 4004 BEYER BLVD STE 400
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
Fax: (619) 205-6305
 *After Hours Phone: (619)*
662-4100
Provider Gender: Female
NPI: 1255878997
 *Provider English Spoken: Y*
 *Provider Language(s)*

Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-8:00PM
SA 8:00AM-2:00PM
 *Website: N/A*

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA

Provider ID: 294886
Board Certified Specialty: No
DANIELA GOMEZ
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
Fax: (619) 205-1967
 *After Hours Phone: (619)*
662-4100
Provider Gender: Female
NPI: 1255878997
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-8:00PM
SA 8:00AM-2:00PM
 *Website: N/A*

PEDIATRICS

D3. 专科提供者名录

FUJII, CINDY

Provider ID: 298309

Board Certified Specialty: No
CINDY M FUJII

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1871664821

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

Website: N/A

PEDIATRICS

RODRIGUEZ, ALDO

Provider ID: 295779

Board Certified Specialty: No
ALDO E RODRIGUEZ

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1508209651

Provider English Spoken: Y

Provider Language(s)

Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-4:00PM
M 8:30AM-8:00PM
W-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

Website: N/A

PEDIATRICS

TAYLOR, TASHA

Provider ID: 290077

Board Certified Specialty: No
TASHA K TAYLOR

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1528144433

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PSYCHOLOGIST

IBANEZ, BERENICE

Provider ID: 290465

Board Certified Specialty: No
BERENICE B IBANEZ

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1740394386

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL
ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

REGISTERED PHYSICAL THERAPIST

SHAUF, JOANN

Provider ID: 296045

Board Certified Specialty: No
JOANN SHAUF

3364 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)

D3. 专科提供者名录

662-4100

Provider Gender: Female

NPI: 1134732522

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RHEUMATOLOGY

LWIN, THUTHIRI

Provider ID: 307650

Board Certified Specialty: No
THUTHIRI T LWIN

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1174010896

Provider English Spoken: Y

Provider Language(s)
Spoken: Burmese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SANTEE

PEDIATRICS

IKE, ERICA

Provider ID: 309723

Board Certified Specialty: No
ERICA L IKE

120 TOWN CENTER PKWY
SANTEE, CA 92071

Phone: (619) 662-4100

Fax: (619) 873-3476

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1821413907

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ST JOHNS
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

ROSENBLATT, SHERILYN

Provider ID: 295738

Board Certified Specialty: No
SHERILYN ROSENBLATT

120 TOWN CENTER PKWY
SANTEE, CA 92071

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1114041621

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 10:00AM-2:30PM

Website: N/A

TEMECULA

CERTIFIED ACUPUNCTURIST

CRAFT, KEVIN

Provider ID: 290944

Board Certified Specialty: No
KEVIN E CRAFT

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Phone: (951) 225-6400

Fax: (360) 462-2751

After Hours Phone: (951)
225-6400

Provider Gender: Male

NPI: 1659745610

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: TU-F
8:00AM-5:00PM

Website: N/A

D3. 专科提供者名录

CERTIFIED NURSE

PRACTITIONER

MIRACLE, ANGELYN

Provider ID: 300260

Board Certified Specialty: No

ANGELYN M MIRACLE

31170 TEMECULA PKWY
STE 200

TEMECULA, CA 92592

Phone: (951) 699-3299

Fax: (951) 302-1313

After Hours Phone: (951)
699-3299

Provider Gender: Female

NPI: 1144539842

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

VAHDAT, VALERIE

Provider ID: 306580

Board Certified Specialty: No

VALERIE K VAHDAT

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Phone: (951) 225-6400

Fax: (360) 462-2751

After Hours Phone: (951)
225-6400

Provider Gender: Female

NPI: 1093474090

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

ANWAR, YASMIN

Provider ID: 300846

Board Certified Specialty: No

YASMIN ANWAR

31515 RANCHO PUEBLO RD
STE 102

TEMECULA, CA 92592

Phone: (951) 225-7873

Fax: (951) 305-9117

After Hours Phone: (951)
225-7873

Provider Gender: Female

NPI: 1588602247

Provider English Spoken: Y

Provider Language(s)
Spoken: Persian, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

WOODWORTH, JENNIFER

Provider ID: 290633

Board Certified Specialty: No

JENNIFER WOODWORTH

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Phone: (951) 225-6400

Fax: (360) 462-2751

After Hours Phone: (951)
225-6400

Provider Gender: Female

NPI: 1639362494

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

VASCULAR

HOWE, STEVEN

Provider ID: 206759

Board Certified Specialty: No

STEVEN C HOWE

31700 TEMECULA VALLEY
PARKWAY

TEMECULA, CA 92592

Phone: (951) 303-2349

Fax: (951) 303-8591

After Hours Phone: (951)
303-2349

Provider Gender: Male

NPI: 1497702740

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON, TRI

D3. 专科提供者名录

CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


VISTA

ANESTHESIOLOGY PAIN MANAGEMENT

GUPTA, ANUJ


Provider ID: 297703
Board Certified Specialty: No
ANUJ GUPTA


 2023 W VISTA WAY STE D
VISTA, CA 92083

 Phone: (619) 330-8771
Fax: (619) 330-8772

 After Hours Phone: (619)
330-8771

Provider Gender: Male
NPI: 1073629549


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: POMONA
VALLEY HOSP MED CTR,
PARADISE VALLEY HOSPITAL,
TRI CITY MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F


9:00AM-5:00PM
 Website: N/A
Email:
CARAMEDBILL@AOL.COM

CARDIOVASCULAR DISEASE

ABELHAD, NADIA


Provider ID: 306896
Board Certified Specialty: No
NADIA I ABELHAD

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000
Fax: (760) 414-3892


 After Hours Phone: (760)
631-5000


Provider Gender: Female
NPI: 1619400801

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM



 Website: N/A

CARDIOVASCULAR DISEASE


ABELHAD, NADIA

Provider ID: 306897
Board Certified Specialty: No
NADIA I ABELHAD

 1000 VALE TERRACE DR

VISTA, CA 92084
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000


Provider Gender: Female
NPI: 1619400801

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM


 Website: N/A


CARDIOVASCULAR DISEASE

DO, HULBERT



Provider ID: 290574
Board Certified Specialty: No
HULBERT N DO

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male
NPI: 1679733760

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: SHARP

D3. 专科提供者名录


CHULA VISTA MED CTR, Sharp
Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 9:00AM-8:00PM
M-TH 9:00AM-8:00PM
F 9:00AM-5:00PM

SA 9:00AM-4:00PM


 Website: N/A

CERTIFIED ACUPUNCTURIST **SONG, CAROL**

Provider ID: 290550

Board Certified Specialty: No
CAROL U SONG


 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female


NPI: 1518166685


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


APRIL, MONIQUE

Provider ID: 306980

Board Certified Specialty: No

MONIQUE APRIL


 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1093288730

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

APRIL, MONIQUE

Provider ID: 307939

Board Certified Specialty: No
MONIQUE APRIL


 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1093288730

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

APRIL, MONIQUE

Provider ID: 306977

Board Certified Specialty: No
MONIQUE APRIL

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1093288730

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

D3. 专科提供者名录

PRACTITIONER

AYELE, MAHOGANY

Provider ID: 257586

Board Certified Specialty: No
MAHOGANY A AYELE

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

📞 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1902120421

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH

8:00AM-8:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

AYELE, MAHOGANY

Provider ID: 257587

Board Certified Specialty: No
MAHOGANY A AYELE

📍 134 GRAPEVINE RD
VISTA, CA 92083

☎ Phone: (844) 308-5003

Fax: (760) 414-3763

📞 After Hours Phone: (844)
308-5003

Provider Gender: Female

NPI: 1902120421

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

BERNETICH, MEGHAN

Provider ID: 304506

Board Certified Specialty: No

MEGHAN A BERNETICH

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3702

📞 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1629354360

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

9:00AM-5:00PM

SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

BERNETICH, MEGHAN

Provider ID: 302526

Board Certified Specialty: No

MEGHAN A BERNETICH

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3702

📞 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1629354360

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\24

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

9:00AM-5:00PM

SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CARDINELL, ANNA

Provider ID: 291411

Board Certified Specialty: No

ANNA C CARDINELL

📍 910 SYCAMORE AVE STE
270

VISTA, CA 92081

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1306978614

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

D3. 专科提供者名录

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 301312

Board Certified Specialty: No
SAMUEL U CHILAKA

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1679140644


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH

8:00AM-8:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 301311

Board Certified Specialty: No
SAMUEL U CHILAKA

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1679140644


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH

8:00AM-8:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

CHRISTY, TYLER

Provider ID: 303927

Board Certified Specialty: No
TYLER D CHRISTY

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1689094971

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

CHRISTY, TYLER

Provider ID: 307298

Board Certified Specialty: No
TYLER D CHRISTY

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1689094971


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

CHRISTY, TYLER

Provider ID: 303928

Board Certified Specialty: No
TYLER D CHRISTY

 517 N HORNE ST
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

D3. 专科提供者名录

☎ After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1689094971

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHRISTY, TYLER

Provider ID: 303932

Board Certified Specialty: No
TYLER D CHRISTY

📍 134 GRAPEVINE RD
VISTA, CA 92083

☎ Phone: (760) 631-5000
Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1689094971

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHRISTY, TYLER

Provider ID: 303929

Board Certified Specialty: No
TYLER D CHRISTY

📍 105 DURIAN ST STE A
VISTA, CA 92083

☎ Phone: (760) 631-5000
Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1689094971

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CORY, ALLISON

Provider ID: 245207

Board Certified Specialty: No
ALLISON H CORY

📍 134 GRAPEVINE RD
VISTA, CA 92083

☎ Phone: (760) 631-5000
Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1194027706

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 241907

Board Certified Specialty: No
YI TING T HALGEDAHL

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000
Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1619246907

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-8:00PM

F 9:00AM-5:00PM
SA 9:00AM-4:00PM

🌐 Website: N/A

D3. 专科提供者名录

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 304492

Board Certified Specialty: No
JESSICA A HERNANDEZ

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

📞 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302301

Board Certified Specialty: No
JESSICA A HERNANDEZ

📍 105 DURIAN ST STE A
VISTA, CA 92083

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

📞 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302296

Board Certified Specialty: No
JESSICA A HERNANDEZ

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

📞 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 304493

Board Certified Specialty: No

JESSICA A HERNANDEZ

📍 134 GRAPEVINE RD
VISTA, CA 92083

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

📞 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302297

Board Certified Specialty: No
JESSICA A HERNANDEZ

📍 134 GRAPEVINE RD
VISTA, CA 92083

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

📞 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

D3. 专科提供者名录

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

HUERTA, STEVEN

Provider ID: 307933
Board Certified Specialty: No
STEVEN T HUERTA

134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male
NPI: 1558607440

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

HUERTA, STEVEN

Provider ID: 307931
Board Certified Specialty: No
STEVEN T HUERTA

1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)

631-5000
Provider Gender: Male
NPI: 1558607440

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 298085
Board Certified Specialty: No
BRIDGET M KELLEHER

1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1245695006

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 298083
Board Certified Specialty: No
BRIDGET M KELLEHER

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000
After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1245695006

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 305737
Board Certified Specialty: No
BRIDGET M KELLEHER





105 DURIAN ST STE B
VISTA, CA 92083

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000







Provider Gender: Female
NPI: 1245695006


D3. 专科提供者名录

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

CERTIFIED NURSE **PRACTITIONER**




KORMANIK, PATRICIA


Provider ID: 282072
Board Certified Specialty: No
PATRICIA A KORMANIK
 910 SYCAMORE AVE STE
102
VISTA, CA 92081
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1093895047
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F

8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE **PRACTITIONER**

MONTGOMERY JR, KEITH

Provider ID: 295288
Board Certified Specialty: No
KEITH MONTGOMERY JR JR
 134 GRAPEVINE RD
VISTA, CA 92083
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Male
NPI: 1790978617

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 6\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-TU
8:00AM-5:00PM
W 10:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM
 Website: N/A


CERTIFIED NURSE **PRACTITIONER**

MONTGOMERY JR, KEITH

Provider ID: 295284
Board Certified Specialty: No
KEITH MONTGOMERY JR JR
 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000




Provider Gender: Male
NPI: 1790978617


 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 6\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-TU
8:00AM-5:00PM
W 10:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM
 Website: N/A

CERTIFIED NURSE **PRACTITIONER**

NICHOLAS, ESTELA

Provider ID: 239866
Board Certified Specialty: No
ESTELA M NICHOLAS
 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1558384792

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT

D3. 专科提供者名录

PROVIDER
Hours: M 8:00AM-5:00PM
TU-TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
Website: N/A

CERTIFIED NURSE

PRACTITIONER

PRITZKER, JOELY

Provider ID: 239773

Board Certified Specialty: No

JOELY R PRITZKER

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619384351

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

SRILASAK, MICHELE

Provider ID: 281857

Board Certified Specialty: No

MICHELE SRILASAK

910 SYCAMORE AVE STE
102

VISTA, CA 92081

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265487326

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295507

Board Certified Specialty: No

CHRISTOPHER TAYLOR

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1851747166

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-2:00PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295504

Board Certified Specialty: No

CHRISTOPHER TAYLOR

105 DURIAN ST STE A
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1851747166

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-2:00PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

TAYLOR, CHRISTOPHER


Provider ID: 295502

Board Certified Specialty: No

CHRISTOPHER TAYLOR

D3. 专科提供者名录

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1851747166

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-2:00PM

SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


YCASAS, EMILY

Provider ID: 298837

Board Certified Specialty: No

EMILY JO YCASAS

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1033841861

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):


N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F

8:00AM-8:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


GUIDI, CASEY

Provider ID: 300224

Board Certified Specialty: No

CASEY L GUIDI

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013349919

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH

8:00AM-8:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


GUIDI, CASEY

Provider ID: 303315

Board Certified Specialty: No

CASEY L GUIDI

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013349919

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH

8:00AM-8:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

CHIROPRACTOR


CORTEZ, JAIME

Provider ID: 290483

Board Certified Specialty: No

CORTEZ, JAIME

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1508195348

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes



Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

D3. 专科提供者名录

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CHIROPRACTOR


JU, NATHANIEL

Provider ID: 290222

Board Certified Specialty: No

NATHANIEL JU

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1972883882

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CHIROPRACTOR


JU, NATHANIEL

Provider ID: 290220

Board Certified Specialty: No

NATHANIEL JU

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1972883882

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A

HOSPICE AND PALLIATIVE

MEDICINE

RUBENZIK, TAMARA


Provider ID: 282128

Board Certified Specialty: No

TAMARA T RUBENZIK

 910 SYCAMORE AVE STE
102

VISTA, CA 92081

 Phone: (619) 543-6397

Fax: (888) 539-8781

 After Hours Phone: (619)
543-6397

Provider Gender: Female

NPI: 1811200652

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INFECTIOUS DISEASE

HALPERIN, JASON


Provider ID: 296420

Board Certified Specialty: No

JASON I HALPERIN

 134 GRAPEVINE RD

VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1952626228

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE


DAO, MARC

Provider ID: 297754

Board Certified Specialty: No

MARC DAO

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3763

 After Hours Phone: (760)
631-5000

D3. 专科提供者名录

Provider Gender: Male

NPI: 1467542175

Provider English Spoken: Y

Provider Language(s)
Spoken: French,
Vietnamese

Cultural Competency: N


Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL,
PALOMAR MEDICAL CENTER,
SHARP MEMORIAL HOSPITAL,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, EL CENTRO
REGIONAL MEDICAL CENTER,
PALOMAR HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


INTERNAL MEDICINE

SHABANIAN, LEILA

Provider ID: 306766

Board Certified Specialty: No
LEILA SHABANIAN

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013963073

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, French,
Persian

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA


VISTA, TRI CITY MEDICAL CTR,
PALOMAR HEALTH, SCRIPPS
MERCY HOSPITAL, PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

SHABANIAN, LEILA

Provider ID: 307214

Board Certified Specialty: No
LEILA SHABANIAN

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013963073

Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, French,
Persian

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

VISTA, TRI CITY MEDICAL CTR,


PALOMAR HEALTH, SCRIPPS
MERCY HOSPITAL, PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

SHABANIAN, LEILA

Provider ID: 307216

Board Certified Specialty: No
LEILA SHABANIAN

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013963073

Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, French,
Persian

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

VISTA, TRI CITY MEDICAL CTR,
PALOMAR HEALTH, SCRIPPS




MERCY HOSPITAL, PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N






D3. 专科提供者名录




 *Accessibility: CONTACT PROVIDER*
 *Hours: TU 10:30AM-7:30PM
F 8:00AM-5:00PM*
 *Website: N/A*

INTERVENTIONAL

CARDIOLOGY

PARKS, MONICA

Provider ID: 302414
Board Certified Specialty: No
MONICA M PARKS
 906 SYCAMORE AVE STE 104
VISTA, CA 92081
 *Phone: (760) 630-2550*
Fax: (760) 726-2305
 *After Hours Phone: (760) 630-2550*
Provider Gender: Female
NPI: 1740634971
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish, Vietnamese*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

OBSTETRICS / GYNECOLOGY


ARRIETA, IRIS

Provider ID: 290607
Board Certified Specialty: No
IRIS R ARRIETA
 1000 VALE TERRACE DR
VISTA, CA 92084
 *Phone: (760) 631-5000*
Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

Provider Gender: Female
NPI: 1659614303
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-TH 8:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM*

 *Website: N/A*

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA


Provider ID: 282168
Board Certified Specialty: No
PRATIBHA S BINDER

 910 SYCAMORE AVE STE 102
VISTA, CA 92081
 *Phone: (800) 926-8273*


Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1174758031

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*


 *Website: N/A*


OBSTETRICS / GYNECOLOGY

FRANCIS, LARRY



Provider ID: 290292
Board Certified Specialty: No
LARRY N FRANCIS

 1000 VALE TERRACE DR
VISTA, CA 92084

 *Phone: (760) 631-5000*
Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

Provider Gender: Male
NPI: 1215008552

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SHARP MEMORIAL HOSPITAL,

D3. 专科提供者名录

POMONA VALLEY HOSP MED  Website: N/A
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 13\999

American Sign Language (ASL): Provider ID: 290710

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH

9:00AM-8:00PM

F 9:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


HAWKINS, MELISSA

Provider ID: 290596


Board Certified Specialty: No

MELISSA A HAWKINS

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1851620447

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH

8:00AM-7:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

OBSTETRICS / GYNECOLOGY


LEONARD, LISA

Provider ID: 290710

Board Certified Specialty: No

LISA A LEONARD

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1477588598

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH

9:00AM-8:00PM

F 9:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

OPTOMETRIST


GEE, JENNIFER

Provider ID: 273113

Board Certified Specialty: No

JENNIFER W GEE

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1336589332

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,

CALIFORNIA PACIFIC

MEDICAL CENTER - D P APH


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH

8:00AM-8:00PM

F 9:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

OPTOMETRIST


GEE, JENNIFER

Provider ID: 273114

Board Certified Specialty: No

JENNIFER W GEE

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1336589332

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:


COMMUNITY REGIONAL

D3. 专科提供者名录

MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC
MEDICAL CENTER - D P A P H
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:00AM-5:00PM
TU 9:30AM-5:00PM
W 8:00AM-5:00PM
TH 10:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


OPTOMETRIST

GEE, JENNIFER

Provider ID: 290209

Board Certified Specialty: No
JENNIFER W GEE

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1336589332

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC

MEDICAL CENTER - D P A P H

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:00AM-5:00PM
TU 9:30AM-5:00PM
W 8:00AM-5:00PM
TH 10:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


OPTOMETRIST

GEE, JENNIFER

Provider ID: 290208

Board Certified Specialty: No
JENNIFER W GEE

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1336589332

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC


MEDICAL CENTER - D P A P H


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


OPTOMETRIST

KIM, MICHAEL

Provider ID: 290903

Board Certified Specialty: No
MICHAEL S KIM

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male


NPI: 1164546313


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: SU 8:00AM-5:00PM
M-F 8:00AM-5:00PM

 Website: N/A


OPTOMETRIST

KIM, MICHAEL

Provider ID: 245239

Board Certified Specialty: No
MICHAEL S KIM

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1164546313

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

D3. 专科提供者名录

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-W
8:00AM-5:00PM
TH 10:30AM-7:30PM
F 8:00AM-5:00PM

Website: N/A

OPTOMETRIST

KIM, MICHAEL

Provider ID: 290697

Board Certified Specialty: No
MICHAEL S KIM

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1164546313

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-W
8:00AM-5:00PM
TH 10:30AM-7:30PM
F 8:00AM-5:00PM

Website: N/A

OPTOMETRIST

MORA, WENDY

Provider ID: 290238

Board Certified Specialty: No
WENDY A MORA

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1376958389

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

MORA, WENDY

Provider ID: 290236

Board Certified Specialty: No
WENDY A MORA

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1376958389

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-TH

9:00AM-8:00PM

F 9:00AM-5:00PM

SA 9:00AM-4:00PM

Website: N/A

OPTOMETRIST

MORA, WENDY

Provider ID: 242634

Board Certified Specialty: No
WENDY A MORA

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1376958389

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH

9:00AM-8:00PM

F 9:00AM-5:00PM

SA 9:00AM-4:00PM

Website: N/A

OPTOMETRIST

TAM, EMILY

Provider ID: 277978

Board Certified Specialty: No
EMILY TAM

1000 VALE TERRACE DR

D3. 专科提供者名录

VISTA, CA 92084
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1497161236
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Chinese, Mandarin,
Yue Chinese

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: SU 9:00AM-4:00PM
M-TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
🌐 Website: N/A

OPTOMETRIST

TAM, EMILY

Provider ID: 290315
Board Certified Specialty: No
EMILY TAM

📍 1000 VALE TERRACE DR
VISTA, CA 92084
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1497161236

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Chinese, Mandarin,
Yue Chinese
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: SU 9:00AM-4:00PM
M-TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
🌐 Website: N/A

OPTOMETRIST

TAM, EMILY

Provider ID: 290316
Board Certified Specialty: No
EMILY TAM

📍 134 GRAPEVINE RD
VISTA, CA 92083
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1497161236

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Chinese, Mandarin,
Yue Chinese

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 303729
Board Certified Specialty: No
JESSICA A TRAN

📍 1000 VALE TERRACE DR
VISTA, CA 92084
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1457922957
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 5\21

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM
🌐 Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 304595
Board Certified Specialty: No
JESSICA A TRAN



📍 1000 VALE TERRACE DR
VISTA, CA 92084
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1457922957

☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

D3. 专科提供者名录

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM
 Website: N/A

OPTOMETRIST


TRAN, JESSICA

Provider ID: 303733
Board Certified Specialty: No
JESSICA A TRAN

 134 GRAPEVINE RD
VISTA, CA 92083
 Phone: (760) 631-5000
Fax: (760) 414-3892


 After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1457922957

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 5\21

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A

OPTOMETRIST


TRAN, JESSICA

Provider ID: 304596
Board Certified Specialty: No
JESSICA A TRAN

 134 GRAPEVINE RD
VISTA, CA 92083
 Phone: (760) 631-5000
Fax: (760) 414-3892


 After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1457922957

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A

PEDIATRICS



RAHIMI, NASSRIN

Provider ID: 257581
Board Certified Specialty: No
NASSRIN RAHIMI

 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1063438166

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Persian
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH


8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
 Website: N/A

PHYSICIANS ASSISTANT



WALLACE, STEPHANIE

Provider ID: 239770
Board Certified Specialty: No
STEPHANIE C WALLACE

 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (888)
216-8482

Provider Gender: Female
NPI: 1518104942


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:00AM-5:00PM
TU-TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A

PODIATRIST

MILLER, JULIE

Provider ID: 305464
Board Certified Specialty: No
MILLER, JULIE ANN

 134 GRAPEVINE RD

D3. 专科提供者名录

VISTA, CA 92083
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1619115664
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

PODIATRIST

MILLER, JULIE

Provider ID: 290666
Board Certified Specialty: No
MILLER, JULIE ANN
📍 1000 VALE TERRACE DR VISTA, CA 92084
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1619115664
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL

CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-TH 8:00AM-8:00PM F 8:00AM-5:00PM SA 9:00AM-4:00PM
🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

AMBROSE, CHRISTOPHER

Provider ID: 248009
Board Certified Specialty: No
CHRISTOPHER S AMBROSE
📍 2067 W VISTA WAY STE 185 VISTA, CA 92083
☎ Phone: (760) 631-5888
Fax: (760) 631-5880
🕒 After Hours Phone: (760) 591-7750
Provider Gender: Male
NPI: 1114977535
🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 8\125
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M 7:00AM-7:00PM TU 7:00AM-5:00PM W 7:00AM-7:00PM TH 7:00AM-5:00PM F 7:00AM-7:00PM

🌐 Website: N/A

RHEUMATOLOGY

ALNAHLAWI, BASMA

Provider ID: 306869
Board Certified Specialty: No
BASMA ALNAHLAWI
📍 2095 W VISTA WAY STE 216 VISTA, CA 92083
☎ Phone: (760) 736-8091
Fax: (760) 736-8092
🕒 After Hours Phone: (760) 736-8091
Provider Gender: Female
NPI: 1144455262

🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: LOMA LINDA UNIVERSITY MED CTR MURRIETA, PALOMAR MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 9:00AM-5:00PM
🌐 Website: N/A

SURGERY GENERAL

ARMANI, AVA

Provider ID: 282144
Board Certified Specialty: No
AVA ARMANI
📍 910 SYCAMORE AVE STE 102

D3. 专科提供者名录

VISTA, CA 92081
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1861759383
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF MEDICAL CENTER, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

SURGERY GENERAL

GROVE, JAY

Provider ID: 245227
Board Certified Specialty: No
JAY R GROVE
📍 2385 S MELROSE DR VISTA, CA 92081
☎ Phone: (760) 300-3647
Fax: (760) 482-1316
🕒 After Hours Phone: (760) 300-3647
Provider Gender: Male
NPI: 1912971334
🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

WILDOMAR

ANESTHESIOLOGY

HYLTON, DIANA

Provider ID: 241737
Board Certified Specialty: No
DIANA J HYLTON
📍 36485 INLAND VALLEY DR WILDOMAR, CA 92595
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932527751
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

ANESTHESIOLOGY

KRAUSE, MARTIN

Provider ID: 287654
Board Certified Specialty: No
MARTIN KRAUSE
📍 36485 INLAND VALLEY DR WILDOMAR, CA 92595
☎ Phone: (951) 677-1111
Fax: (951) 677-9757
🕒 After Hours Phone: (951) 677-1111
Provider Gender: Male
NPI: 1417243239
🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: German
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

D3. 专科提供者名录

EMERGENCY MEDICINE


LI, JINGHONG


Provider ID: 255940

Board Certified Specialty: No

JINGHONG LI

 36485 INLAND VALLEY DR
WILDOMAR, CA 92595

 Phone: (951) 677-1111

 After Hours Phone: (951)
677-1111

Provider Gender: Female

NPI: 1619014479

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PULMONARY DISEASES


KUMAR, AVNEE

Provider ID: 300013

Board Certified Specialty: No

AVNEE J KUMAR

 36485 INLAND VALLEY DR
WILDOMAR, CA 92595

 Phone: (951) 677-1111

Fax: (951) 677-9757

 After Hours Phone: (951)
677-1111

Provider Gender: Female

NPI: 1750745394

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PULMONARY DISEASES


SURI, RAJAT

Provider ID: 283349

Board Certified Specialty: No

RAJAT SURI

 36485 INLAND VALLEY DR
WILDOMAR, CA 92595

 Phone: (951) 677-1111

Fax: (951) 677-9757

 After Hours Phone: (951)
677-1111

Provider Gender: Male

NPI: 1144615337

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D4. 医院名录 - 综合急症护理医院

LA MESA

GROSSMONT HOSPITAL

Provider ID: 170046

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Phone: (619) 740-6000

After Hours Phone: (619)
740-6000

Accepting New Patients: No
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: 080000006
NPI: 1528041811

Website: www.sharp.com/hospitals/grossmont/

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Birthing Friendly: Y

SAN DIEGO

KINDRED HOSPITAL SAN DIEGO

Provider ID: 169663

1940 EL CAJON BLVD
SAN DIEGO, CA 92104

Phone: (619) 543-4500

After Hours Phone: (619)
543-4500

Accepting New Patients: No
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:

JCAHO

Hours: 24 Hours / 7
days/week

License Number: N/A

NPI: 1992880512

Website: N/A

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

POWAY

PALOMAR HEALTH

Provider ID: 170052

15615 POMERADO RD
POWAY, CA 92064

Phone: (858) 613-4000

After Hours Phone: (858)
613-4000

Accepting New Patients: No
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: 080000127
NPI: 1376513754

Website: www.palomarhealth.org/facilities/palomar-poway-outpatient

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Birthing Friendly: Y

ESCONDIDO

PALOMAR MEDICAL CENTER

Provider ID: 173011

2185 CITRACADO PKWY
ESCONDIDO, CA 92029

Phone: (442) 281-5000

After Hours Phone: (442)
281-5000

Accepting New Patients: No
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: 080000083
NPI: 1457321317

Website: www.palomarhealth.org/facilities/palomar-medical-center

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

NATIONAL CITY

PARADISE VALLEY HOSPITAL

Provider ID: 170057

2400 E 4TH ST
NATIONAL CITY, CA 91950

Phone: (619) 470-4321

After Hours Phone: (619)
470-4321

Accepting New Patients: No
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: N/A
NPI: 1356410351

Website: www.paradisevall

D4. 医院名录 - 综合急症护理医院

eyhospital.net

American Sign Language (ASL): Cultural Competency: N

N


 Accessibility: CONTACT PROVIDER


SAN DIEGO

RADY CHILDRENS HOSPITAL SAN DIEGO

Provider ID: 171083

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 576-1700


 After Hours Phone: (858)
576-1700

Accepting New Patients: No

Min/Max Age: 0\150

 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:

 Hours: 24 Hours / 7
days/week

License Number: N/A

NPI: 1710065933

 Website: www.rchsd.org

American Sign Language (ASL):


N


 Accessibility: CONTACT PROVIDER


LA JOLLA

SCRIPPS GREEN HOSPITAL

Provider ID: 171084

 10666 N TORREY PINES RD
MS 220
LA JOLLA, CA 92037

 Phone: (858) 455-9100

 After Hours Phone: (858)
455-9100

Accepting New Patients: No


Min/Max Age: 0\150

 Site English Spoken: Y

Cultural Competency: N


Hospital Accreditation Status:

JCAHO

 Hours: 24 Hours / 7
days/week

License Number: 080000139

NPI: 1841233780

 Website: www.scripps.org/l
ocations/hospitals__scripp
s- green- hospital

American Sign Language (ASL):


N


 Accessibility: CONTACT PROVIDER

SCRIPPS MEMORIAL HOSPITAL

Provider ID: 170045

 9888 GENESEE AVE
LA JOLLA, CA 92037

 Phone: (800) 727-4777


 After Hours Phone: (800)
727-4777

Accepting New Patients: No

Min/Max Age: 0\150


 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:

 Hours: 24 Hours / 7
days/week

License Number: 080000050

NPI: 1841277704

 Website: www.scripps.org/l
ocations/hospitals__scripp
s- memorial- hospital- la- j
olla

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Birthing Friendly: Y


ENCINITAS

SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Provider ID: 170305

 354 SANTA FE DR
ENCINITAS, CA 92024

 Phone: (760) 753-6501


 After Hours Phone: (760)
753-6501

Accepting New Patients: No

Min/Max Age: 0\150


 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

 Hours: 24 Hours / 7
days/week


License Number: 080000148

NPI: 1700829199

 Website: www.scripps.org/l
ocations/hospitals__scripp
s- memorial- hospital- enci
nitas

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Birthing Friendly: Y


SAN DIEGO

SCRIPPS MERCY HOSPITAL

Provider ID: 170048

 4077 5TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 294-8111

 After Hours Phone: (619)
294-8111

Accepting New Patients: No


Min/Max Age: 0\150

 Site English Spoken: Y

D4. 医院名录 - 综合急症护理医院


Cultural Competency: N

Hospital Accreditation Status: JCAHO

 *Hours: 24 Hours / 7 days/week*

License Number: N/A

NPI: 1659359446

 *Website: www.scripps.org/locations/hospitals__scripps-mercy-hospital__scripps-mercy-hospital-san-diego*

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

Birthing Friendly: Y


CHULA VISTA


SCRIPPS MERCY HOSPITAL CHULA VISTA

Provider ID: 170256


 *435 H ST*

CHULA VISTA, CA 91910


 *Phone: (619) 691-7000*

 *After Hours Phone: (619) 691-7000*

*Accepting New Patients: No
Min/Max Age: 0\150*


 *Site English Spoken: Y
Cultural Competency: N*

Hospital Accreditation Status: JCAHO

 *Hours: 24 Hours / 7 days/week*

License Number: 090000074

NPI: 1659359446

 *Website: www.scripps.org/locations/hospitals__scripps-mercy-hospital__scripps-mercy-hospital-chula-vista*

American Sign Language (ASL): Cultural Competency: N

N


 *Accessibility: CONTACT PROVIDER*


SAN DIEGO

SELECT SPECIALTY HOSPITAL SAN DIEGO

Provider ID: 170165

 *555 WASHINGTON ST
SAN DIEGO, CA 92103*


 *Phone: (619) 260-8300*

 *After Hours Phone: (619) 260-8300*

*Accepting New Patients: No
Min/Max Age: 0\150*

 *Site English Spoken: Y
Cultural Competency: N*

Hospital Accreditation Status: JCAHO


 *Hours: 24 Hours / 7 days/week*

License Number: 090000404

NPI: 1639172133

 *Website: N/A*

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


CHULA VISTA

SHARP CHULA VISTA MED CTR

Provider ID: 170251

 *751 MEDICAL CENTER CT
CHULA VISTA, CA 91911*


 *Phone: (619) 502-5800*

 *After Hours Phone: (619) 502-5800*

*Accepting New Patients: No
Min/Max Age: 0\150*


 *Site English Spoken: Y*

Hospital Accreditation Status: JCAHO

 *Hours: 24 Hours / 7 days/week*

License Number: 090000008

NPI: 1396728630

 *Website: www.sharp.com/hospitals/chula-vista/*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Birthing Friendly: Y


CORONADO

SHARP CORONADO HOSP AND HEALTHCARE CTR


Provider ID: 170252

 *250 PROSPECT PL
CORONADO, CA 92118*


 *Phone: (619) 522-3600*

 *After Hours Phone: (619) 522-3600*

*Accepting New Patients: No
Min/Max Age: 0\150*

 *Site English Spoken: Y
Cultural Competency: N*

Hospital Accreditation Status: JCAHO


 *Hours: 24 Hours / 7 days/week*

License Number: N/A

NPI: 1154304475

 *Website: www.sharp.com/hospitals/coronado/*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

D4. 医院名录 - 综合急症护理医院

SAN DIEGO

SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS

Provider ID: 170054

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

Phone: (858) 939-3400

After Hours Phone: (858)
939-3400

Accepting New Patients: No
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:

Hours: 24 Hours / 7
days/week

License Number: 080000039

NPI: 1407839921

Website: www.sharp.com

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

SHARP MEMORIAL HOSPITAL

Provider ID: 170047

7901 FROST ST
SAN DIEGO, CA 92123

Phone: (858) 939-3400

After Hours Phone: (858)
939-3400

Accepting New Patients: No
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:

Hours: 24 Hours / 7
days/week

License Number: N/A

NPI: 1407839921

Website: www.sharp.com/h

ospitals/memorial/

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Birthing Friendly: Y

OCEANSIDE

TRI CITY MEDICAL CTR

Provider ID: 170049

4002 VISTA WAY
OCEANSIDE, CA 92056

Phone: (760) 724-8411

After Hours Phone: (760)
724-8411

Accepting New Patients: No
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:

Hours: 24 Hours / 7
days/week

License Number: N/A

NPI: 1801861190

Website: www.tricitymed.org

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Birthing Friendly: Y

SAN DIEGO

UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER

Provider ID: 685221

6655 ALVARADO RD
SAN DIEGO, CA 92120

Accepting New Patients: No
Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: 090000101

NPI: 1184722779

Website: N/A

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER

Provider ID: 685221

6655 ALVARADO RD
SAN DIEGO, CA 92120

Accepting New Patients: No
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: 090000013

NPI: 1184722779

Website: N/A

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

LA JOLLA

UCSD LA JOLLA JOHN SALLY THORNTON

Provider ID: 170053






9300 CAMPUS POINT DR
LA JOLLA, CA 92037

D4. 医院名录 - 综合急症护理医院

 Phone: (858) 657-7000 *Birthing Friendly: Y*
 After Hours Phone: (858)
657-7000
Accepting New Patients: No
Min/Max Age: 0\150
 Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status:
 Hours: 24 Hours / 7
days/week
License Number: 090000101
NPI: 1497021265
 Website: N/A
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

SAN DIEGO

UCSD MEDICAL CTR

Provider ID: 170051
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (619) 543-6222
 After Hours Phone: (619)
543-6222
Accepting New Patients: No
Min/Max Age: 0\150
 Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status:
 Hours: 24 Hours / 7
days/week
License Number: 090000101
NPI: 1184722779
 Website: <https://health.ucsd.edu/locations/pages/hillcrest.aspx>
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


D5. 长期支持服务 (LTSS)

I. 长期护理 (LTC) 和专业护理机构 (SNF)


CARLSBAD

N

 Accessibility: CONTACT PROVIDER

 Website: www.sharp.com/hospitals/coronado/departments/long-term-care.cfm


Credentials and/or certifications:


 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

LA COSTA HOUSE

Provider ID: 662923

 6433 FLAMENCO ST
CARLSBAD, CA 92009

 Phone: (760) 721-1706

Fax: (760) 721-9872

 After Hours Phone: (760) 721-1706

Accepting New Patients: No

NPI: 1962488007

 Website: N/A

Credentials and/or certifications:

 Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

SOUTH BAY POST ACUTE CARE

Provider ID: 394308


 553 F ST
CHULA VISTA, CA 91910

 Phone: (619) 426-8611

Fax: (619) 240-7378

 After Hours Phone: (619) 426-8611

Accepting New Patients: No

 Hours: M-F
9:00AM-5:30PM

NPI: 1376946277

 Website: <http://southbaypostacute.com>

Credentials and/or certifications:

 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Filipino, Pilipino
Cultural Competency: N

American Sign Language (ASL): N

N


 Accessibility: CONTACT PROVIDER

EL CAJON

AVOCADO POST ACUTE

Provider ID: 171985

 510 E WASHINGTON AVE
EL CAJON, CA 92020

 Phone: (619) 440-1211


Fax: (619) 956-3929

 After Hours Phone: (619) 440-1211

Accepting New Patients: No
NPI: 1568484517

 Website: www.avocadopostacute.com

Credentials and/or certifications:

 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

CHULA VISTA

BIRCH PATRICK CONV CTR

Provider ID: 171998

 751 MEDICAL CENTER CT
CHULA VISTA, CA 91911


 Phone: (619) 502-3600

Fax: (619) 502-5835

 After Hours Phone: (619) 502-3600

Accepting New Patients: No

NPI: 1538142369

 Website: www.sharp.com/hospitals/chula-vista/departments/skilled-nursing.cfm

Credentials and/or certifications:

 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):


CORONADO

VILLA CORONADO


CONVALESCENT

Provider ID: 172644

 233 PROSPECT PL
CORONADO, CA 92118

 Phone: (619) 552-3900

Fax: (619) 522-3939


 After Hours Phone: (619) 552-3900

Accepting New Patients: No
NPI: 1184607418

COTTONWOOD CANYON HEALTHCARE CENTER

Provider ID: 171983

 1391 E MADISON AVE
EL CAJON, CA 92021

 Phone: (619) 444-1107

D5. 长期支持服务 (LTSS)

I. 长期护理 (LTC) 和专业护理机构 (SNF)

Fax: (619) 444-1403

☎ After Hours Phone: (619) 444-1107

Accepting New Patients: No

NPI: 1013953199

🌐 Website: <http://cottonwoodcanyonhc.com>

Credentials and/or certifications:

☐ Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

COUNTRY HILLS HEALTH CARE CENTER

Provider ID: 416853

📍 1580 BROADWAY
EL CAJON, CA 92021

☎ Phone: (619) 441-8745

☎ After Hours Phone: (619) 441-8745

Accepting New Patients: No

NPI: 1700973963

🌐 Website: www.countryhills.com

Credentials and/or certifications:

☐ Site English Spoken: Y
☐ Site Languages(s) Spoken: American Sign Language, Arabic, Korean, Spanish, Tagalog, Farsi, Vietnamese, Mandarin

Cultural Competency: N

American Sign Language (ASL): Y

♿ Accessibility: CONTACT PROVIDER

COUNTRY HILLS POST ACUTE

Provider ID: 503510

📍 1580 BROADWAY
EL CAJON, CA 92021

☎ Phone: (619) 441-8745

Fax: (619) 441-9029

☎ After Hours Phone: (619) 441-8745

Accepting New Patients: No

NPI: 1063974285

🌐 Website: N/A

Credentials and/or certifications:

☐ Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

GRANITE HILLS HEALTHCARE AND WELLNESS CENTRE LLC

Provider ID: 286282

📍 1340 E MADISON AVE
EL CAJON, CA 92021

☎ Phone: (619) 447-1020

Fax: (619) 447-1024

☎ After Hours Phone: (619) 447-1020

Accepting New Patients: No

NPI: 1346516937

🌐 Website: N/A
Credentials and/or certifications:

☐ Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

KASEY'S HOME

Provider ID: 674600

📍 1164 CRYSTAL LN
EL CAJON, CA 92020

☎ Phone: (619) 465-8010

Fax: (619) 465-8348

☎ After Hours Phone: (619) 465-8010

Accepting New Patients: No

🕒 Hours: M-F
8:00AM-5:00PM

NPI: 1639392079

🌐 Website: N/A
Credentials and/or certifications:

☐ Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

MAGNOLIA POST ACUTE CARE

Provider ID: 380518

📍 635 S MAGNOLIA AVE
EL CAJON, CA 92020

☎ Phone: (616) 442-8826

Fax: (619) 442-0288

☎ After Hours Phone: (616) 442-8826

Accepting New Patients: No

NPI: 1316340227

🌐 Website: N/A
Credentials and/or certifications:

☐ Site English Spoken: Y
☐ Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER


D5. 长期支持服务 (LTSS)


I. 长期护理 (LTC) 和专业护理机构 (SNF)

PARKSIDE HEALTH AND WELLNESS CENTER

Provider ID: 349923

 444 W LEXINGTON AVE
EL CAJON, CA 92020

 Phone: (619) 442-7744

 After Hours Phone: (619)
442-7744

Accepting New Patients: No

NPI: 1447653340

 Website: <http://parksidehealth.net>

Credentials and/or
certifications:

Site English Spoken: Y

Site Language(s) Spoken:
Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL):


N

 Accessibility: CONTACT
PROVIDER

SAN DIEGO POST ACUTE CENTER

Provider ID: 173508

 1201 S ORANGE AVE
EL CAJON, CA 92020


 Phone: (619) 441-1988

Fax: (619) 441-7416

 After Hours Phone: (619)
441-1988

Accepting New Patients: No

NPI: 1285061085

 Website: <http://sdpostacute.com>

Credentials and/or
certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):


N

 Accessibility: CONTACT
PROVIDER

SOMERSET SUBACUTE AND CARE

Provider ID: 348526

 151 CLAYDELLE AVE
EL CAJON, CA 92020

 Phone: (619) 442-0245

Fax: (614) 423-3631

 After Hours Phone: (619)
442-0245

Accepting New Patients: No

NPI: 1073916987

 Website: <http://somensetsubacute.com>

Credentials and/or
certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):


N


 Accessibility: CONTACT
PROVIDER

VICTORIA POST ACUTE CARE

Provider ID: 387720

 654 S ANZA ST
EL CAJON, CA 92020

 Phone: (619) 440-5005

 After Hours Phone: (619)
440-5005

Accepting New Patients: No

NPI: 1326441239

 Website: www.VICTORIAPOSTACUTE.com

Credentials and/or
certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):


N


 Accessibility: CONTACT
PROVIDER

VICTORIA POST ACUTE CARE

Provider ID: 387720

 654 S ANZA ST
EL CAJON, CA 92020

 Phone: (619) 440-5005

 After Hours Phone: (619)
440-5005

Accepting New Patients: No

NPI: 1326441239

 Website: <http://victoriapostacute.com>

Credentials and/or
certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):


N


 Accessibility: CONTACT
PROVIDER

VILLA LAS PALMAS HEALTHCARE CTR

Provider ID: 172020

 622 S ANZA ST
EL CAJON, CA 92020

 Phone: (619) 442-0544

 After Hours Phone: (619)
442-0544

Accepting New Patients: No

NPI: 1023048295

 Website: <http://villalaspalmascares.com>

Credentials and/or
certifications:

Site English Spoken: Y


Cultural Competency: N

American Sign Language (ASL):

N

D5. 长期支持服务 (LTSS)

I. 长期护理 (LTC) 和专业护理机构 (SNF)


 *Accessibility: CONTACT PROVIDER*


ENCINITAS

AVIARA HEALTHCARE CENTER


Provider ID: 171995

 944 REGAL RD
ENCINITAS, CA 92024

 *Phone: (760) 944-0331*

 *After Hours Phone: (760) 944-0331*


Accepting New Patients: No
NPI: 1518146620

 *Website: <http://aviarahealthcare.com>*

Credentials and/or


certifications:

 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Tagalog, Spanish*

Cultural Competency: N


American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


ENCINITAS NURSING AND REHAB CTR

Provider ID: 171977


 900 SANTA FE DR
ENCINITAS, CA 92024

 *Phone: (760) 753-6423*

Fax: (760) 753-4979

 *After Hours Phone: (760) 753-6423*

Accepting New Patients: No

 *Hours: M-F*
8:00AM-5:00PM


NPI: 1265415749

 *Website: www.covenantcare.com*

Credentials and/or

certifications:

 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Spanish*

Cultural Competency: N


American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


THE DORTHY AND JOSEPH GOLDBERG HEALTHCARE CENTER

Provider ID: 172000


 211 SAXONY RD
ENCINITAS, CA 92024

 *Phone: (760) 632-0081*

Fax: (760) 516-2016

 *After Hours Phone: (760) 632-0081*

Accepting New Patients: No

 *Hours: M-F*
7:00AM-4:00PM

NPI: 1659482032

 *Website: N/A*

Credentials and/or

certifications:

 *Site English Spoken: Y*

Cultural Competency: N

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

ESCONDIDO

ESCONDIDO CARE CENTER

Provider ID: 172027


 421 E MISSION AVE
ESCONDIDO, CA 92025

 *Phone: (760) 747-0430*

Fax: (760) 747-0569

 *After Hours Phone: (760) 747-0430*

Accepting New Patients: No

 *Hours: M-F*
8:00AM-4:30PM


NPI: 1588660765

 *Website: <http://escondidopostacute.com>*

Credentials and/or

certifications:

 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Tagalog, Spanish*

Cultural Competency: N


American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

LIFE CARE CENTER OF ESCONDIDO

Provider ID: 172010

 1980 FELICITA RD
ESCONDIDO, CA 92025

 *Phone: (760) 741-6109*

 *After Hours Phone: (760) 741-6109*

Accepting New Patients: No
NPI: 1386681286

 *Website: <http://lifecarecentrofescondido.com>*

Credentials and/or

certifications:

 *Site English Spoken: Y*

Cultural Competency: N

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PALOMAR HEIGHTS CARE CTR

Provider ID: 170055

D5. 长期支持服务 (LTSS)

I. 长期护理 (LTC) 和专业护理机构 (SNF)

1260 E OHIO AVE
ESCONDIDO, CA 92027
Phone: (760) 746-1100
After Hours Phone: (760) 746-1100

Accepting New Patients: No
NPI: 1255337440

Website: <http://palomarhealthsrehab.com>
Credentials and/or certifications:

Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: N
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PALOMAR VISTA HEALTHCARE CTR

Provider ID: 171988

201 N FIG ST
ESCONDIDO, CA 92025
Phone: (760) 746-0303
Fax: (760) 738-1749

After Hours Phone: (760) 746-0303

Accepting New Patients: No
NPI: 1861491490

Website: <http://palomarvista.com>

Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

VALLE VISTA POST ACUTE

Provider ID: 171968

1025 W 2ND AVE
ESCONDIDO, CA 92025
Phone: (760) 745-1842

Fax: (760) 745-4346

After Hours Phone: (760) 745-1842

Accepting New Patients: No

Hours: M-F
8:00AM-5:00PM

NPI: 1659369262

Website: www.covenantcare.com

Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FALLBROOK

FALLBROOK SKILLED NURSING

Provider ID: 298744

325 POTTER ST
FALLBROOK, CA 92028
Phone: (760) 728-2330

Fax: (909) 863-4644

After Hours Phone: (760) 728-2330

Accepting New Patients: No

Hours: M-F
8:00AM-5:00PM

NPI: 1265823264

Website: www.progressivecarecenters.com

Credentials and/or certifications:

Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

VIA RIO HOUSE

Provider ID: 662930

1262 VIA ENCINOS DR
FALLBROOK, CA 92028
Phone: (760) 547-1976

Fax: (760) 721-9872

After Hours Phone: (760) 547-1976

Accepting New Patients: No
NPI: 1962488007

Website: N/A
Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

LA JOLLA

LA JOLLA NURSING AND REHAB CTR

Provider ID: 171975

2552 TORREY PINES RD
LA JOLLA, CA 92037
Phone: (858) 453-5810

Fax: (858) 214-1212

After Hours Phone: (858) 453-5810







Accepting New Patients: No
Hours: M-F

D5. 长期支持服务 (LTSS)

I. 长期护理 (LTC) 和专业护理机构 (SNF)


8:00AM-5:00PM
NPI: 1457486078
 Website: www.covenantcar.com
Credentials and/or certifications:
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER




THE COVE AT LA JOLLA

Provider ID: 305514
 7160 FAY AVE
LA JOLLA, CA 92037
 Phone: (858) 459-4361
 After Hours Phone: (858) 459-4361
Accepting New Patients: No
 Hours: M-F 7:30AM-4:00PM
NPI: 1588067482
 Website: <http://thecoveatla.com>
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER






LA MESA

ARBOR HILLS NURSING CENTER





Provider ID: 172007
 7800 PARKWAY DR

LA MESA, CA 91942
 Phone: (619) 460-2330
 After Hours Phone: (619) 460-2330
Accepting New Patients: No
NPI: 1356345706
 Website: www.lifegen.net/arborsnfs/
Credentials and/or certifications:
 Site English Spoken: Y
 Site Languages(s) Spoken: Tagalog, Spanish, Russian
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CARE MERIDIAN LA MESA

Provider ID: 173379
 5640 AZTEC DR
LA MESA, CA 91942
 Phone: (949) 263-6632
Fax: (619) 465-0019
 After Hours Phone: (949) 263-6632
Accepting New Patients: No
NPI: 1235404674
 Website: www.neurorestorative.com
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

COUNTRY MANOR LA MESA HEALTHCARE CENTER

Provider ID: 172023
 5696 LAKE MURRAY BLVD
LA MESA, CA 91942
 Phone: (619) 460-7871
 After Hours Phone: (619) 460-7871
Accepting New Patients: No
NPI: 1457345001
 Website: countrymanorlamesa.com
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

GROSSMONT HOSPITAL DP SNF

Provider ID: 172643
 5555 GROSSMONT CENTER DR
LA MESA, CA 91942
 Phone: (619) 740-4110
 After Hours Phone: (619) 740-4110
Accepting New Patients: No
NPI: 1417930249
 Website: www.sharp.com/hospitals/grossmont/departments/skilled-nursing.cfm
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

D5. 长期支持服务 (LTSS)

I. 长期护理 (LTC) 和专业护理机构 (SNF)

GROSSMONT POST ACUTE CARE

Provider ID: 310488

8787 CENTER DR
LA MESA, CA 91942

Phone: (619) 460-4444

Fax: (619) 713-5116

After Hours Phone: (619)
460-4444

Accepting New Patients: No

NPI: 1689077588

Website: <http://grossmontpostacute.com>

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

HILLDALE HABILITATION CENTER

Provider ID: 527671

7979 LA MESA BLVD
LA MESA, CA 91942

Phone: (619) 465-8010

Fax: (619) 465-8348

After Hours Phone: (619)
465-8010

Accepting New Patients: No

Hours: M-F
8:00AM-5:00PM

NPI: 1073736427

Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

LA MESA HEALTHCARE CTR

Provider ID: 172022

3780 MASSACHUSETTS
AVE

LA MESA, CA 91941

Phone: (619) 465-1313

Fax: (619) 465-8429

After Hours Phone: (619)
465-1313

Accepting New Patients: No

NPI: 1003852666

Website: <http://lamesahealthcare.com>

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PARKWAY HILLS NURSING & REHAB

Provider ID: 417047

7760 PARKWAY DR
LA MESA, CA 91942

Phone: (619) 469-0124

Fax: (619) 828-7654

After Hours Phone: (619)
469-0124

Accepting New Patients: No

Hours: M-TH
9:00AM-5:00PM
F 5:00AM-5:00PM

NPI: 1174926448

Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
Site Languages(s) Spoken:
Farsi, Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

SHASTA HOME

Provider ID: 674614

10346 CHALLENGE BLVD
LA MESA, CA 91941

Phone: (619) 465-8010

Fax: (619) 465-8348

After Hours Phone: (619)
465-8010

Accepting New Patients: No

Hours: M-F
8:00AM-5:00PM

NPI: 1134342520

Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

LEMON GROVE

BELLA VISTA HEALTH CENTER

Provider ID: 419062

7922 PALM ST
LEMON GROVE, CA 91945

Phone: (619) 644-1000

Fax: (619) 797-2920

After Hours Phone: (619)
644-1000

Accepting New Patients: No

NPI: 1760709687

D5. 长期支持服务 (LTSS)


I. 长期护理 (LTC) 和专业护理机构 (SNF)

 Website: www.bellavistahealth.com

Credentials and/or certifications:

 Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

LEMON GROVE CARE AND REHAB CTR

Provider ID: 172013


 8351 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 463-0294

Fax: (619) 461-1064

 After Hours Phone: (619) 463-0294


Accepting New Patients: No
NPI: 1336134204

 Website: <http://lemongrovecare.com>

Credentials and/or certifications:

 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


NATIONAL CITY

CASTLE MANOR NURSING AND REHABILITATION CTR

Provider ID: 171978

 541 S V AVE
NATIONAL CITY, CA 91950


 Phone: (619) 791-7900

 After Hours Phone: (619)

791-7900

Accepting New Patients: No

NPI: 1497759856

 Website: www.lifegen.net/castlemanor/index.html

Credentials and/or

certifications:

 Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FRIENDSHIP MANOR NURSING AND REHABILITATION CTR

Provider ID: 171973


 902 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 791-7700


Fax: (619) 791-7791

 After Hours Phone: (619) 791-7700

Accepting New Patients: No

 Hours: M-F
9:00AM-5:00PM

NPI: 1235133687

 Website: www.lifegen.net/friendshipmanor/

Credentials and/or

certifications:


 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


PARADISE VALLEY HEALTH CARE CENTER

Provider ID: 171106

 2575 E 8TH ST

NATIONAL CITY, CA 91950

 Phone: (619) 470-6700

 After Hours Phone: (619) 470-6700

Accepting New Patients: No
NPI: 1275513293


 Website: <http://pvhcc.com>

Credentials and/or

certifications:

 Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


WINDSOR GARDENS CONV CTR OF SAN DIEGO

Provider ID: 172011

 220 E 24TH ST
NATIONAL CITY, CA 91950

 Phone: (619) 474-6741

Fax: (619) 474-1925

 After Hours Phone: (619) 474-6741

Accepting New Patients: No
NPI: 1730176538


 Website: www.windsorcare.com

Credentials and/or

certifications:

 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

OCEANSIDE

LA PALOMA HEALTHCARE CTR

D5. 长期支持服务 (LTSS)

I. 长期护理 (LTC) 和专业护理机构 (SNF)

Provider ID: 172021

3232 THUNDER DR
OCEANSIDE, CA 92056
Phone: (760) 724-2193
After Hours Phone: (760)
724-2193

Accepting New Patients: No
NPI: 1265462436

Website: WWW.LAPALOMA
HEALTHCARE.COM

Credentials and/or
certifications:

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish, Armenian, Korean,
Tagalog

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MCNEALY HOUSE

Provider ID: 662925

4602 ALLENDE AVE
OCEANSIDE, CA 92057
Phone: (760) 721-1706
Fax: (760) 721-9872

After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1962488007

Website: N/A
Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MICHALOWSKI HOME

Provider ID: 662925

4602 ALLENDE AVE
OCEANSIDE, CA 92057
Phone: (760) 721-1706
Fax: (760) 721-9872

After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1962488007

Website: N/A
Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MONARCH HOME

Provider ID: 666883

877 MUIRFIELD DR
OCEANSIDE, CA 92058
Phone: (760) 231-8139
Fax: (760) 529-5148

After Hours Phone: (760)
231-8139

Accepting New Patients: No
Hours: M-F

8:00AM-5:00PM
NPI: 1760660336

Website: N/A
Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

POWAY

BOULDER CREEK POST ACUTE

Provider ID: 276987

12696 MONTE VISTA RD
POWAY, CA 92064
Phone: (858) 487-6242
Fax: (858) 487-4282

After Hours Phone: (858)
487-6242

Accepting New Patients: No
Hours: M-F

8:00AM-5:30PM
NPI: 1073902672

Website: [http://bouldercre
ekpa.com](http://bouldercre
ekpa.com)

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

POWAY HEALTHCARE CENTER

Provider ID: 171989

15632 POMERADO RD
POWAY, CA 92064
Phone: (858) 485-5153
Fax: (858) 485-7694

After Hours Phone: (858)
485-5153

Accepting New Patients: No
NPI: 1407035512

Website: [http://powaycare.
com](http://powaycare.
com)

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

D5. 长期支持服务 (LTSS)

I. 长期护理 (LTC) 和专业护理机构 (SNF)

American Sign Language (ASL): certifications:


N


 Accessibility: CONTACT PROVIDER

THE VILLAS AT POWAY


Provider ID: 172642

 15615 POMERADO RD
POWAY, CA 92064

 Phone: (858) 613-4545

 After Hours Phone: (858)
613-4545

Accepting New Patients: No
NPI: 1619947090

 Website: www.palomarhealth.org/skilled-nursing/villa-pomerado

Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


SAN DIEGO

ACCESS TO INDEPENDENCE

Provider ID: 417267

 8885 RIO SAN DIEGO DR
STE 131


SAN DIEGO, CA 92108

 Phone: (619) 293-3500

Fax: (619) 704-2054

 After Hours Phone: (619)
293-3500

Accepting New Patients: No

 Hours: M-F
8:00AM-5:00PM

NPI: 1083039861

 Website: N/A
Credentials and/or

Site English Spoken: Y

Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

ARROYO VISTA NURSING CTR

Provider ID: 172028


 3022 45TH ST
SAN DIEGO, CA 92105

 Phone: (619) 283-5855


Fax: (619) 284-6327

 After Hours Phone: (619)
283-5855

Accepting New Patients: No

 Hours: SU-SA
9:00AM-5:00PM

NPI: 1487640066

 Website: <http://arroyovistacare.com>

Credentials and/or certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Mandarin, Spanish,
Vietnamese, Arabic,
Tagalog

Cultural Competency: N


American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

BALBOA NURSING AND REHAB CTR


Provider ID: 416840

 3520 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 291-5270

 After Hours Phone: (619)
291-5270

Accepting New Patients: No
NPI: 1578521274

 Website: <http://balboahc.com>

Credentials and/or certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Mandarin, Spanish,
Tagalog, Vietnamese

Cultural Competency: N


American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

BRIGHTON PLACE SAN DIEGO

Provider ID: 402624

 1350 EUCLID AVE
SAN DIEGO, CA 92105

 Phone: (619) 263-2166

 After Hours Phone: (619)
263-2166

Accepting New Patients: No
NPI: 1346258274

 Website: N/A
Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CARMEL MOUNTAIN REHAB AND HEALTHCARE CTR

Provider ID: 171971

 11895 AVENUE OF
INDUSTRY
SAN DIEGO, CA 92128

 Phone: (858) 673-0101

D5. 长期支持服务 (LTSS)

I. 长期护理 (LTC) 和专业护理机构 (SNF)

Fax: (858) 673-8320

☎ After Hours Phone: (858) 673-0101

Accepting New Patients: No

NPI: 1083727093

🌐 Website: <http://carmelmountain.net>

Credentials and/or certifications:

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Tagalog, Armenian, Mandarin, Spanish, Russian, Korean, Vietnamese

Cultural Competency: N

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

GOLDEN HILL POST ACUTE

Provider ID: 614821

📍 1201 34TH ST
SAN DIEGO, CA 92102

☎ Phone: (619) 232-2946

Fax: (619) 702-7358

☎ After Hours Phone: (619) 232-2946

Accepting New Patients: No

NPI: 1598229437

🌐 Website: N/A

Credentials and/or certifications:

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

HILLCREST HEIGHTS

HEALTHCARE CENTER

Provider ID: 509489

📍 4033 6TH AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 297-4086

Fax: (619) 297-9238

☎ After Hours Phone: (619) 297-4086

Accepting New Patients: No

🕒 Hours: M-F
8:00AM-5:00PM

NPI: 1558825067

🌐 Website: N/A

Credentials and/or certifications:

☐ Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

JACOB HEALTH CARE CENTER LLC

Provider ID: 172617

📍 4075 54TH ST
SAN DIEGO, CA 92105

☎ Phone: (619) 582-5168

Fax: (619) 325-0194

☎ After Hours Phone: (619) 582-5168

Accepting New Patients: No

NPI: 1881684900

🌐 Website: www.jacobhealthcare.com

Credentials and/or certifications:

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

MISSION HILLS POST ACUTE CARE

Provider ID: 339053

📍 3680 REYNARD WAY
SAN DIEGO, CA 92103

☎ Phone: (619) 297-4484

Fax: (855) 214-6992

☎ After Hours Phone: (619) 297-4484

Accepting New Patients: No

NPI: 1669875563

🌐 Website: <http://missionhillspostacute.com>

Credentials and/or certifications:

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

RADY CHILDRENS CONVALESCENT HOSPITAL

Provider ID: 172200

📍 8022 BIRMINGHAM DR
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5833

Fax: (858) 966-8558

☎ After Hours Phone: (858) 966-5833

Accepting New Patients: No

NPI: 1992881478

🌐 Website: www.rchsd.org

Credentials and/or

D5. 长期支持服务 (LTSS)

I. 长期护理 (LTC) 和专业护理机构 (SNF)

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

REO VISTA HEALTHCARE CTR

Provider ID: 171993

6061 BANBURY ST
SAN DIEGO, CA 92139

Phone: (619) 475-2211

Fax: (619) 479-9126

After Hours Phone: (619)
475-2211

Accepting New Patients: No

NPI: 1255499174

Website: <http://reovista.com>

Credentials and/or

certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ST PAULS HEALTH CARE CENTER

Provider ID: 288531

235 NUTMEG ST
SAN DIEGO, CA 92103

Phone: (619) 677-3895

After Hours Phone: (619)
677-3895

Accepting New Patients: No

NPI: 1972619104

Website: N/A

Credentials and/or

certifications: CMS

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

THE PAVILION AT OCEAN POINT

Provider ID: 262151

3202 DUKE ST
SAN DIEGO, CA 92110

Phone: (619) 224-4141

After Hours Phone: (619)
224-4141

Accepting New Patients: No

NPI: 1538174990

Website: N/A
Credentials and/or

certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

THE SPRINGS AT PACIFIC REGENT

Provider ID: 172008

3884 NOBEL DR
SAN DIEGO, CA 92122

Phone: (858) 625-8700

Fax: (858) 625-8777

After Hours Phone: (858)
625-8700

Accepting New Patients: No

NPI: 1003198342

Website: N/A
Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

UNIVERSITY CARE CENTER

Provider ID: 172024

5602 UNIVERSITY AVE
SAN DIEGO, CA 92105

Phone: (619) 583-1993

Fax: (619) 501-3559

After Hours Phone: (619)
583-1993

Accepting New Patients: No

NPI: 1871522672

Website: <http://universitycarecenter.com>

Credentials and/or

certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Tagalog, Mandarin,
Russian, Vietnamese, Farsi,
Spanish

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

VILLA RANCHO BERNARDO CARE CENTER

Provider ID: 172009

15720 BERNARDO CENTER
DR

SAN DIEGO, CA 92127

Phone: (858) 672-3900

Fax: (858) 672-9247






After Hours Phone: (858)

D5. 长期支持服务 (LTSS)

I. 长期护理 (LTC) 和专业护理机构 (SNF)






672-3900
Accepting New Patients: No
NPI: 1518063437
 Website: www.villaranchobernardo.com
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

WINDSOR GARDENS CONV AND REHAB OF GOLDEN HILL

Provider ID: 172012
 1201 34TH ST
SAN DIEGO, CA 92102
 Phone: (619) 232-2946
Fax: (310) 595-3529
 After Hours Phone: (619) 232-2946
Accepting New Patients: No
NPI: 1811963028
 Website: <https://windsorgoldenhill.com>
Credentials and/or certifications:
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER






SAN MARCOS

CARLO HOUSE
Provider ID: 662931

 411 CARLO ST
SAN MARCOS, CA 92078
 Phone: (760) 721-1706
Fax: (760) 721-9872
 After Hours Phone: (760) 721-1706
Accepting New Patients: No
NPI: 1962488007
 Website: N/A
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

SANTEE






STANFORD COURT SKILLED NURSING AND REHAB CENTER

Provider ID: 171994
 8778 CUYAMACA ST
SANTEE, CA 92071
 Phone: (619) 449-5555
 After Hours Phone: (619) 449-5555
Accepting New Patients: No
 Hours: SU-SA 8:00AM-5:00PM
NPI: 1184628554
 Website: www.lifegen.net/Stanfordcourt/
Credentials and/or certifications:
 Site English Spoken: Y
 Site Languages(s) Spoken: Tagalog, Spanish
Cultural Competency: N
American Sign Language (ASL):



N
 Accessibility: CONTACT PROVIDER

SPRING VALLEY

AMAYA SPRINGS HEALTH CARE CENTER


Provider ID: 420233
 8625 LAMAR ST
SPRING VALLEY, CA 91977
 Phone: (323) 326-6186
Fax: (619) 461-3575
 After Hours Phone: (323) 326-6186
Accepting New Patients: No
NPI: 1518974542
 Website: N/A
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

BRIGHTON PLACE SPRING VALLEY

Provider ID: 417094
 9009 CAMPO RD
SPRING VALLEY, CA 91977
 Phone: (619) 460-2711
 After Hours Phone: (619) 460-2711
Accepting New Patients: No
NPI: 1780682021
 Website: N/A
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N

D5. 长期支持服务 (LTSS)

I. 长期护理 (LTC) 和专业护理机构 (SNF)


American Sign Language (ASL):  Website: covivingmountmiguel.org

N
 Accessibility: CONTACT PROVIDER

MOUNT MIGUEL COVENANT VILLAGE HEALTH FAC

Provider ID: 171969


 325 KEMPTON ST
SPRING VALLEY, CA 91977

 Phone: (619) 931-1151

Fax: (224) 233-1397

 After Hours Phone: (619) 931-1151

Accepting New Patients: No

 Hours: SU-SA
8:00AM-5:00PM

NPI: 1649375403

 Website: www.mountmiguelcovenantvillage.org

Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


MOUNT MIGUEL COVENANT VILLAGE HEALTH FAC

Provider ID: 171969


 325 KEMPTON ST
SPRING VALLEY, CA 91977

 Phone: (619) 931-1151

Fax: (224) 233-1397

 After Hours Phone: (619) 931-1151

Accepting New Patients: No

 Hours: SU-SA
8:00AM-5:00PM

NPI: 1649375403

Website: covivingmountmiguel.org

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

VALLEY CENTER

AMREEN HOME

Provider ID: 658588

 13873 OAKWOOD GLEN PL
VALLEY CENTER, CA 92082

 Phone: (760) 751-9879

Fax: (760) 749-3019

 After Hours Phone: (760) 751-9879

Accepting New Patients: No
NPI: 1700160405

 Website: N/A
Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

VISTA

ANZA HOUSE

Provider ID: 662920

 1736 ANZA AVE
VISTA, CA 92084


 Phone: (760) 721-1706

Fax: (760) 721-9872

 After Hours Phone: (760)

721-1706

Accepting New Patients: No
NPI: 1962488007

 Website: N/A
Credentials and/or
certifications:


Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

GRACE HOUSE

Provider ID: 662919


 2507 HIBISCUS AVE
VISTA, CA 92081

 Phone: (760) 721-1706

Fax: (760) 721-9872

 After Hours Phone: (760) 721-1706

Accepting New Patients: No
NPI: 1962488007

 Website: N/A
Credentials and/or
certifications:


Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

LA FUENTE POST ACUTE

Provider ID: 429590

 247 E BOBIER DR
VISTA, CA 92084

 Phone: (760) 945-3033

 After Hours Phone: (760) 945-3033

Accepting New Patients: No


 Hours: SU-SA

D5. 长期支持服务 (LTSS)

I. 长期护理 (LTC) 和专业护理机构 (SNF)

8:30AM-5:00PM

NPI: 1366802696

 Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

LIFE CARE CENTER OF VISTA


Provider ID: 171970

 304 N MELROSE DR
VISTA, CA 92083


 Phone: (760) 724-8222
Fax: (760) 941-4870

 After Hours Phone: (760)
724-8222

Accepting New Patients: No

 Hours: SU-SA
9:00AM-5:00PM

NPI: 1811942063

 Website: www.lcca.com
Credentials and/or
certifications:

Site English Spoken: Y
 Site Languages(s) Spoken:
Tagalog

Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

MARSHALL HOUSE


Provider ID: 662924

 758 S MELROSE DR
VISTA, CA 92081

 Phone: (760) 721-1706
Fax: (760) 721-9872

 After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1962488007

 Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

MONTGOMERY HOUSE


Provider ID: 662927

 1658 MONTGOMERY DR
VISTA, CA 92084

 Phone: (760) 721-1706
Fax: (760) 721-9872

 After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1962488007

 Website: N/A
Credentials and/or
certifications:


Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

ORIENTE HOUSE


Provider ID: 662928

 3081 ORIENTE DR
VISTA, CA 92084

 Phone: (760) 721-1706
Fax: (760) 721-9872

 After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1962488007

 Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

SAVA HOME


Provider ID: 669500

 263 AHMU TER
VISTA, CA 92084


 Phone: (760) 305-7052
Fax: (760) 509-4949

 After Hours Phone: (760)
305-7052

Accepting New Patients: No


 Hours: M-F
8:00AM-5:00PM

NPI: 1962541177

 Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

SUSAN PARHAM HOUSING CORPORATION

Provider ID: 662929

 1658 ANZA AVE
VISTA, CA 92084

 Phone: (760) 721-1706
Fax: (760) 721-9872







 After Hours Phone: (760)

D5. 长期支持服务 (LTSS)


I. 长期护理 (LTC) 和专业护理机构 (SNF)





721-1706
Accepting New Patients: No
NPI: 1093137762
 Website: N/A
Credentials and/or
certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

VISTA HEALTHCARE CENTER







Provider ID: 171990
 247 E BOBIER DR
VISTA, CA 92084
 Phone: (760) 945-3033
Fax: (760) 724-3169
 After Hours Phone: (760)
945-3033
Accepting New Patients: No
 Hours: M-F
8:00AM-5:00PM
NPI: 1912189812
 Website: <http://astorhealth.com>
Credentials and/or
certifications:
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: N
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

VISTA HOUSE

Provider ID: 662916
 1768 MONTE MAR RD
VISTA, CA 92084

 Phone: (760) 721-1706
Fax: (760) 721-9872
 After Hours Phone: (760)
721-1706
Accepting New Patients: No
NPI: 1962488007
 Website: N/A
Credentials and/or
certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

VISTA KNOLL SPECIALIZED CARE FACILITY

Provider ID: 172017
 2000 WESTWOOD RD
VISTA, CA 92083
 Phone: (760) 630-2273
Fax: (760) 630-0913
 After Hours Phone: (760)
630-2273
Accepting New Patients: No
 Hours: SU-SA
8:30AM-5:00PM
NPI: 1275533929
 Website: <http://vistaknoll.com>
Credentials and/or
certifications:
 Site English Spoken: Y
 Site Languages(s) Spoken:
Korean, Tagalog,
Vietnamese, Spanish
Cultural Competency: N
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


D5. 长期支持服务 (LTSS)
II. 县居家支持服务 (IHSS)

SAN DIEGO

**AGING & INDEPENDENCE
SERVICES**


Specialty: Case Management


 5560 OVERLAND AVE
SAN DIEGO, CA 92123

 Phone: (858) 495-5885

License Number: 1710308986

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: https://www.sandiegocounty.gov/content/sdc/hhsa/programs/ais/inhome_supportive_services.html

D5. 长期支持服务 (LTSS)

III. 基于社区的成人服务 (CBAS) - 成人日间服务

CHULA VISTA

OPEN ARMS ADHC

Provider ID: 417307

301 E J ST

CHULA VISTA, CA 91910

Phone: (619) 420-1404

Fax: (619) 420-1408

After Hours Phone: (619) 420-1404

Accepting New Patients: No

Hours: M-F
7:00AM-3:00PM

License Number: 060002076

NPI: 1598882169

Accessibility: CONTACT PROVIDER

American Sign Language (ASL):
N

Language line interpreter services: N

Cultural Competency: N

Facility has access to skilled medical interpreters on site?: N

Interpreter Non-English

Languages: N

Website: <http://openarmsadhc.com>

Farsi

Hours: M-F 7:00AM-3:30PM

NPI: 1821125550

Accessibility: CONTACT PROVIDER

American Sign Language (ASL):
N

Language line interpreter services: Y

Cultural Competency: N

Facility has access to skilled medical interpreters on site?: N

Interpreter Non-English

Languages: Y

Website: <https://westernadhc.wordpress.com/>

Website: N/A

MAGNOLIA ADULT DAY HEALTH CARE

Provider ID: 408541

490 N MAGNOLIA AVE
EL CAJON, CA 92020

Phone: (619) 444-1522

Fax: (619) 444-1516

After Hours Phone: (619) 444-1522

Accepting New Patients: No

Hours: M-F
8:00AM-4:00PM

License Number: 60000821

NPI: 1487864468

Accessibility: CONTACT PROVIDER

American Sign Language (ASL):
N

Language line interpreter services: N

Cultural Competency: N

Facility has access to skilled medical interpreters on site?: N

Interpreter Non-English

Languages: N

Website: <http://magnoliaadhc.com>

EL CAJON ADHC

Provider ID: 637126

854 JACKMAN ST
EL CAJON, CA 92020

Phone: (619) 328-2112

Fax: (619) 328-0069

After Hours Phone: (619) 328-2112

Accepting New Patients: No

Hours: SU-SA
9:00AM-3:00PM

License Number: 550008511

NPI: 1184207631

Accessibility: CONTACT PROVIDER

American Sign Language (ASL):
N

Language line interpreter services: N

Cultural Competency: N

Facility has access to skilled medical interpreters on site?: N

Interpreter Non-English

Languages: N

EL CAJON

WESTERN ADHC

Provider ID: 417305

240 S MAGNOLIA AVE
EL CAJON, CA 92020

Phone: (619) 631-7222

Fax: (619) 631-9228

After Hours Phone: (619) 631-7222

Accepting New Patients: No

Site Languages(s) Spoken: Spanish, Arabic, Tagalog,

LA MESA

GOLDEN LIFE ADHC

Provider ID: 619502

9158 FLETCHER PKWY
LA MESA, CA 91942

Phone: (619) 357-7753

Fax: (619) 439-6038



After Hours Phone: (619) 357-7753

Accepting New Patients: No

NPI: 1093921900





D5. 长期支持服务 (LTSS)


III. 基于社区的成人服务 (CBAS) - 成人日间服务

 *Accessibility: CONTACT PROVIDER*
American Sign Language (ASL): N
Language line interpreter services: N
Cultural Competency: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: N
 Website: N/A

NATIONAL CITY

HORIZON CBAS

Provider ID: 642082
 1035 HARBISON AVE
NATIONAL CITY, CA 91950
 Phone: (619) 474-1822
 After Hours Phone: (619) 474-1822
Accepting New Patients: No
License Number: 060000582
NPI: 1396476388
 *Accessibility: CONTACT PROVIDER*


American Sign Language (ASL): N
Language line interpreter services: N
Cultural Competency: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: N
 Website: N/A

POWAY

POWAY ADULT DAY HEALTH





CARE CENTER

Provider ID: 404183
 12250 CROSTHWAITE CIR
POWAY, CA 92064
 Phone: (858) 748-5044
Fax: (858) 748-5405
 After Hours Phone: (858) 748-5044
Accepting New Patients: No
License Number: 60000822
NPI: 1568659977
 *Accessibility: CONTACT PROVIDER*


American Sign Language (ASL): N
Language line interpreter services: N
Cultural Competency: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: N
 Website: N/A

SAN DIEGO






CASA PACIFICA ADHCC



Provider ID: 417303
 1424 30TH ST STE C
SAN DIEGO, CA 92154
 Phone: (619) 424-8181
 After Hours Phone: (619) 424-8181
Accepting New Patients: No
NPI: 1609920305
 *Accessibility: CONTACT PROVIDER*

American Sign Language (ASL): N
Language line interpreter services: N
Cultural Competency: N


Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: N
 Website: www.casa-pacific.com

SAN DIEGO FAMILY CIRCLE ADULT DAY HEALTH CARE

Provider ID: 539018
 4428 CONVOY ST STE 288
SAN DIEGO, CA 92111
 Phone: (858) 244-4555
Fax: (858) 724-3302
 After Hours Phone: (858) 244-4555
Accepting New Patients: No
 *Site Language(s) Spoken: Vietnamese, Mandarin, Spanish*
 *Hours: M-F 8:00AM-5:00PM*
License Number: 550005837
NPI: 1396201828






 *Accessibility: CONTACT PROVIDER*
American Sign Language (ASL): N
Language line interpreter services: Y
Cultural Competency: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: Y
 Website: Sandiegofamilycircle.com

LOVING CARE ADHC

Provider ID: 419961
 2565 CAMINO DEL RIO S
STE 201






D5. 长期支持服务 (LTSS)

III. 基于社区的成人服务 (CBAS) - 成人日间服务

SAN DIEGO, CA 92108
 Phone: (619) 718-9777
Fax: (619) 569-2855
 After Hours Phone: (619)
718-9777
Accepting New Patients: No
 Hours: SU-SA
8:30AM-4:00PM
NPI: 1346455961
 Accessibility: CONTACT
PROVIDER
American Sign Language (ASL):
N
Language line interpreter
services: N
Cultural Competency: N
Facility has access to skilled
medical interpreters on site?: N
Interpreter Non-English
Languages: N
 Website: www.americaread
hc.com

SAN MARCOS

AMERICARE ADULT DAY HEALTH CARE CENTER

Provider ID: 420060
 340 RANCHEROS DR STE
196
SAN MARCOS, CA 92069
 Phone: (760) 682-2424
Fax: (760) 471-5104
 After Hours Phone: (760)
682-2424
Accepting New Patients: No
 Hours: 24 Hours / 7
days/week
License Number: 060000832
NPI: 1528271186
 Accessibility: CONTACT
PROVIDER

D6. 心理健康提供者名录

ALPINE

KHALEEL, AMMAR

Provider Gender: Male

License Number: LCS110302

NPI: 1841744208

Provider English Spoken: Y

Provider Language(s) Spoken:

Arabic

Cultural Competency: N

AMMAR KHALEEL

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

TORRES, RANDALL

Provider Gender: Male

License Number: PSY31823

NPI: 1871696435

Provider English Spoken: Y

Cultural Competency: N

RANDALL P TORRES

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 12\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CHULA VISTA

BAYLON, ALDO

Provider Gender: Male

License Number: PSY29904

NPI: 1649429150

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

ALDO BAYLON

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 14\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 8:00AM-4:00PM

CASTLEBERRY, DANI

Provider Gender: Female

License Number: LCS95022

NPI: 1053706853

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

DANI E CASTLEBERRY

780 BAY BLVD STE 200
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 240-7825

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

CELAYA, PATRICIA

Provider Gender: Female

License Number: PSY33233

NPI: 1952656902

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N







PATRICIA E CELAYA

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184





D6. 心理健康提供者名录

 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-8:00PM SA 8:00AM-4:00PM


GALLO, LINDA


Provider Gender: Female
License Number: PSY27375
NPI: 1427773621
Provider English Spoken: Y
Cultural Competency: N
LINDA C GALLO
 780 BAY BLVD STE 200 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (619) 240-7852
 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

GOULD, HILARY

Provider Gender: Female
License Number: PSY31088
NPI: 1104297696
Provider English Spoken: Y
Cultural Competency: N
HILARY GOULD
 678 3RD AVE CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (619) 271-0260
 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 10:00AM-4:00PM M-F 8:30AM-5:30PM SA 8:00AM-2:30PM

JUAREZ, AMERICA

Provider Gender: Female
License Number: LCS92516
NPI: 1386281541
Provider English Spoken: Y
Cultural Competency: N
AMERICA P JUAREZ
 678 3RD AVE CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (619) 425-1184
 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y

TDD: U
Min/Max Age: 5\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

KURZ, TROY

Provider Gender: Male
License Number: A157190
NPI: 1154862357
Provider English Spoken: Y
Cultural Competency: N
TROY L KURZ
 678 3RD AVE CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (619) 425-6941
 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-8:00PM SA 8:00AM-4:00PM

MALAK, LAWRENCE

Provider Gender: Male
License Number: A115345
NPI: 1467773028
Provider English Spoken: Y
Cultural Competency: N

D6. 心理健康提供者名录

LAWRENCE T MALAK

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MARTINEZ, STEPHANIE

Provider Gender: Female

License Number: A152787

NPI: 1699126367

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

STEPHANIE MARTINEZ

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-4:00PM

M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

SHIELDS, SEBASTIAN

Provider Gender: Male

License Number: MFC124495

NPI: 1558895342

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

SEBASTIAN L SHIELDS

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

TROYER, EMILY

Provider Gender: Female

License Number: A149101

NPI: 1326484437

Provider English Spoken: Y

Cultural Competency: N

EMILY A TROYER

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 8:00AM-4:00PM

WIJAYARATNE, IMANIE

Provider Gender: Female

License Number: PSY25044

NPI: 1932358355

Provider English Spoken: Y

Cultural Competency: N

IMANIE S WIJAYARATNE

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 245-1184

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 5\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

D6. 心理健康提供者名录

EL CAJON

ARAIZA, ERNESTINA

Provider Gender: Female
License Number: PSY32549
NPI: 1568608636
Provider English Spoken: Y
Cultural Competency: N
ERNESTINA ARAIZA
📍 875 EL CAJON BLVD
EL CAJON, CA 92020
☎ Phone: (619) 662-4100
📠 Fax: (619) 785-3356
📞 After Hours Phone: (619)
662-4100
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

ARNOLD, REBECCA

Provider Gender: Female
License Number: MFC95778
NPI: 1225580350
Provider English Spoken: Y
Cultural Competency: N
REBECCA L ARNOLD
📍 855 E MADISON AVE
EL CAJON, CA 92020
☎ Phone: (619) 270-3600
📠 Fax: (360) 462-2746
📞 After Hours Phone: (619)
270-3600
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:

Japanese, Spanish, Italian,
Chinese, Farsi, Arabic,
Mandarin

TDD: U
Min/Max Age: 4\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM

ARNOLD, REBECCA

Provider Gender: Female
License Number: MFC95778
NPI: 1225580350
Provider English Spoken: Y
Cultural Competency: N
REBECCA L ARNOLD
📍 855 E MADISON AVE
EL CAJON, CA 92020
☎ Phone: (619) 270-3600
📠 Fax: (360) 462-2746
📞 After Hours Phone: (619)
270-3600
🌐 Website: N/A
Accepting New Patients: Yes

📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Japanese, Spanish, Italian,
Chinese, Farsi, Arabic,
Mandarin
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM





CASEY, SHANNON

Provider Gender: Female
License Number: PSY31889
NPI: 1548873755
Provider English Spoken: Y
Provider Language(s) Spoken:
Sign Language
Cultural Competency: N
SHANNON K CASEY
📍 215 W MADISON AVE
EL CAJON, CA 92020
☎ Phone: (760) 737-6935
📠 Fax: (760) 741-2782
📞 After Hours Phone: (760)
737-6935
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
9:00AM-7:00PM







CASEY, SHANNON

Provider Gender: Female
License Number: PSY31889
NPI: 1548873755
Provider English Spoken: Y
Provider Language(s) Spoken:
Sign Language
Cultural Competency: N
SHANNON K CASEY
📍 215 W MADISON AVE
EL CAJON, CA 92020
☎ Phone: (760) 737-6935
📠 Fax: (760) 741-2782
📞 After Hours Phone: (760)
737-6935

D6. 心理健康提供者名录

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-7:00PM

CRUZ, GUADALUPE








Provider Gender: Male
License Number: LCS101900
NPI: 1649727942
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
GUADALUPE A CRUZ
 855 E MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 440-2751
Fax: (360) 462-2746
 After Hours Phone: (619)
440-2751
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

GUARDADO-SOTO, RAQUEL

Provider Gender: Female
License Number: PSY26883
NPI: 1194999276

Provider English Spoken: Y
Cultural Competency: N
RAQUEL GUARDADO-SOTO
 855 E MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 440-2751
Fax: (360) 462-2746
 After Hours Phone: (619)
440-2751
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 13\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

MANUEL, FRANCESCA

Provider Gender: Female
License Number: LCS107210
NPI: 1275097081
Provider English Spoken: Y
Cultural Competency: N
FRANCESCA A MANUEL
 215 W MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 667-6125
Fax: (619) 590-9036
 After Hours Phone: (619)
667-6125
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Language(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
8:00AM-5:00PM




MAXWELL-JUNGE, MELISSA

Provider Gender: Female
License Number: LCS90791
NPI: 1275182826
Provider English Spoken: Y
Cultural Competency: N
MELISSA K MAXWELL-JUNGE
 215 W MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 667-6125
Fax: (619) 590-9036
 After Hours Phone: (619)
667-6125
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

POSTLETHWAITE, ALEJANDRA

Provider Gender: Female
License Number: A88938
NPI: 1750566915
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
ALEJANDRA POSTLETHWAITE
 855 E MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 440-2751
Fax: (858) 633-4692
 After Hours Phone: (619)

D6. 心理健康提供者名录

440-2751
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

SADDA, REEM








Provider Gender: Female
License Number: A163129
NPI: 1871921833
Provider English Spoken: Y
Provider Language(s) Spoken:
Arabic
Cultural Competency: N
REEM J SADDA

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

WEAVER, AMANDA

Provider Gender: Female
License Number: MFC105361
NPI: 1174266423


Provider English Spoken: Y
Cultural Competency: N
AMANDA R WEAVER

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Language(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

WHEELER, KIM

Provider Gender: Female
License Number: PSY34237
NPI: 1700577434









Provider English Spoken: Y
Cultural Competency: N
KIM N WHEELER
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
Fax: (619) 785-3356
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 11\999
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
8:00AM-5:00PM

ENCINITAS

GARCIA, ROSEMARIE


Provider Gender: Female
License Number: MFC123590
NPI: 1710410980

Provider English Spoken: Y
Cultural Competency: N
ROSEMARIE C GARCIA
 1130 2ND ST
ENCINITAS, CA 92024
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760)
736-6767
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Language(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM







GOMEZ, JUANITA

Provider Gender: Female
License Number: PSY27439
NPI: 1790915759
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
JUANITA GOMEZ

D6. 心理健康提供者名录








 1505 ENCINITAS BLVD
ENCINITAS, CA 92024
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

LOPEZ, JOANNA




Provider Gender: Female
License Number: MFC50381
NPI: 1275664385
Provider English Spoken: Y
Cultural Competency: N
JOANNA M LOPEZ
 1130 2ND ST
ENCINITAS, CA 92024
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760)
736-6767
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM





ESCONDIDO

ARLINGHAUS, RENE







Provider Gender: Female
License Number: LCS80909
NPI: 1568973964
Provider English Spoken: Y
Cultural Competency: N
RENE M ARLINGHAUS
 704 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (619) 662-4100
Fax: (619) 662-4196
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

BECERRA, GABRIEL

Provider Gender: Male
License Number: LCS114743
NPI: 1205313319
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
GABRIEL CELESTINO
BECERRA
 425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8300
Fax: (858) 633-4698
 After Hours Phone: (760)
520-8300

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M 7:00AM-7:30PM
TU 7:00AM-4:30PM
W 7:00AM-7:30PM
TH-F 7:00AM-4:30PM

BELINSKY, MARIA

Provider Gender: Female
License Number: LCS69175
NPI: 1760867824
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
MARIA T BELINSKY
 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
Fax: (360) 462-2748
 After Hours Phone: (760)
737-6900
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

BELINSKY, MARIA

Provider Gender: Female
License Number: LCS69175

D6. 心理健康提供者名录

NPI: 1760867824

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

MARIA T BELINSKY

460 N ELM ST
ESCONDIDO, CA 92025

Phone: (760) 520-8100

Fax: (360) 462-2745

After Hours Phone: (760)
520-8100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

BELINSKY, MARIA

Provider Gender: Female

License Number: LCS69175

NPI: 1760867824

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

MARIA T BELINSKY

426 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 690-5900

Fax: (858) 633-4693

After Hours Phone: (760)
690-5900

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 9:00AM-4:00PM
W-F 9:00AM-4:00PM

CARLTON-PENN, CORNELIA

Provider Gender: Female

License Number: PSY14310

NPI: 1891720611

Provider English Spoken: Y

Provider Language(s) Spoken:
German

Cultural Competency: N

CORNELIA J CARLTON-PENN

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8340

Fax: (858) 633-4698

After Hours Phone: (760)
520-8340

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

CHRISTENSEN, PATTI

Provider Gender: Female

License Number: LCS24129

NPI: 1245434745

Provider English Spoken: Y

Cultural Competency: N

PATTI J CHRISTENSEN

1002 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (760) 741-2660

After Hours Phone: (760)
741-2660

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

DOCKERY, LEE

Provider Gender: Male

License Number: A178136

NPI: 1225526320

Provider English Spoken: Y

Cultural Competency: N

LEE M DOCKERY

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8300

Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

D6. 心理健康提供者名录

8:00AM-5:00PM

ESTRADA PATINO, ANGELA

Provider Gender: Female
License Number: PSY31789
NPI: 1629339015
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N

ANGELA J ESTRADA PATINO

460 N ELM ST
ESCONDIDO, CA 92025

Phone: (760) 520-8100
Fax: (360) 462-2745

After Hours Phone: (760)
520-8100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 14\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-0:00PM

FU, KATHERINE

Provider Gender: Female
License Number: A187562
NPI: 1356877807
Provider English Spoken: Y
Cultural Competency: N

KATHERINE FU

704 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (619) 662-4100

Fax: (619) 662-4196

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

GUZZO, RICHARD

Provider Gender: Male
License Number: LCS8288
NPI: 1497898431
Provider English Spoken: Y
Cultural Competency: N

RICHARD L GUZZO

1002 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (760) 741-2660
After Hours Phone: (760)
741-2660

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

HARRIS, LAURA

Provider Gender: Female
License Number: LCS18214
NPI: 1255640280

Provider English Spoken: Y
Cultural Competency: N
LAURA S HARRIS

1002 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (760) 741-2660
Fax: (760) 741-2642

After Hours Phone: (760)
741-2660

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

KULKARNI, NISHAT

Provider Gender: Male
License Number: A187134
NPI: 1669034732

Provider English Spoken: Y
Cultural Competency: N

NISHAT KULKARNI

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8300
Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

D6. 心理健康提供者名录


TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

MAGOS, DANIEL

Provider Gender: Male

License Number: LCS88270

NPI: 1578983664


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

DANIEL K MAGOS

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8300

Fax: (858) 633-4698

 After Hours Phone: (760)
520-8300

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

MARTINEZ, NORAYMA

Provider Gender: Female

License Number: LCS100019


NPI: 1669808267

Provider English Spoken: Y

Cultural Competency: N


NORAYMA MARTINEZ

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900


Fax: (360) 462-2748

 After Hours Phone: (760)
737-6900

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Language(s) Spoken:
Spanish


TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

POSTLETHWAITE, ALEJANDRA

Provider Gender: Female

License Number: A88938

NPI: 1750566915


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ALEJANDRA POSTLETHWAITE

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8300

Fax: (858) 633-4698

 After Hours Phone: (760)
520-8300

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PRASAD, AMITHA

Provider Gender: Female

License Number: A158657

NPI: 1821436882


Provider English Spoken: Y

Cultural Competency: N

AMITHA, PRASAD

 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

 Phone: (760) 294-9270

Fax: (760) 294-9268

 After Hours Phone: (760)
294-9270

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

RIOS, SIERRA

Provider Gender: Female

License Number: LCS91970

NPI: 1942746128


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

SIERRA K RIOS

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8340

Fax: (360) 462-2752

D6. 心理健康提供者名录

📞 After Hours Phone: (760) 520-8340

🌐 Website: N/A

Accepting New Patients: Yes

📄 Site English Spoken: Y

📄 Site Language(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

ROBLEDO, DAMIAN

Provider Gender: Male

License Number: LCS66152

NPI: 1376831289

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

DAMIAN ROBLEDO

📍 425 N DATE ST ESCONDIDO, CA 92025

📞 Phone: (760) 520-8340

Fax: (360) 462-2752

📞 After Hours Phone: (760) 520-8340

🌐 Website: N/A

Accepting New Patients: Yes

📄 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 7:00AM-7:30PM TU 7:00AM-4:30PM

W 7:00AM-7:30PM

TH-F 7:00AM-4:30PM

RODARTE, GABRIEL

Provider Gender: Male

License Number: A87906

NPI: 1184649212

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

GABRIEL RODARTE

📍 425 N DATE ST ESCONDIDO, CA 92025

📞 Phone: (760) 520-8340

Fax: (858) 633-4698

📞 After Hours Phone: (760) 520-8340

🌐 Website: N/A

Accepting New Patients: Yes

📄 Site English Spoken: Y

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

STONE, CALVIN

Provider Gender: Male

License Number: 20A18127

NPI: 1275995870

Provider English Spoken: Y

Cultural Competency: N

CALVIN T STONE

📍 425 N DATE ST ESCONDIDO, CA 92025

📞 Phone: (760) 520-8300

Fax: (858) 633-4698

📞 After Hours Phone: (760) 520-8300

🌐 Website: N/A

Accepting New Patients: Yes

📄 Site English Spoken: Y

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

STREET, KYLE

Provider Gender: Male

License Number: 20A21304

NPI: 1457912131

Provider English Spoken: Y

Cultural Competency: N

KYLE A STREET

📍 425 N DATE ST ESCONDIDO, CA 92025

📞 Phone: (760) 520-8300

Fax: (858) 633-4698

📞 After Hours Phone: (760) 520-8300

🌐 Website: N/A

Accepting New Patients: Yes

📄 Site English Spoken: Y

📄 Site Language(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

SUOZZO, JOSEPH

Provider Gender: Male

License Number: PSY18393

D6. 心理健康提供者名录

NPI: 1821013228

Provider English Spoken: Y

Cultural Competency: N

JOSEPH M SUOZZO

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8340

Fax: (858) 633-4698

After Hours Phone: (760)
520-8340

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

TEETER-WITT, ALYSSA

Provider Gender: Female

License Number: PSY31075

NPI: 1932308442

Provider English Spoken: Y

Cultural Competency: N

ALYSSA TEETER-WITT

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8300

Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

TEETER-WITT, ALYSSA

Provider Gender: Female

License Number: PSY31075

NPI: 1932308442

Provider English Spoken: Y

Cultural Competency: N

ALYSSA TEETER-WITT

426 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 690-5900

Fax: (858) 633-4693

After Hours Phone: (760)
690-5900

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

THOMAS, PAULA

Provider Gender: Female

License Number: LCS29517

NPI: 1821389966

Provider English Spoken: Y

Cultural Competency: N

PAULA M THOMAS

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8340

Fax: (360) 462-2752

After Hours Phone: (760)
520-8340

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish, German, French,

Cappadocian Greek, Hindi
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

VALLEZ-BARLAM, ANDREA

Provider Gender: Female

License Number: PSY9962

NPI: 1710902143

Provider English Spoken: Y

Provider Language(s) Spoken:

German, Spanish

Cultural Competency: N

ANDREA VALLEZ-BARLAM

426 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 690-5900

Fax: (858) 633-4693

After Hours Phone: (760)
690-5900

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

VALLEZ-BARLAM, ANDREA

Provider Gender: Female

License Number: PSY9962

NPI: 1710902143

Provider English Spoken: Y

Provider Language(s) Spoken:

D6. 心理健康提供者名录

German, Spanish

Cultural Competency: N

ANDREA VALLEZ-BARLAM

488 E VALLEY PKWY STE
404

ESCONDIDO, CA 92025

Phone: (760) 466-9800

Fax: (858) 633-4693

After Hours Phone: (760)
466-9800

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
German, Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

VAQUERO, JUANA

Provider Gender: Female

License Number: PSY28364

NPI: 1023459708

Provider English Spoken: Y

*Provider Language(s) Spoken:
Spanish*

Cultural Competency: N

JUANA VAQUERO

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8300

Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

VENNAM, VAMSIKRISHNA

Provider Gender: Male

License Number: 20A19415

NPI: 1679070569

Provider English Spoken: Y

Cultural Competency: N

VAMSIKRISHNA K VENNAM

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8300
Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

WOODWORTH, JENNIFER

Provider Gender: Female

License Number: PSY26963

NPI: 1639362494

Provider English Spoken: Y

Cultural Competency: N

JENNIFER WOODWORTH

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8340

Fax: (858) 633-4698

After Hours Phone: (760)
520-8340

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FALLBROOK

GILROY, LAURA

Provider Gender: Female

License Number: LCS27123

NPI: 1437427978

Provider English Spoken: Y

*Provider Language(s) Spoken:
Spanish*

Cultural Competency: N

LAURA L GILROY

1328 S MISSION RD
FALLBROOK, CA 92028

Phone: (760) 451-4720

Fax: (760) 457-4700

After Hours Phone: (760)
451-4720

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 7\999


American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MAGEE, ANNA





D6. 心理健康提供者名录

Provider Gender: Female
License Number: LCS107407
NPI: 1194234609
Provider English Spoken: Y
Cultural Competency: N
ANNA M MAGEE






 1328 S MISSION RD
FALLBROOK, CA 92028
 Phone: (760) 451-4720
Fax: (760) 457-4700
 After Hours Phone: (760)
451-4720
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Language(s) Spoken:
Spanish
TDD: U
Min/Max Age: 5\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

MCAULEY, ROBERT



Provider Gender: Male
License Number: G23317
NPI: 1194881888
Provider English Spoken: Y
Cultural Competency: N
ROBERT A MCAULEY
 1328 S MISSION RD
FALLBROOK, CA 92028
 Phone: (760) 451-4730
Fax: (760) 457-4700
 After Hours Phone: (760)
451-4730
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 12\999

American Sign Language (ASL):  After Hours Phone: (760)
541-4730
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

MILES, RENEE






Provider Gender: Female
License Number: LCS70204
NPI: 1053763623
Provider English Spoken: Y
Cultural Competency: N
RENEE S MILES
 1328 S MISSION RD
FALLBROOK, CA 92028
 Phone: (760) 451-4720
Fax: (760) 457-4700
 After Hours Phone: (760)
451-4720
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

RODARTE, GABRIEL

Provider Gender: Male
License Number: A87906
NPI: 1184649212
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
GABRIEL RODARTE
 1328 S MISSION RD
FALLBROOK, CA 92028
 Phone: (760) 541-4730
Fax: (760) 457-4700

IMPERIAL BEACH

GONZALEZ, CLAUDIA

Provider Gender: Female
License Number: LCS100328
NPI: 1770055543
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
CLAUDIA GONZALEZ
 949 PALM AVE
IMPERIAL BEACH, CA 91932
 Phone: (619) 429-3733
Fax: (619) 628-5550
 After Hours Phone: (619)
429-3733
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

LA JOLLA


BAILIS, JESSICA


D6. 心理健康提供者名录

Provider Gender: Female
License Number: PSY27537
NPI: 1760739049

Provider English Spoken: Y
Cultural Competency: N
JESSICA R BAILIS


 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*


 *Website: N/A*

Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


BOOTH, CHRISTOPHER


Provider Gender: Male
License Number: PSY26073
NPI: 1568893162


Provider English Spoken: Y
Cultural Competency: N

CHRISTOPHER R BOOTH


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

Accepting New Patients: Yes


 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*

PROVIDER

 *Hours: M-F*
8:00AM-5:00PM


BOOTH, CHRISTOPHER


Provider Gender: Male
License Number: PSY26073
NPI: 1568893162

Provider English Spoken: Y
Cultural Competency: N

CHRISTOPHER R BOOTH


 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*


Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM


BOUTELLE, KERRI


Provider Gender: Male
License Number: PSY21823
NPI: 1780620906

Provider English Spoken: Y
Cultural Competency: N

KERRI N BOUTELLE


 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*


 *Website: N/A*


Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM


BOUTELLE, KERRI

Provider Gender: Male
License Number: PSY21823
NPI: 1780620906

Provider English Spoken: Y
Cultural Competency: N

KERRI N BOUTELLE


 3344 N TORREY PINES CT
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

BOUTELLE, KERRI

Provider Gender: Male
License Number: PSY21823
NPI: 1780620906

Provider English Spoken: Y
Cultural Competency: N

D6. 心理健康提供者名录

KERRI N BOUTELLE

8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037

Phone: (858) 246-1654

After Hours Phone: (858)
246-1654

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

CHESHER, NICHOLAS

Provider Gender: Male

License Number: PSY29290

NPI: 1124539697

Provider English Spoken: Y

Cultural Competency: N

NICHOLAS J CHESHER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

CRANDAL, BRENT

Provider Gender: Male

License Number: PSY26294

NPI: 1588739452

Provider English Spoken: Y

Cultural Competency: N

BRENT R CRANDAL

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

DUARTE, KRISTEN

Provider Gender: Female

License Number: PSY31227

NPI: 1093119364

Provider English Spoken: Y

Cultural Competency: N

KRISTEN L DUARTE

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

DUARTE, KRISTEN

Provider Gender: Female

License Number: PSY31227

NPI: 1093119364

Provider English Spoken: Y

Cultural Competency: N

KRISTEN L DUARTE

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

EICHEN, DAWN

Provider Gender: Female

License Number: PSY27823

NPI: 1861043366

Provider English Spoken: Y

Cultural Competency: N

DAWN M EICHEN

8950 VILLA LA JOLLA DR
STE C212

D6. 心理健康提供者名录

LA JOLLA, CA 92037
☎ Phone: (858) 246-1654
Fax: (858) 246-3181
🕒 After Hours Phone: (858) 246-1654
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM

EICHEN, DAWN

Provider Gender: Female
License Number: PSY27823
NPI: 1861043366
Provider English Spoken: Y
Cultural Competency: N
DAWN M EICHEN
📍 3344 N TORREY PINES CT
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

EICHEN, DAWN

Provider Gender: Female

License Number: PSY27823
NPI: 1861043366
Provider English Spoken: Y
Cultural Competency: N
DAWN M EICHEN
📍 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM

ELLEDDGE, LINDSAY

Provider Gender: Female
License Number: LCS96136
NPI: 1619428828
Provider English Spoken: Y
Cultural Competency: N
LINDSAY E ELLEDGE
📍 8950 VILLA LA JOLLA DR
STE 101
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

FINN, DAPHNA

Provider Gender: Female
License Number: A152291
NPI: 1639522725
Provider English Spoken: Y
Cultural Competency: N
DAPHNA M FINN
📍 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM

HUEGE, STEVEN

Provider Gender: Male
License Number: C141122
NPI: 1598716367
Provider English Spoken: Y
Cultural Competency: N
STEVEN F HUEGE
📍 8950 VILLA LA JOLLA DR
STE C101

D6. 心理健康提供者名录

LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
🌐 Website: N/A
Accepting New Patients: Yes
🗎 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM

HUEGE, STEVEN

Provider Gender: Male
License Number: C141122
NPI: 1598716367
Provider English Spoken: Y
Cultural Competency: N
STEVEN F HUEGE
📍 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
🌐 Website: N/A
Accepting New Patients: Yes
🗎 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM

KHAFAJA, MOHAMAD

Provider Gender: Male
License Number: A115892
NPI: 1780867119
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
MOHAMAD H KHAFAJA
📍 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
🌐 Website: N/A
Accepting New Patients: Yes
🗎 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM

LASSWELL, EVE

Provider Gender: Female
License Number: PSY30220
NPI: 1013483635
Provider English Spoken: Y
Cultural Competency: N
EVE N LASSWELL
📍 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
📞 After Hours Phone: (800) 926-8273
🌐 Website: N/A

Accepting New Patients: Yes
🗎 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM

LEDBETTER, ALEX

Provider Gender: Male
License Number: 20A20454
NPI: 1073017315
Provider English Spoken: Y
Cultural Competency: N
ALEX W LEDBETTER
📍 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
📞 After Hours Phone: (800) 926-8273
🌐 Website: N/A
Accepting New Patients: Yes
🗎 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

LEE, DAVID

Provider Gender: Male
License Number: A124329
NPI: 1871884130
Provider English Spoken: Y
Provider Language(s) Spoken: Korean

D6. 心理健康提供者名录

Cultural Competency: N

DAVID J LEE

9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

LI, XIA

Provider Gender: Female

License Number: A163344

NPI: 1336670413

Provider English Spoken: Y

Provider Language(s) Spoken:

Mandarin

Cultural Competency: N

XIA LI

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

LINKE, SARAH

Provider Gender: Female

License Number: PSY27116

NPI: 1487026415

Provider English Spoken: Y

Cultural Competency: N

SARAH E LINKE

8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

MAGINOT-CHESHER, TAMARA

Provider Gender: Female

License Number: PSY28678

NPI: 1043441165

Provider English Spoken: Y

Cultural Competency: N

TAMARA R MAGINOT

CHESHER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 534-7792

Fax: (619) 471-9017

After Hours Phone: (858)
534-7792

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

MARTINEZ, STEPHANIE

Provider Gender: Female

License Number: A152787

NPI: 1699126367

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

STEPHANIE MARTINEZ

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

D6. 心理健康提供者名录

MAXWELL, BENJAMIN

Provider Gender: Male

License Number: A108124

NPI: 1740415926

Provider English Spoken: Y

Cultural Competency: N

BENJAMIN K MAXWELL

8950 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (858) 534-8019

Fax: (858) 534-6727

After Hours Phone: (858)
534-8019

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

MENDEZ, ANDRES

Provider Gender: Male

License Number: PSY28907

NPI: 1841482692

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ANDRES G MENDEZ

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

MOORE, SHAVON

Provider Gender: Female

License Number: A152789

NPI: 1053682773

Provider English Spoken: Y

Cultural Competency: N

SHAVON C MOORE

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

MOORE, SHAVON

Provider Gender: Female

License Number: A152789

NPI: 1053682773

Provider English Spoken: Y

Cultural Competency: N

SHAVON C MOORE

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 826-8273
Fax: (888) 539-8781

After Hours Phone: (800)
826-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

NGUYEN, HOANG

Provider Gender: Male

License Number: G83977

NPI: 1720011620

Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: N

HOANG A NGUYEN

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (619) 497-6673
After Hours Phone: (619)
497-6673

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT

D6. 心理健康提供者名录

 **PROVIDER**
Hours: M-F
8:00AM-5:00PM


NGUYEN, HOANG


Provider Gender: Male
License Number: G83977
NPI: 1720011620
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese


Cultural Competency: N

HOANG A NGUYEN


 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273


 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

PELHAM, WILLIAM

Provider Gender: Male
License Number: PSY33091
NPI: 1306629399


Provider English Spoken: Y

Cultural Competency: N


WILLIAM E PELHAM

 8950 VILLA LA JOLLA DR
STE C101


LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

QAYOUMI, WALI

Provider Gender: Male

License Number: A168429

NPI: 1093178220

Provider English Spoken: Y


Provider Language(s) Spoken:
French

Cultural Competency: N

WALI Z QAYOUMI

 9350 CAMPUS POINT DR
STE LLB

LA JOLLA, CA 92037


 Phone: (619) 284-3746

Fax: (888) 579-8781

 After Hours Phone: (619)
284-3746

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

QAYOUMI, WALI

Provider Gender: Male

License Number: A168429

NPI: 1093178220


Provider English Spoken: Y

Provider Language(s) Spoken:
French

Cultural Competency: N

WALI Z QAYOUMI

 9500 GILMAN DR STE 2069
LA JOLLA, CA 92093


 Phone: (858) 822-5881

Fax: (888) 539-8781

 After Hours Phone: (858)
822-5881

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

REED, KRISTIE

Provider Gender: Female

License Number: PSY30934

NPI: 1679869556


Provider English Spoken: Y

Cultural Competency: N

KRISTIE L REED

 8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037

 Phone: (800) 926-8372

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y

D6. 心理健康提供者名录

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REED, KRISTIE

Provider Gender: Female

License Number: PSY30934

NPI: 1679869556

Provider English Spoken: Y

Cultural Competency: N

KRISTIE L REED

 3344 N TORREY PINES CT
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

RICHARD, MARLA

Provider Gender: Female

License Number: G65188

NPI: 1578720934


Provider English Spoken: Y

Cultural Competency: N


MARLA G RICHARD

 8950 VILLA LA JOLLA DR
STE C101


LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

RICHARD, MARLA

Provider Gender: Female

License Number: G65188


NPI: 1578720934


Provider English Spoken: Y

Cultural Competency: N

MARLA G RICHARD


 9300 MEDIAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

SCHNEEBERGER, ANDRES

Provider Gender: Male

License Number: C175502

NPI: 1184867376

Provider English Spoken: Y

Cultural Competency: N

ANDRES R SCHNEEBERGER

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

TARLE, STEPHANIE

Provider Gender: Female

License Number: PSY32155

NPI: 1659920403


Provider English Spoken: Y

Cultural Competency: N

STEPHANIE J TARLE

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

D6. 心理健康提供者名录

PROVIDER

TARVER, LESLIE

Provider Gender: Female
License Number: A169181
NPI: 1811300957
Provider English Spoken: Y
Cultural Competency: N

LESLIE B TARVER

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

THOMAS, KELSEY

Provider Gender: Female
License Number: PSY29738
NPI: 1700264264
Provider English Spoken: Y
Cultural Competency: N

KELSEY R THOMAS

8950 VILLA LA JOLLA DR
STE 101
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

WISHNEK, HANNAH

Provider Gender: Female
License Number: LCS105699
NPI: 1578012043
Provider English Spoken: Y
Cultural Competency: N

HANNAH K WISHNEK

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ZLATAR, ZVINKA

Provider Gender: Female
License Number: PSY26230
NPI: 1497139059

Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N

ZVINKA Z ZLATAR

9444 MEDICAL CENTER DR

LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

LAKESIDE

BRUNETTO, HEIDI

Provider Gender: Female
License Number: PSY26809
NPI: 1023250453
Provider English Spoken: Y
Cultural Competency: N

HEIDI M BRUNETTO

10039 VINE ST
LAKESIDE, CA 92040

Phone: (619) 390-9975
Fax: (360) 462-2744

After Hours Phone: (619)
390-9975

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH

D6. 心理健康提供者名录

8:00AM-5:00PM

NATIONAL CITY

CHOI, MIN

Provider Gender: Female
License Number: MFC135952
NPI: 1871195107
Provider English Spoken: Y
Cultural Competency: N
MIN H CHOI

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426
Fax: (619) 356-2726

After Hours Phone: (844)
200-2426

Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-6:00PM

FLANIGAN, MARILYN

Provider Gender: Female
License Number: MFC97326
NPI: 1588996912
Provider English Spoken: Y
Cultural Competency: N
MARILYN Y FLANIGAN

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426
Fax: (858) 578-4417

After Hours Phone: (844)
200-2426

Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-6:00PM

KUGEL, SAMUEL

Provider Gender: Male
License Number: A54412
NPI: 1497813968
Provider English Spoken: Y
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency: N
SAMUEL KUGEL

502 EUCLID AVE STE 305
NATIONAL CITY, CA 91950

Phone: (619) 472-2600
Fax: (619) 472-5721

After Hours Phone: (619)
472-2600

Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Language(s) Spoken:
Spanish, Portuguese
TDD: U

Min/Max Age: 18\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

LAD, NIKISHA

Provider Gender: Female
License Number: LCS120676
NPI: 1942857107

Provider English Spoken: Y
Cultural Competency: N
NIKISHA J LAD

2400 E 8TH ST
NATIONAL CITY, CA 91950

Phone: (619) 662-4100
Fax: (619) 259-2807

After Hours Phone: (619)
662-4100

Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 8:00AM-5:00PM
M-F 8:00AM-5:00PM

SACHS, MELISSA

Provider Gender: Female
License Number: LCS76968
NPI: 1649760356

Provider English Spoken: Y
Cultural Competency: N
MELISSA R SACHS

2400 E 8TH ST
NATIONAL CITY, CA 91950




Phone: (619) 662-4100
Fax: (619) 259-2807

After Hours Phone: (619)
662-4100

Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U

Min/Max Age: 0\999


D6. 心理健康提供者名录

American Sign Language (ASL):  Phone: (844) 200-2426
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM


SILVEY, CHRISTOPHER

Provider Gender: Male
License Number: LCS85942
NPI: 1932793502
Provider English Spoken: Y
Cultural Competency: N
CHRISTOPHER J SILVEY


 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426
Fax: (619) 474-4008

 After Hours Phone: (844)
200-2426


 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N





 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

SIMMONS, ROBERT

Provider Gender: Male
License Number: LCS117787
NPI: 1689269631
Provider English Spoken: Y
Cultural Competency: N
ROBERT M SIMMONS


 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426
Fax: (619) 434-9853
 After Hours Phone: (844)
200-2426
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:00AM-6:00PM
F 8:00AM-5:00PM


OCEANSIDE


ACOSTA, AZUCENA


Provider Gender: Female
License Number: LCS98304
NPI: 1255937496
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: N
AZUCENA ACOSTA


 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N


 Accessibility: CONTACT

PROVIDER
 Hours: M-TU
8:00AM-5:00PM
W 8:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

ACOSTA, AZUCENA

Provider Gender: Female
License Number: LCS98304
NPI: 1255937496
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
AZUCENA ACOSTA


 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

ACOSTA, AZUCENA

Provider Gender: Female
License Number: LCS98304
NPI: 1255937496
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N

D6. 心理健康提供者名录

AZUCENA ACOSTA

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

BELL, JENNIFER

Provider Gender: Female

License Number: 20A20702

NPI: 1154614956

Provider English Spoken: Y

Cultural Competency: N

JENNIFER L BELL

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Chinese, Farsi

TDD: U

Min/Max Age: 5\80

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

BELL, JENNIFER

Provider Gender: Female

License Number: 20A20702

NPI: 1154614956

Provider English Spoken: Y

Cultural Competency: N

JENNIFER L BELL

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 5\80

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

BELL, JENNIFER

Provider Gender: Female

License Number: 20A20702

NPI: 1154614956

Provider English Spoken: Y

Cultural Competency: N

JENNIFER L BELL

818 PIER VIEW WAY

OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 5\80

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

CHALMERS, VIRGINIA

Provider Gender: Female

License Number: LCS28053

NPI: 1265613715

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

VIRGINIA C CHALMERS

619 CROUCH ST
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

D6. 心理健康提供者名录

 *Accessibility: CONTACT PROVIDER*

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445


Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

 517 N HORNE ST
OCEANSIDE, CA 92054


 *Phone: (760) 631-5000*

Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*


 *Website: N/A*


Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH*
8:00AM-7:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445


Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N


WARREN R CHRISTIANSON II

 818 PIER VIEW WAY
OCEANSIDE, CA 92054


 *Phone: (760) 631-5000*

Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

 *Website: N/A*


Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH*
8:00AM-7:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445


Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

 517 N HORNE ST
OCEANSIDE, CA 92054


 *Phone: (760) 631-5000*

Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

 *Website: N/A*

Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH*

8:00AM-7:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445


Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

 818 PIER VIEW WAY
OCEANSIDE, CA 92054


 *Phone: (760) 631-5000*

Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

 *Website: N/A*

Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH*

8:00AM-7:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y

Provider Language(s) Spoken:


D6. 心理健康提供者名录

Spanish

Cultural Competency: N


WARREN R CHRISTIANSON II

 4700 N RIVER RD
OCEANSIDE, CA 92057


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y


Provider Language(s) Spoken:

Spanish

Cultural Competency: N


WARREN R CHRISTIANSON II

 4700 N RIVER RD
OCEANSIDE, CA 92057


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

COOK, SHERYL

Provider Gender: Female

License Number: PSY15449


NPI: 1750420816

Provider English Spoken: Y

Cultural Competency: N


SHERYL G COOK

 619 CROUCH ST STE 100
OCEANSIDE, CA 92054


 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 9:00AM-6:15PM
W 9:00AM-6:00PM

CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166


NPI: 1285170662

Provider English Spoken: Y

Cultural Competency: N

VANESSA Y CRUZ

 517 N HORNE ST
OCEANSIDE, CA 92054


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166


NPI: 1285170662

Provider English Spoken: Y

Cultural Competency: N

VANESSA Y CRUZ

 818 PIER VIEW WAY
OCEANSIDE, CA 92054


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N








 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
9:00AM-7:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

D6. 心理健康提供者名录





CRUZ, VANESSA

Provider Gender: Female
License Number: LCS87166
NPI: 1285170662
Provider English Spoken: Y
Cultural Competency: N
VANESSA Y CRUZ


 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 4\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TH
9:00AM-7:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

CRUZ, VANESSA

Provider Gender: Female
License Number: LCS87166
NPI: 1285170662
Provider English Spoken: Y
Cultural Competency: N
VANESSA Y CRUZ

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U








Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

DOUGHERTY, CHRISTINE

Provider Gender: Female
License Number: LCS26686
NPI: 1003194960
Provider English Spoken: Y
Cultural Competency: N
CHRISTINE A DOUGHERTY





 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 8:00AM-4:00PM

DOUGHERTY, CHRISTINE


Provider Gender: Female
License Number: LCS26686
NPI: 1003194960
Provider English Spoken: Y

Cultural Competency: N

CHRISTINE A DOUGHERTY

 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

DOUGHERTY, CHRISTINE

Provider Gender: Female
License Number: LCS26686
NPI: 1003194960
Provider English Spoken: Y
Cultural Competency: N
CHRISTINE A DOUGHERTY

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

JENSEN, BRIAN

D6. 心理健康提供者名录

Provider Gender: Male
License Number: PSY26041
NPI: 1518138049

Provider English Spoken: Y
Cultural Competency: N
BRIAN M JENSEN

619 CROUCH ST
OCEANSIDE, CA 92054

Phone: (760) 736-6767
Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

KRAPES, MICHAEL

Provider Gender: Male
License Number: PSY25077
NPI: 1215233028

Provider English Spoken: Y
Cultural Competency: N

MICHAEL B KRAPES

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 736-6767
Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

MENDEZ, ADRIANA

Provider Gender: Female
License Number: LCS86435
NPI: 1356777361

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ADRIANA J MENDEZ

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MENDEZ, ADRIANA

Provider Gender: Female
License Number: LCS86435
NPI: 1356777361

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ADRIANA J MENDEZ

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MENDEZ, ADRIANA

Provider Gender: Female
License Number: LCS86435
NPI: 1356777361

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ADRIANA J MENDEZ

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MEYERHOF, GRETA

Provider Gender: Female
License Number: MFC32299

D6. 心理健康提供者名录

NPI: 1487196333

Provider English Spoken: Y

Cultural Competency: N

GRETA R MEYERHOF

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MEYERHOF, GRETA

Provider Gender: Female

License Number: MFC32299

NPI: 1487196333

Provider English Spoken: Y

Cultural Competency: N

GRETA R MEYERHOF

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MEYERHOF, GRETA

Provider Gender: Female

License Number: MFC32299

NPI: 1487196333

Provider English Spoken: Y

Cultural Competency: N

GRETA R MEYERHOF

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MONTEZ, REBECCA

Provider Gender: Female

License Number: LCS26869

NPI: 1396047809

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

REBECCA MONTEZ

2210 MESA DR STE 5
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

NEVILLE, MARGARET

Provider Gender: Female

License Number: LCS82407

NPI: 1073682407

Provider English Spoken: Y

Cultural Competency: N

MARGARET R NEVILLE

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

NEVILLE, MARGARET

Provider Gender: Female

License Number: LCS82407

NPI: 1073682407

Provider English Spoken: Y

Cultural Competency: N

MARGARET R NEVILLE

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

D6. 心理健康提供者名录

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

🌐 Website: N/A

Accepting New Patients: Yes

🗨 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

NEVILLE, MARGARET

Provider Gender: Female

License Number: LCS82407

NPI: 1073682407

Provider English Spoken: Y

Cultural Competency: N

MARGARET R NEVILLE

📍 4700 N RIVER RD
OCEANSIDE, CA 92057

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

🌐 Website: N/A

Accepting New Patients: Yes

🗨 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

ORTIZ, BEVERLY

Provider Gender: Female

License Number: MFC121355

NPI: 1760826572

Provider English Spoken: Y

Cultural Competency: N

BEVERLY L ORTIZ

📍 2210 MESA DR STE 300
OCEANSIDE, CA 92054

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

☎ After Hours Phone: (760) 736-6767

🌐 Website: N/A

Accepting New Patients: Yes

🗨 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

PATEL, MITESH

Provider Gender: Male

License Number: A181164

NPI: 1568880292

Provider English Spoken: Y

Cultural Competency: N

MITESH K PATEL

📍 4700 N RIVER RD
OCEANSIDE, CA 92057

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

🌐 Website: N/A

Accepting New Patients: Yes

🗨 Site English Spoken: Y
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

PATEL, MITESH

Provider Gender: Male

License Number: A181164

NPI: 1568880292

Provider English Spoken: Y

Cultural Competency: N

MITESH K PATEL

📍 517 N HORNE ST
OCEANSIDE, CA 92054

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

🌐 Website: N/A

Accepting New Patients: Yes

🗨 Site English Spoken: Y
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

PATEL, MITESH

Provider Gender: Male

License Number: A181164

NPI: 1568880292

Provider English Spoken: Y

Cultural Competency: N

MITESH K PATEL


📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054

☎ Phone: (760) 631-5000

Fax: (760) 414-3892






☎ After Hours Phone: (760)


D6. 心理健康提供者名录

631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

SANCHEZ, ADRIANA

Provider Gender: Female
License Number: LCS97093
NPI: 1609450451
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
ADRIANA SANCHEZ








 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

SANCHEZ, ADRIANA





Provider Gender: Female



License Number: LCS97093
NPI: 1609450451
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
ADRIANA SANCHEZ

 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-4:00PM

SANCHEZ, ADRIANA









Provider Gender: Female
License Number: LCS97093
NPI: 1609450451
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
ADRIANA SANCHEZ

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

SLOAN, CRISTINA

Provider Gender: Female
License Number: MFC137279
NPI: 1912456377
Provider English Spoken: Y
Cultural Competency: N
CRISTINA I SLOAN

 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Language(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM


SLOAN, CRISTINA

Provider Gender: Female
License Number: MFC137279
NPI: 1912456377
Provider English Spoken: Y
Cultural Competency: N

D6. 心理健康提供者名录

CRISTINA I SLOAN

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Language(s) Spoken:
Spanish


TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

SLOAN, CRISTINA

Provider Gender: Female

License Number: MFC137279


NPI: 1912456377

Provider English Spoken: Y

Cultural Competency: N


CRISTINA I SLOAN

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

SMITH, SONYA

Provider Gender: Female

License Number: LCS82598

NPI: 1902070857


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

SONYA L SMITH

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

SMITH, SONYA

Provider Gender: Female

License Number: LCS82598


NPI: 1902070857

Provider English Spoken: Y


Provider Language(s) Spoken:
Spanish

Cultural Competency: N

SONYA L SMITH

 517 N HORNE ST

OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

SMITH, SONYA

Provider Gender: Female

License Number: LCS82598

NPI: 1902070857


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

SONYA L SMITH

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

WILSON, CARLENE

Provider Gender: Female

D6. 心理健康提供者名录

License Number: LCS74685
NPI: 1508327081

Provider English Spoken: Y
Cultural Competency: N

CARLENE WILSON

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

WILSON, CARLENE

Provider Gender: Female

License Number: LCS74685

NPI: 1508327081

Provider English Spoken: Y

Cultural Competency: N

CARLENE WILSON

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

WILSON, CARLENE

Provider Gender: Female

License Number: LCS74685

NPI: 1508327081

Provider English Spoken: Y

Cultural Competency: N

CARLENE WILSON

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

POWAY

KULKARNI, NISHAT

Provider Gender: Male

License Number: A187134

NPI: 1669034732

Provider English Spoken: Y

Cultural Competency: N

NISHAT KULKARNI

13010 POWAY RD
POWAY, CA 92064

Phone: (858) 218-3000

Fax: (360) 462-2742

After Hours Phone: (858)
218-3000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

MODHWADIA, MAMTA

Provider Gender: Female

License Number: A113990

NPI: 1043353667

Provider English Spoken: Y

Provider Language(s) Spoken:

German, Gujarati

Cultural Competency: N

MAMTA D MODHWADIA

13010 POWAY RD
POWAY, CA 92064

Phone: (858) 218-3000

Fax: (360) 462-2742

After Hours Phone: (858)
218-3000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

D6. 心理健康提供者名录

POSTLETHWAITE, ALEJANDRA

Provider Gender: Female
 License Number: A88938
 NPI: 1750566915
 Provider English Spoken: Y
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: N

ALEJANDRA POSTLETHWAITE

13010 POWAY RD
 POWAY, CA 92064
 Phone: (858) 218-3000
 Fax: (360) 462-2742
 After Hours Phone: (858)
 218-3000
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

STREET, KYLE

Provider Gender: Male
 License Number: 20A21304
 NPI: 1457912131
 Provider English Spoken: Y
 Cultural Competency: N
 KYLE A STREET
 13010 POWAY RD
 POWAY, CA 92064
 Phone: (858) 218-3000
 Fax: (360) 462-2742
 After Hours Phone: (858)
 218-3000
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y

Site Languages(s) Spoken:
 Spanish
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM

VALLEZ-BARLAM, ANDREA

Provider Gender: Female
 License Number: PSY9962
 NPI: 1710902143
 Provider English Spoken: Y
 Provider Language(s) Spoken:
 German, Spanish
 Cultural Competency: N
 ANDREA VALLEZ-BARLAM

13010 POWAY RD
 POWAY, CA 92064
 Phone: (858) 218-3000
 Fax: (858) 633-4688
 After Hours Phone: (858)
 218-3000
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 9:00AM-5:00PM

ABERCROMBIE, SHERI

Provider Gender: Female
 License Number: PSY18536
 NPI: 1932292422
 Provider English Spoken: Y
 Cultural Competency: N
 SHERI ABERCROMBIE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 Fax: (858) 633-4680
 After Hours Phone: (858)
 279-0925
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 TDD: U
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-5:30PM
 SA 8:30AM-4:00PM

ABERCROMBIE, SHERI

Provider Gender: Female
 License Number: PSY18536
 NPI: 1932292422
 Provider English Spoken: Y
 Cultural Competency: N
 SHERI ABERCROMBIE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 Fax: (858) 633-4680
 After Hours Phone: (858)
 810-8700
 Website: N/A

SAN DIEGO

D6. 心理健康提供者名录

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

ARONLEE, TRACY

Provider Gender: Female

License Number: LCS83778


NPI: 1619304748

Provider English Spoken: Y

Cultural Competency: N

TRACY S ARONLEE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 2\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

ARONLEE, TRACY

Provider Gender: Female

License Number: LCS83778


NPI: 1619304748

Provider English Spoken: Y

Cultural Competency: N

TRACY S ARONLEE

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 2\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

BANKS, SARAH

Provider Gender: Female

License Number: PSY30296


NPI: 1164701132


Provider English Spoken: Y

Cultural Competency: N

SARAH J BANKS

 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

BANKS, SARAH

Provider Gender: Female

License Number: PSY30296

NPI: 1164701132

Provider English Spoken: Y

Cultural Competency: N

SARAH J BANKS

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

BANKS, SARAH

Provider Gender: Female

License Number: PSY30296

NPI: 1164701132

Provider English Spoken: Y


Cultural Competency: N

SARAH J BANKS

 4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

D6. 心理健康提供者名录

PROVIDER
Hours: M-F
8:00AM-5:00PM

BARRON, KAVITA

Provider Gender: Female
License Number: A155596
NPI: 1821418542
Provider English Spoken: Y
Cultural Competency: N
KAVITA BARRON

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM

BASS, GURGIANA

Provider Gender: Female
License Number: PSY24750
NPI: 1639325277
Provider English Spoken: Y
Cultural Competency: N
GURGIANA BASS
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858)
279-0925
Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M 8:00AM-4:30PM
TU 8:00AM-0:00PM
W 8:00AM-4:30PM
TH 8:00AM-0:00PM

BASS, GURGIANA

Provider Gender: Female
License Number: PSY24750
NPI: 1639325277
Provider English Spoken: Y
Cultural Competency: N
GURGIANA BASS
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858)
810-8700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U

Min/Max Age: 18\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

BREEDLOVE, AMANDA

Provider Gender: Female
License Number: MFC139230
NPI: 1316487119
Provider English Spoken: Y
Cultural Competency: N

AMANDA A BREEDLOVE
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Phone: (619) 662-4100
Fax: (619) 785-3384
After Hours Phone: (619)
662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Language(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM

BROWN, DARCIE

Provider Gender: Female
License Number: MFC119851
NPI: 1639796071
Provider English Spoken: Y
Cultural Competency: N
DARCIE D BROWN
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT

D6. 心理健康提供者名录

PROVIDER
Hours: M-F
8:00AM-5:00PM

CALLAGHAN, KATHRYN
Provider Gender: Female
License Number: MFC106901
NPI: 1558768812
Provider English Spoken: Y
Cultural Competency: N
KATHRYN R CALLAGHAN
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0206

After Hours Phone: (619)
234-2158
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM

CEBALLOS, JACQUELINE
Provider Gender: Female
License Number: LCS110194
NPI: 1093350258
Provider English Spoken: Y
Cultural Competency: N
JACQUELINE CEBALLOS
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-9025
Fax: (858) 633-4680

After Hours Phone: (858)
279-9025
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM

CEBALLOS, JACQUELINE
Provider Gender: Female
License Number: LCS110194
NPI: 1093350258
Provider English Spoken: Y
Cultural Competency: N
JACQUELINE CEBALLOS
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680

After Hours Phone: (858)
810-8700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM

CHESHER, NICHOLAS
Provider Gender: Male
License Number: PSY29290
NPI: 1124539697
Provider English Spoken: Y
Cultural Competency: N
NICHOLAS J CHESHER

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM

CHOI, MIN
Provider Gender: Female
License Number: MFC135952
NPI: 1871195107
Provider English Spoken: Y
Cultural Competency: N
MIN H CHOI
10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
Fax: (858) 578-4417
After Hours Phone: (844)
200-2426
Website: N/A
Accepting New Patients: Yes

D6. 心理健康提供者名录

☐ Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-6:00PM

CIOBANU, COSMINA

Provider Gender: Female

License Number: A137628

NPI: 1285049932

Provider English Spoken: Y

Cultural Competency: N

COSMINA S CIOBANU

📍 3010 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 576-1700

Fax: (858) 966-8164

🕒 After Hours Phone: (858)
576-1700

🌐 Website: N/A

Accepting New Patients: Yes

☐ Site English Spoken: Y
TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

CIOBANU, COSMINA

Provider Gender: Female

License Number: A137628

NPI: 1285049932

Provider English Spoken: Y

Cultural Competency: N

COSMINA S CIOBANU

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 576-1700

Fax: (858) 966-8164

🕒 After Hours Phone: (858)
576-1700

🌐 Website: N/A

Accepting New Patients: Yes

☐ Site English Spoken: Y
TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

CIOBANU, COSMINA

Provider Gender: Female

License Number: A137628

NPI: 1285049932

Provider English Spoken: Y

Cultural Competency: N

COSMINA S CIOBANU

📍 8001 FROST ST
SAN DIEGO, CA 92123

☎ Phone: (858) 576-1700

Fax: (858) 966-8164

🕒 After Hours Phone: (858)
576-1700

🌐 Website: N/A

Accepting New Patients: Yes

☐ Site English Spoken: Y
TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

CIOBANU, COSMINA

Provider Gender: Female

License Number: A137628

NPI: 1285049932

Provider English Spoken: Y

Cultural Competency: N

COSMINA S CIOBANU

📍 4510 EXECUTIVE DR STE
315

SAN DIEGO, CA 92121

☎ Phone: (858) 534-8019

🕒 After Hours Phone: (858)
534-8019

🌐 Website: N/A

Accepting New Patients: Yes

☐ Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

CLEMENT, LUIS

Provider Gender: Male

License Number: PSY28534

NPI: 1235364712

Provider English Spoken: Y

Cultural Competency: N

LUIS F CLEMENT

📍 2630 1ST AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 234-2158


Fax: (619) 234-0206

🕒 After Hours Phone: (619)
234-2158

🌐 Website: N/A

Accepting New Patients: Yes

D6. 心理健康提供者名录

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CRISOL, CAROLINE

Provider Gender: Female

License Number: MFC88616

NPI: 1962663617


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

CAROLINE M CRISOL LMFT
INC

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100


Fax: (619) 662-4158

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

DEACON, CASSIE

Provider Gender: Female

License Number: LCS94105


NPI: 1720452998

Provider English Spoken: Y

Cultural Competency: N

CASSIE C DEACON

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700


Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:30AM-5:30PM
TU 5:30PM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

DEACON, CASSIE

Provider Gender: Female

License Number: LCS94105


NPI: 1720452998

Provider English Spoken: Y

Cultural Competency: N


CASSIE C DEACON

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925


Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:30AM-5:30PM
TU 5:30PM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

DIAZ, JAENAI

Provider Gender: Female

License Number: LCS80689

NPI: 1508241811

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

JAENAI DIAZ

 350 DICKINSON ST
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

DIOKNO, RHODA

Provider Gender: Female

License Number: PSY28073

NPI: 1629109483

Provider English Spoken: Y

Cultural Competency: N

D6. 心理健康提供者名录

ROHDA CARINO DIOKNO

2630 1ST AVE

SAN DIEGO, CA 92103

Phone: (619) 234-2158

Fax: (619) 234-0206

After Hours Phone: (619)
234-2158

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

DOLNAK, DOUGLAS

Provider Gender: Male

License Number: 20A6059

NPI: 1316147085

Provider English Spoken: Y

Cultural Competency: N

DOUGLAS R DOLNAK

10737 CAMINO RUIZ

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (619) 474-4008

After Hours Phone: (844)
200-2426

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-6:00PM

DOSS, KATIE

Provider Gender: Female

License Number: LCS112693

NPI: 1134825979

Provider English Spoken: Y

Cultural Competency: N

KATIE L DOSS

7011 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

DOSS, KATIE

Provider Gender: Female

License Number: LCS112693

NPI: 1134825979

Provider English Spoken: Y

Cultural Competency: N

KATIE L DOSS

6973 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

DSOUZA, NICOLE

Provider Gender: Male

License Number: LCS101958

NPI: 1225462799

Provider English Spoken: Y

Cultural Competency: N

NICOLE A DSOUZA

330 LEWIS ST

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

DUNN-PIRIO, ANASTASIE

Provider Gender: Female

License Number: A157861

NPI: 1700177136

Provider English Spoken: Y

Cultural Competency: N

D6. 心理健康提供者名录

ANASTASIE M DUNN-PIRIO

200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

Phone: (619) 543-3500

Fax: (888) 539-8781

After Hours Phone: (619)
543-3500

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

ESTAVILLO, SAUL

Provider Gender: Male

License Number: MFC102610

NPI: 1528330073

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

SAUL J ESTAVILLO

286 EUCLID AVE STE 309
SAN DIEGO, CA 92114

Phone: (619) 527-7390

Fax: (619) 527-7394

After Hours Phone: (619)
527-7390

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

ESTAVILLO, SAUL

Provider Gender: Male

License Number: MFC102610

NPI: 1528330073

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

SAUL J ESTAVILLO

3045 BEYER BLVD STE D101
SAN DIEGO, CA 92154

Phone: (619) 662-4161

Fax: (619) 662-4109

After Hours Phone: (619)
662-4161

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

FIRESTONE, MICHELLE

Provider Gender: Female

License Number: PSY33081

NPI: 1114687803

Provider English Spoken: Y

Cultural Competency: N

MICHELLE E FIRESTONE

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FIRESTONE, MICHELLE

Provider Gender: Female

License Number: PSY33081

NPI: 1114687803

Provider English Spoken: Y

Cultural Competency: N

MICHELLE E FIRESTONE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FITZGERALD, MICHAEL

Provider Gender: Male

License Number: A73710

D6. 心理健康提供者名录

NPI: 1336393578

Provider English Spoken: Y

Cultural Competency: N

MICHAEL W FITZGERALD

16918 DOVE CANYON RD
STE 100

SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

FLANIGAN, MARILYN

Provider Gender: Female

License Number: MFC97326

NPI: 1588996912

Provider English Spoken: Y

Cultural Competency: N

MARILYN Y FLANIGAN

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (858) 578-4417

After Hours Phone: (844)
200-2426

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-6:00PM

FORZANI, CHRISTINA

Provider Gender: Female

License Number: PSY25710

NPI: 1902939630

Provider English Spoken: Y

Cultural Competency: N

CHRISTINA A FORZANI

4290 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 563-0250

Fax: (858) 633-4681

After Hours Phone: (619)
563-0250

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FRANK, GUIDO

Provider Gender: Male

License Number: A86429

NPI: 1578608733

Provider English Spoken: Y

Cultural Competency: N

GUIDO K FRANK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8145

Fax: (858) 966-8154

After Hours Phone: (858)
966-8145

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

FRY, LIANE

Provider Gender: Female

License Number: MFC42570

NPI: 1003110917

Provider English Spoken: Y

Cultural Competency: N

LIANE M FRY

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

Fax: (619) 595-0258

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 12\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

GARCIA, RICHARD

Provider Gender: Male

License Number: LCS28742

D6. 心理健康提供者名录

NPI: 1881198554

Provider English Spoken: Y

Cultural Competency: N

RICHARD R GARCIA

2630 1ST AVE

SAN DIEGO, CA 92103

Phone: (619) 234-2158

Fax: (619) 234-0206

After Hours Phone: (619)
234-2158

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-4:30PM

GARCIA, JENNI

Provider Gender: Female

License Number: LPCC10346

NPI: 1437775863

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

JENNI GARCIA

3025 BEYER BLVD

SAN DIEGO, CA 92154

Phone: (619) 662-4100

Fax: (619) 662-4119

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

GIAMONA, KRISTEN

Provider Gender: Female

License Number: PSY28419

NPI: 1376824383

Provider English Spoken: Y

Cultural Competency: N

KRISTEN M GIAMONA

6973 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

GIAMONA, KRISTEN

Provider Gender: Female

License Number: PSY28419

NPI: 1376824383

Provider English Spoken: Y

Cultural Competency: N

KRISTEN M GIAMONA

7011 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

GOMEZ, JUANITA

Provider Gender: Female

License Number: PSY27439

NPI: 1790915759

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

JUANITA GOMEZ

6030 VILLAGE WAY

SAN DIEGO, CA 92130

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

GULOTTA, SAMANTHA

Provider Gender: Female

D6. 心理健康提供者名录

License Number: MFC134199

NPI: 1790407732

Provider English Spoken: Y

Cultural Competency: N

SAMANTHA L GULOTTA

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

HERNANDEZ, SILVIA

Provider Gender: Female

License Number: MFC51787

NPI: 1982821179

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

SILVIA E HERNANDEZ

3025 BEYER BLVD
SAN DIEGO, CA 92154

Phone: (619) 662-4100

Fax: (619) 662-4119

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

JOSHI, YASH

Provider Gender: Male

License Number: A147156

NPI: 1598151433

Provider English Spoken: Y

Cultural Competency: N

YASH B JOSHI

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

KAYE, WALTER

Provider Gender: Male

License Number: A24819

NPI: 1922076223

Provider English Spoken: Y

Cultural Competency: N

WALTER H KAYE

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (858) 534-8019

After Hours Phone: (858)
534-8019

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

KHAFAJA, MOHAMAD

Provider Gender: Male

License Number: A115892

NPI: 1780867119

Provider English Spoken: Y

Provider Language(s) Spoken:

Arabic

Cultural Competency: N

MOHAMAD H KHAFAJA

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM







KHAMISA, SORAIYA

Provider Gender: Female




License Number: LCS81951

NPI: 1811254386





D6. 心理健康提供者名录

Provider English Spoken: Y
Cultural Competency: N
SORAIYA N KHAMISA
 4520 EXECUTIVE DR STE A
SAN DIEGO, CA 92121
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)*
926-8273
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER







KLUEMPER, NICOLE



Provider Gender: Female
License Number: PSY27064
NPI: 1902125818
Provider English Spoken: Y
Cultural Competency: N
NICOLE S KLUEMPER
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
Fax: (858) 633-4680
 *After Hours Phone: (858)*
279-0925
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 2\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

KLUEMPER, NICOLE







Provider Gender: Female
License Number: PSY27064
NPI: 1902125818
Provider English Spoken: Y
Cultural Competency: N
NICOLE S KLUEMPER
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 810-8700*
Fax: (858) 633-4680
 *After Hours Phone: (858)*
810-8700
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 2\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

LABIB, MICHAEL

Provider Gender: Male
License Number: PSY34180
NPI: 1609055797
Provider English Spoken: Y
Provider Language(s) Spoken:
Arabic
Cultural Competency: N
MICHAEL LABIB
 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
 *Phone: (619) 662-4100*
Fax: (619) 785-3384
 *After Hours Phone: (619)*
662-4100
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
 *Site Language(s) Spoken:*
Spanish

TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM






LIDLAW, JOHN

Provider Gender: Male
License Number: MFC44560
NPI: 1689790073
Provider English Spoken: Y
Cultural Competency: N
JOHN K LIDLAW
 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
 *Phone: (844) 200-2426*
 *After Hours Phone: (844)*
200-2426
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

LEBENSohn CHIALVO, FLORENCIA

Provider Gender: Female
License Number: PSY30776
NPI: 1134788730
Provider English Spoken: Y
Cultural Competency: N
FLORENCIA LEBENSohn
CHIALVO

D6. 心理健康提供者名录





 7910 FROST ST STE 350
SAN DIEGO, CA 92123
 Phone: (858) 496-4800
 After Hours Phone: (858)
496-4800
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM


LEBENSOHN CHIALVO, FLORENCIA

Provider Gender: Female
License Number: PSY30776
NPI: 1134788730

Provider English Spoken: Y
Cultural Competency: N


FLORENCIA LEBENSOHN CHIALVO

 9333 GENESEE AVE STE
200
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
 Website: N/A

Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM


LEDBETTER, ALEX

Provider Gender: Male
License Number: 20A20454
NPI: 1073017315

Provider English Spoken: Y
Cultural Competency: N

ALEX W LEDBETTER

 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
 Website: N/A

Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

LEE, DAVID


Provider Gender: Male
License Number: A124329
NPI: 1871884130

Provider English Spoken: Y
Provider Language(s) Spoken:
Korean

Cultural Competency: N

DAVID J LEE


 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
 Website: N/A

Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM



LI, XIA

Provider Gender: Female
License Number: A163344
NPI: 1336670413

Provider English Spoken: Y
Provider Language(s) Spoken:
Mandarin


Cultural Competency: N

XIA LI

 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


 Website: N/A

Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

LINKE, SARAH

Provider Gender: Female
License Number: PSY27116
NPI: 1487026415

Provider English Spoken: Y

D6. 心理健康提供者名录

Cultural Competency: N

SARAH E LINKE

4910 DIRECTORS PL STE
250

SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

LINKE, SARAH

Provider Gender: Female

License Number: PSY27116

NPI: 1487026415

Provider English Spoken: Y

Cultural Competency: N

SARAH E LINKE

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

LIU, TIMOTHY

Provider Gender: Male

License Number: A105535

NPI: 1720262801

Provider English Spoken: Y

Provider Language(s) Spoken:

Chinese, Mandarin, Yue

Chinese

Cultural Competency: N

TIMOTHY C LIU

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 5\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

LIU, TIMOTHY

Provider Gender: Male

License Number: A105535

NPI: 1720262801

Provider English Spoken: Y

Provider Language(s) Spoken:

Chinese, Mandarin, Yue

Chinese

Cultural Competency: N

TIMOTHY C LIU

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 5\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

LONGARDNER, KATHERINE

Provider Gender: Female

License Number: A137963

NPI: 1801215926

Provider English Spoken: Y

Cultural Competency: N

KATHERINE M LONGARDNER

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER








Hours: M-F

8:00AM-5:00PM





MAGINOT-CHESSER, TAMARA


D6. 心理健康提供者名录

Provider Gender: Female
License Number: PSY28678
NPI: 1043441165
Provider English Spoken: Y
Cultural Competency: N
TAMARA R MAGINOT
CHESHER






 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
 Phone: (858) 534-8019
Fax: (858) 534-6727
 After Hours Phone: (858)
534-8019
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM


MALAK, LAWRENCE

Provider Gender: Male
License Number: A115345
NPI: 1467773028
Provider English Spoken: Y
Cultural Competency: N
LAWRENCE T MALAK
 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
Fax: (858) 633-4681
 After Hours Phone: (619)
563-0250
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U

Min/Max Age: 14\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM








MARTINEZ, STEPHANIE

Provider Gender: Female
License Number: A152787
NPI: 1699126367
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
STEPHANIE MARTINEZ
 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
Fax: (858) 633-4681
 After Hours Phone: (619)
563-0250
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM






MARTINEZ, STEPHANIE
Provider Gender: Female
License Number: A152787
NPI: 1699126367
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
STEPHANIE MARTINEZ
 350 DICKINSON ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999

MARTINEZ, STEPHANIE

Provider Gender: Female
License Number: A152787
NPI: 1699126367
Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish
Cultural Competency: N
STEPHANIE MARTINEZ
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

MARTINEZ, STEPHANIE

Provider Gender: Female
License Number: A152787
NPI: 1699126367
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
STEPHANIE MARTINEZ
 350 DICKINSON ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999

D6. 心理健康提供者名录

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

MCCULLUM, TIFFANY


Provider Gender: Female
License Number: PSY29329
NPI: 1528306206
Provider English Spoken: Y
Cultural Competency: N
TIFFANY MCCULLUM

 286 EUCLID AVE STE 302
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 Fax: (619) 428-7952

 After Hours Phone: (619)
662-4100


 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 13\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

MILLER, MIKAELA

Provider Gender: Female
License Number: A181565
NPI: 1639752355
Provider English Spoken: Y
Cultural Competency: N

MIKAELA G MILLER


 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
Fax: (858) 633-4681

After Hours Phone: (619)
563-0250

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 14\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

MILLS, BRAD

Provider Gender: Male
License Number: LCS87409
NPI: 1598542813


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish


Cultural Competency: N

BRAD A MILLS

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101


 Phone: (619) 233-8500
Fax: (619) 687-1067

 After Hours Phone: (619)
233-8500

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish


TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER


 Hours: M-F
8:00AM-5:00PM


MIRON, JEAN-PHILIPPE


Provider Gender: Male
License Number: A186033
NPI: 1952178196

Provider English Spoken: Y
Cultural Competency: N

JEAN-PHILIPPE MIRON


 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


MONTOYA, JESSICA

Provider Gender: Female
License Number: PSY31647
NPI: 1003421256

Provider English Spoken: Y
Cultural Competency: N


JESSICA L MONTOYA

 4168 FRONT ST FL 3
SAN DIEGO, CA 92103

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes


D6. 心理健康提供者名录

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

MOORE, SHAVON

Provider Gender: Female

License Number: A152789


NPI: 1053682773


Provider English Spoken: Y


Cultural Competency: N

SHAVON C MOORE


 4510 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

MUHAMMAD, LAMA

Provider Gender: Female

License Number: A156500

NPI: 1558701623

Provider English Spoken: Y

Provider Language(s) Spoken:

Arabic

Cultural Competency: N

LAMA MUHAMMAD

 350 DICKINSON ST
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

MUHAMMAD, LAMA

Provider Gender: Female

License Number: A156500

NPI: 1558701623


Provider English Spoken: Y

Provider Language(s) Spoken:
Arabic

Cultural Competency: N

LAMA MUHAMMAD

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

NAKAMURA, TIFFANY

Provider Gender: Female

License Number: LPCC4383

NPI: 1356846349


Provider English Spoken: Y


Cultural Competency: N

TIFFANY NAKAMURA

 4510 EXECUTIVE DR STE
315


SAN DIEGO, CA 92121

 Phone: (858) 534-8019

 After Hours Phone: (858)
534-8019


 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

NGUYEN, HOANG

Provider Gender: Male

License Number: G83977

NPI: 1720011620

Provider English Spoken: Y

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: N

HOANG A NGUYEN

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

D6. 心理健康提供者名录

☎ After Hours Phone: (800) 926-8273

🌐 Website: N/A

Accepting New Patients: Yes

📄 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

NGUYEN, HOANG

Provider Gender: Male

License Number: G83977

NPI: 1720011620

Provider English Spoken: Y

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: N

HOANG A NGUYEN

📍 410 DICKINSON ST STE 100
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

🌐 Website: N/A

Accepting New Patients: Yes

📄 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

NING, GRACE

Provider Gender: Female

License Number: PSY27293

NPI: 1598911315

Provider English Spoken: Y

Provider Language(s) Spoken:

Chinese, Mandarin

Cultural Competency: N

GRACE J NING

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

☎ After Hours Phone: (858) 279-0925

🌐 Website: N/A

Accepting New Patients: Yes

📄 Site English Spoken: Y

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

NING, GRACE

Provider Gender: Female

License Number: PSY27293

NPI: 1598911315

Provider English Spoken: Y

Provider Language(s) Spoken:

Chinese, Mandarin

Cultural Competency: N

GRACE J NING

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700

Fax: (858) 633-4680

☎ After Hours Phone: (858) 810-8700

🌐 Website: N/A

Accepting New Patients: Yes

📄 Site English Spoken: Y

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

NORMAN, MARC

Provider Gender: Male

License Number: PSY16278

NPI: 1922169101

Provider English Spoken: Y

Cultural Competency: N

MARC A NORMAN

📍 350 DICKINSON ST
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

🌐 Website: N/A

Accepting New Patients: Yes

📄 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

NORMAN, MARC

Provider Gender: Male

License Number: PSY16278

NPI: 1922169101







Provider English Spoken: Y

Cultural Competency: N








MARC A NORMAN

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

D6. 心理健康提供者名录

 Phone: (619) 543-2827
 After Hours Phone: (619) 543-2827
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM







ORFF, HENRY

Provider Gender: Male
License Number: PSY27099
NPI: 1144685215
Provider English Spoken: Y
Cultural Competency: N
HENRY J ORFF
 4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
 Phone: (844) 757-5337
 After Hours Phone: (844) 757-5337
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM






ORTIZ, MARIA



Provider Gender: Female

License Number: PSY30953
NPI: 1497980775
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
MARIA E ORTIZ







 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
Fax: (619) 662-4158
 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PATTERSON-HYATT, KIMBERLY


Provider Gender: Female
License Number: PSY31903
NPI: 1780997742
Provider English Spoken: Y
Cultural Competency: N
KIMBERLY G
PATTERSON-HYATT
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y

TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

PATTON, MICHAEL

Provider Gender: Male
License Number: LCS18244
NPI: 1184756702
Provider English Spoken: Y
Cultural Competency: N
MICHAEL A PATTON
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
Fax: (619) 687-1067
 After Hours Phone: (619) 233-8500
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PRINCE, RENEE

Provider Gender: Female
License Number: PSY32206
NPI: 1467737908
Provider English Spoken: Y
Cultural Competency: N
RENEE K PRINCE
 10737 CAMINO RUIZ STE
235

D6. 心理健康提供者名录

SAN DIEGO, CA 92126
☎ Phone: (844) 200-2426
Fax: (619) 474-4008
🕒 After Hours Phone: (844) 200-2426
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-6:00PM

QAYOUMI, WALI

Provider Gender: Male
License Number: A168429
NPI: 1093178220
Provider English Spoken: Y
Provider Language(s) Spoken:
French
Cultural Competency: N

WALI Z QAYOUMI

📍 4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
☎ Phone: (619) 294-3746
Fax: (888) 539-8781
🕒 After Hours Phone: (619) 294-3746
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

RADOJEVIC, NATASHA

Provider Gender: Female
License Number: PSY28495
NPI: 1821365008
Provider English Spoken: Y
Cultural Competency: N
NATASHA RADOJEVIC
📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 279-0925
Fax: (858) 633-4680
🕒 After Hours Phone: (858) 279-0925
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-TU
8:30AM-5:30PM
TH-F 8:30AM-5:30PM

📄 Site English Spoken: Y
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-TU
8:30AM-5:30PM
TH-F 8:30AM-5:30PM

RADOJEVIC, NATASHA

Provider Gender: Female
License Number: PSY28495
NPI: 1821365008
Provider English Spoken: Y
Cultural Competency: N
NATASHA RADOJEVIC
📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 810-8700
Fax: (858) 633-4680
🕒 After Hours Phone: (858) 810-8700

🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-TU
8:30AM-5:30PM
TH-F 8:30AM-5:30PM

RIBEIRO CALDAS DOMINGUES, ISABEL

Provider Gender: Female
License Number: A132160
NPI: 1023367216
Provider English Spoken: Y
Provider Language(s) Spoken:
French, Portuguese, Spanish
Cultural Competency: N
ISABEL A RIBEIRO CALDAS DOMINGUES
📍 350 DICKINSON ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM


D6. 心理健康提供者名录

RICHARD, MARLA

Provider Gender: Female
License Number: G65188
NPI: 1578720934
Provider English Spoken: Y
Cultural Competency: N


MARLA G RICHARD


 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
 Website: N/A

Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

RICHARD, MARLA

Provider Gender: Female
License Number: G65188
NPI: 1578720934
Provider English Spoken: Y
Cultural Competency: N

MARLA G RICHARD

 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
 Website: N/A


Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N



 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM


SACHS, MELISSA


Provider Gender: Female
License Number: LCS76968
NPI: 1649760356
Provider English Spoken: Y
Cultural Competency: N

MELISSA R SACHS

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
 Phone: (619) 662-4100

Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100


 Website: N/A
Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM

SALO, STEPHANIE

Provider Gender: Female
License Number: PSY26290
NPI: 1477967784
Provider English Spoken: Y
Cultural Competency: N

STEPHANIE P SALO


 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250

Fax: (858) 633-4681

 After Hours Phone: (619)
563-0250

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 17\999

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

SAWYER, CAROLYN

Provider Gender: Female
License Number: A149116
NPI: 1043653249
Provider English Spoken: Y
Cultural Competency: N

CAROLYN M SAWYER

 7920 FROST ST STE 200
SAN DIEGO, CA 92123


 Phone: (858) 246-0794

Fax: (858) 496-9257

 After Hours Phone: (858)
246-0794

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

SAWYER, CAROLYN

Provider Gender: Female

D6. 心理健康提供者名录

License Number: A149116

NPI: 1043653249

Provider English Spoken: Y

Cultural Competency: N

CAROLYN M SAWYER

3665 KEARNY VILLA RD
STE 400

SAN DIEGO, CA 92123

Phone: (858) 966-5990

Fax: (858) 966-7508

After Hours Phone: (858)
966-5990

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

SAWYER, CAROLYN

Provider Gender: Female

License Number: A149116

NPI: 1043653249

Provider English Spoken: Y

Cultural Competency: N

CAROLYN M SAWYER

3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123

Phone: (858) 966-4032

Fax: (858) 966-6227

After Hours Phone: (858)
966-4032

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

SCHELLINGER, KRISTON

Provider Gender: Female

License Number: PSY26313

NPI: 1710234273

Provider English Spoken: Y

Cultural Competency: N

KRISTON B SCHELLINGER

330 LEWIS ST

SAN DIEGO, CA 92103

Phone: (858) 246-1979

After Hours Phone: (858)
246-1979

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

SCHELLINGER, KRISTON

Provider Gender: Female

License Number: PSY26313

NPI: 1710234273

Provider English Spoken: Y

Cultural Competency: N

KRISTON B SCHELLINGER

9333 GENESEE AVE STE

200

SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

SCHELLINGER, KRISTON

Provider Gender: Female

License Number: PSY26313

NPI: 1710234273

Provider English Spoken: Y

Cultural Competency: N

KRISTON B SCHELLINGER

9909 MIRA MESA BLVD

STE 200

SAN DIEGO, CA 92131

Phone: (858) 246-1979

After Hours Phone: (858)
246-1979

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

SCHLOSSER, TARA

Provider Gender: Female

D6. 心理健康提供者名录

License Number: MFC107868

NPI: 1407220437

Provider English Spoken: Y

Cultural Competency: N

TARA S SCHLOSSER

330 LEWIS ST

SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

SERIO, TAYLOR

Provider Gender: Female

License Number: LCS107050

NPI: 1093217382

Provider English Spoken: Y

Cultural Competency: N

TAYLOR L SERIO

6973 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

SERIO, TAYLOR

Provider Gender: Female

License Number: LCS107050

NPI: 1093217382

Provider English Spoken: Y

Cultural Competency: N

TAYLOR L SERIO

7011 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

SHU, I WEI

Provider Gender: Male

License Number: A103813

NPI: 1992840144

Provider English Spoken: Y

Cultural Competency: N

I WEI SHU

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (858) 534-6200

Fax: (858) 534-6205

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

SILVEY, CHRISTOPHER

Provider Gender: Male

License Number: LCS85942

NPI: 1932793502

Provider English Spoken: Y

Cultural Competency: N

CHRISTOPHER J SILVEY

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (858) 578-4220

Fax: (858) 578-4417

After Hours Phone: (858)
578-4220

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

SOLORIO JR, ROBERTO

Provider Gender: Male

License Number: LCS102729

NPI: 1972088185


Provider English Spoken: Y


D6. 心理健康提供者名录

Cultural Competency: N

ROBERTO SOLORIO JR


 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

SUAREZ, ROBERTO

Provider Gender: Male

License Number: MFC25098

NPI: 1386785160


Provider English Spoken: Y

*Provider Language(s) Spoken:
Spanish*

Cultural Competency: N

ROBERTO SUAREZ

 3025 BEYER BLVD
SAN DIEGO, CA 92154


 Phone: (619) 662-4100

Fax: (619) 662-4119

 After Hours Phone: (619)
662-4100


 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

SWEIGERT, JAMIE

Provider Gender: Female

License Number: LCS112304


NPI: 1396353595

Provider English Spoken: Y

Cultural Competency: N


JAMIE L SWEIGERT

 2630 1ST AVE
SAN DIEGO, CA 92103

 Phone: (619) 234-2158


Fax: (619) 234-0206

 After Hours Phone: (619)
234-2158

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

TARLE, STEPHANIE

Provider Gender: Female

License Number: PSY32155


NPI: 1659920403

Provider English Spoken: Y

Cultural Competency: N

STEPHANIE J TARLE

 6655 ALVARADO RD
SAN DIEGO, CA 92120


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

TILTON, PETER

Provider Gender: Male

License Number: G27781


NPI: 1538258694

Provider English Spoken: Y

Cultural Competency: N

PETER A TILTON

 2630 1ST AVE
SAN DIEGO, CA 92103


 Phone: (619) 234-2158

Fax: (619) 234-0206

 After Hours Phone: (619)
234-2158

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

TO, TUAN

Provider Gender: Male

License Number: PSY30204

NPI: 1255696183

Provider English Spoken: Y

*Provider Language(s) Spoken:
Vietnamese*

Cultural Competency: N

TUAN TO

 4290 POLK AVE

D6. 心理健康提供者名录

SAN DIEGO, CA 92105
☎ Phone: (619) 563-0250
Fax: (858) 633-4681
🕒 After Hours Phone: (619) 563-0250
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 5\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

TO, TUAN

Provider Gender: Male
License Number: PSY30204
NPI: 1255696183
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: N
TUAN TO
📄 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 810-8700
Fax: (858) 633-4680
🕒 After Hours Phone: (858) 810-8700
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 5\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

TUAN TO

📄 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 279-0925
Fax: (858) 633-4680
🕒 After Hours Phone: (858) 279-0925
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 5\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

TO, TUAN

Provider Gender: Male

License Number: PSY30204
NPI: 1255696183
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: N
TUAN TO
📄 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 810-8700
Fax: (858) 633-4680
🕒 After Hours Phone: (858) 810-8700
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 5\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

TROYER, EMILY

Provider Gender: Female
License Number: A149101
NPI: 1326484437
Provider English Spoken: Y
Cultural Competency: N
EMILY A TROYER
📄 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
☎ Phone: (619) 280-2058
Fax: (858) 633-4682
🕒 After Hours Phone: (619) 280-2058
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

TROYER, EMILY

Provider Gender: Female
License Number: A149101
NPI: 1326484437
Provider English Spoken: Y
Cultural Competency: N
EMILY A TROYER
📄 4290 POLK AVE
SAN DIEGO, CA 92105
☎ Phone: (619) 563-0250
Fax: (858) 633-4681
🕒 After Hours Phone: (619) 563-0250
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish
TDD: U

TWAMLEY, ELIZABETH

Provider Gender: Female
License Number: PSY19150
NPI: 1700089141

D6. 心理健康提供者名录


Provider English Spoken: Y

Cultural Competency: N

ELIZABETH W TWAMLEY


 1501 IMPERIAL AVE

SAN DIEGO, CA 92101


 Phone: (619) 233-8500

Fax: (619) 687-1067

 After Hours Phone: (619)
233-8500

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-W
8:30AM-5:00PM
TH 8:30AM-9:00PM
F 8:30AM-5:00PM

WEISSMAN, CORY

Provider Gender: Male

License Number: A174625

NPI: 1528720661


Provider English Spoken: Y

Cultural Competency: N

CORY R WEISSMAN


 16918 DOVE CANYON RD
STE 100

SAN DIEGO, CA 92127


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

WU, MICHELLE

Provider Gender: Female

License Number: A125139


NPI: 1043650088

Provider English Spoken: Y

Cultural Competency: N


MICHELLE L WU

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-8145

Fax: (858) 966-8164

 After Hours Phone: (858)
966-8145

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

YAGUDAYEVA, RAISA

Provider Gender: Female

License Number: 20A14848

NPI: 1942555990

Provider English Spoken: Y


Provider Language(s) Spoken:

Russian

Cultural Competency: N

RAISA YAGUDAYEVA

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

YIDI, DIANA

Provider Gender: Female

License Number: LCS110300

NPI: 1194438663


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish


Cultural Competency: N

DIANA L YIDI

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925


Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish

TDD: U


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER



D6. 心理健康提供者名录

 Hours: M-F
8:30AM-5:30PM

ZAYAS, MARIO

Provider Gender: Male
License Number: MFC111273
NPI: 1275943557
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N


MARIO E ZAYAS

 3025 BEYER BLVD STE
E-101
SAN DIEGO, CA 92154
 Phone: (619) 662-4100
Fax: (619) 662-4119

 After Hours Phone: (619)
662-4100


 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Hours: M-TU
9:00AM-7:00PM
W-F 9:00AM-6:00PM

ZIMMERMAN, JENNIFER


Provider Gender: Female
License Number: LCS28729
NPI: 1811449077


Provider English Spoken: Y
Cultural Competency: N

JENNIFER A ZIMMERMAN



 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-9676

Fax: (858) 633-4680

 After Hours Phone: (858)
279-9676

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
 Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


ZIMMERMAN, JENNIFER

Provider Gender: Female
License Number: LCS28729
NPI: 1811449077

Provider English Spoken: Y
Cultural Competency: N

JENNIFER A ZIMMERMAN



 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700
Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
 Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F



8:00AM-5:00PM

SAN MARCOS

ALTAMIRANO, LEON

Provider Gender: Male
License Number: PSY23734
NPI: 1619271517
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N



LEON ALTAMIRANO

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
 Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

ARIELLA, LYNDA

Provider Gender: Female
License Number: PSY19450
NPI: 1073518965

Provider English Spoken: Y
Cultural Competency: N

LYNDA R ARIELLA

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767

D6. 心理健康提供者名录

Fax: (760) 736-6744

☎ After Hours Phone: (760)
736-6767

🌐 Website: N/A

Accepting New Patients: Yes

☑ Site English Spoken: Y

☑ Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 5\50

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

CABREJOS, CLAUDIO

Provider Gender: Male

License Number: A71653

NPI: 1033133483

Provider English Spoken: Y

Provider Language(s) Spoken:
Portuguese, Spanish

Cultural Competency: N

CLAUDIO O CABREJOS

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

☎ After Hours Phone: (760)
736-6767

🌐 Website: N/A

Accepting New Patients: Yes

☑ Site English Spoken: Y

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

FLYNN, DANIELLE

Provider Gender: Female

License Number: PSY26184

NPI: 1477785137

Provider English Spoken: Y

Cultural Competency: N

DANIELLE I FLYNN

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

☎ After Hours Phone: (760)
736-6767

🌐 Website: N/A

Accepting New Patients: Yes

☑ Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

GEORGIEV, MARY-JO

Provider Gender: Female

License Number: PSY17954

NPI: 1518996875

Provider English Spoken: Y

Cultural Competency: N

MARY-JO GEORGIEV

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

☎ After Hours Phone: (760)
736-6767

🌐 Website: N/A

Accepting New Patients: Yes

☑ Site English Spoken: Y

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

IMAM, SYED

Provider Gender: Male

License Number: PSY27695

NPI: 1447428271

Provider English Spoken: Y

Provider Language(s) Spoken:
Hindi, Urdu

Cultural Competency: N

SYED IMAM

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

☎ After Hours Phone: (760)
736-6767

🌐 Website: N/A

Accepting New Patients: Yes

☑ Site English Spoken: Y

☑ Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 15\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

REEG, JESSICA

Provider Gender: Female

License Number: MFC124306

NPI: 1144382987

Provider English Spoken: Y

Provider Language(s) Spoken:

D6. 心理健康提供者名录

Spanish

Cultural Competency: N

JESSICA REEG

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 8:00AM-5:00PM

SOLORIO JR, ROBERTO

Provider Gender: Male

License Number: LCS102729

NPI: 1972088185

Provider English Spoken: Y

Cultural Competency: N

ROBERTO SOLORIO JR

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

TONG, GARRICK

Provider Gender: Male

License Number: A102192

NPI: 1831361278

Provider English Spoken: Y

Provider Language(s) Spoken:

Cantonese

Cultural Competency: N

GARRICK G TONG

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 4\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 8:00AM-5:00PM

TORRES, HECTOR

Provider Gender: Male

License Number: PSY13309

NPI: 1720265614

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

HECTOR M TORRES

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

SAN YSIDRO

BALTRUS, JUSTINEANN

Provider Gender: Female

License Number: MFC132018

NPI: 1285040709

Provider English Spoken: Y

Provider Language(s) Spoken:

Tagalog

Cultural Competency: N

JUSTINEANN A BALTRUS

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 600-4870

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U


Min/Max Age: 0\999

American Sign Language (ASL):

D6. 心理健康提供者名录

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


CRAWFORD-DAY, ANN

Provider Gender: Female
License Number: A166646
NPI: 1386149706
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ANN E CRAWFORD-DAY

 4004 BEYER BLVD
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100
Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Language(s) Spoken:
Spanish


TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): Cultural Competency: N

N


 Accessibility: CONTACT PROVIDER


 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM

DEPAOLO, AMANDA

Provider Gender: Female
License Number: LCS99056
NPI: 1215420138
Provider English Spoken: Y
Cultural Competency: N

AMANDA L DEPAOLO

 4004 BEYER BLVD
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100
Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Language(s) Spoken:
Spanish


TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

FONTANA, LOUIS

Provider Gender: Male

License Number: G49072

NPI: 1780734343


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish


Cultural Competency: N

LOUIS A FONTANA


 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM


GONZALEZ-GARCIA, CAROLINA

Provider Gender: Female
License Number: MFC41111
NPI: 1215321955
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: N

CAROLINA GONZALES GARCIA


 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
Fax: (619) 600-4870

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

IBANEZ, BERENICE

Provider Gender: Female
License Number: PSY22080
NPI: 1740394386
Provider English Spoken: Y
Provider Language(s) Spoken:

D6. 心理健康提供者名录

Spanish

Cultural Competency: N

BERENICE B IBANEZ

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

JAMES, CHRISTINE

Provider Gender: Female

License Number: 20A13931

NPI: 1679834022

Provider English Spoken: Y

Cultural Competency: N

CHRISTINE E JAMES

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 785-3384

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

JENNINGS, AMY

Provider Gender: Female

License Number: LCS100075

NPI: 1609549161

Provider English Spoken: Y

Cultural Competency: N

AMY E JENNINGS

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM

SA 8:00AM-2:00PM

JIMENEZ, NANCY

Provider Gender: Female

License Number: MFC141209

NPI: 1568023596

Provider English Spoken: Y

Cultural Competency: N

NANCY JIMENEZ

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 785-3384

After Hours Phone: (619)

662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

LOPEZ, MARIBEL

Provider Gender: Female

License Number: LCS86171

NPI: 1669180600

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

MARIBEL, LOPEZ

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

D6. 心理健康提供者名录

8:00AM-8:00PM
SA 8:00AM-2:00PM

PETERSEN, KATE

Provider Gender: Female
License Number: MFC130200
NPI: 1598237281
Provider English Spoken: Y
Cultural Competency: N
KATE PETERSEN

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

Phone: (619) 662-4100
Fax: (619) 785-3384

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

SANTEE

MEAGHER, RAISHELLE

Provider Gender: Female
License Number: LCS109804
NPI: 1851821904
Provider English Spoken: Y
Cultural Competency: N

RAISHELLE L MEAGHER

120 TOWN CENTER PKWY
SANTEE, CA 92071

Phone: (619) 662-4100

Fax: (619) 662-4196

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

VALLEY CENTER

PLASCENCIA, CINDY

Provider Gender: Female
License Number: MFC113536
NPI: 1952723736

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

CINDY PLASCENCIA

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Phone: (760) 742-9919
Fax: (360) 462-2750

After Hours Phone: (760)
742-9919

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

VISTA

ACOSTA, AZUCENA

Provider Gender: Female
License Number: LCS98304
NPI: 1255937496

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

AZUCENA ACOSTA

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM

ACOSTA, AZUCENA

Provider Gender: Female
License Number: LCS98304
NPI: 1255937496

Provider English Spoken: Y

Provider Language(s) Spoken:





Spanish

Cultural Competency: N



AZUCENA ACOSTA

1000 VALE TERRACE DR
VISTA, CA 92084

D6. 心理健康提供者名录

 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999


American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-TH
8:00AM-2:00PM
F 8:00AM-5:00PM
SA 9:00AM-6:00PM

BELL, JENNIFER

Provider Gender: Female
License Number: 20A20702
NPI: 1154614956
Provider English Spoken: Y
Cultural Competency: N
JENNIFER L BELL

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Chinese, Farsi, Estonian,
Vietnamese, Hindi, Tagalog,
French, Korean, Marathi,
Spanish, Telugu


TDD: U

Min/Max Age: 5\80

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM


BELL, JENNIFER

Provider Gender: Female

License Number: 20A20702
NPI: 1154614956

Provider English Spoken: Y
Cultural Competency: N
JENNIFER L BELL

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Chinese, Farsi, Estonian,
Vietnamese, Hindi, Tagalog,
French, Korean, Marathi,
Spanish, Telugu


TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

BELL, JENNIFER

Provider Gender: Female


License Number: 20A20702


NPI: 1154614956

Provider English Spoken: Y

Cultural Competency: N

JENNIFER L BELL

 134 GRAPEVINE RD
VISTA, CA 92083


 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Lithuanian, Urdu, Chinese,
Vietnamese, Farsi, Tagalog,
Arabic, Spanish


TDD: U

Min/Max Age: 5\80

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664


NPI: 1932359445


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish


Cultural Competency: N

WARREN R CHRISTIANSON II

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

D6. 心理健康提供者名录

Accepting New Patients: Yes

☐ Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): Provider English Spoken: Y

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

📍 134 GRAPEVINE RD
VISTA, CA 92083

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

🌐 Website: N/A

Accepting New Patients: Yes

☐ Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

🌐 Website: N/A

Accepting New Patients: Yes

☐ Site English Spoken: Y
☐ Site Languages(s) Spoken:
Chinese, Korean, Marathi,
French, Estonian, Telugu,
Farsi, Vietnamese, Hindi,
Spanish, Tagalog

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

🌐 Website: N/A

Accepting New Patients: Yes

☐ Site English Spoken: Y
☐ Site Languages(s) Spoken:
Chinese, Korean, Marathi,
French, Estonian, Telugu,
Farsi, Vietnamese, Hindi,
Spanish, Tagalog

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166

NPI: 1285170662

Provider English Spoken: Y

Cultural Competency: N

VANESSA Y CRUZ

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

🌐 Website: N/A

Accepting New Patients: Yes

☐ Site English Spoken: Y
☐ Site Languages(s) Spoken:

D6. 心理健康提供者名录


*Vietnamese, Chinese,
Estonian, Farsi, French,
Hindi, Korean, Marathi,
Spanish, Tagalog, Telugu*

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU

8:00AM-8:00PM

W 9:00AM-7:00PM

TH 8:00AM-8:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166


NPI: 1285170662

Provider English Spoken: Y

Cultural Competency: N


VANESSA Y CRUZ

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH

9:00AM-7:00PM

F 9:00AM-5:00PM

SA 9:00AM-4:00PM

CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166


NPI: 1285170662

Provider English Spoken: Y

Cultural Competency: N

VANESSA Y CRUZ

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Language(s) Spoken:

*Vietnamese, Chinese,
Estonian, Farsi, French,
Hindi, Korean, Marathi,
Spanish, Tagalog, Telugu*

TDD: U

Min/Max Age: 4\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU

8:00AM-8:00PM

W 9:00AM-7:00PM

TH 8:00AM-8:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166


NPI: 1285170662

Provider English Spoken: Y

Cultural Competency: N

VANESSA Y CRUZ

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


TDD: U

Min/Max Age: 4\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH

9:00AM-7:00PM

F 9:00AM-5:00PM

SA 9:00AM-4:00PM

DOUGHERTY, CHRISTINE

Provider Gender: Female

License Number: LCS26686


NPI: 1003194960

Provider English Spoken: Y

Cultural Competency: N

CHRISTINE A DOUGHERTY

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D6. 心理健康提供者名录

DOUGHERTY, CHRISTINE

Provider Gender: Female
License Number: LCS26686
NPI: 1003194960

Provider English Spoken: Y
Cultural Competency: N

CHRISTINE A DOUGHERTY

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Chinese, Estonian, Farsi,
French, Hindi, Korean,
Marathi, Spanish, Telugu,
Vietnamese, Tagalog

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
9:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

MENDEZ, ADRIANA

Provider Gender: Female
License Number: LCS86435
NPI: 1356777361

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ADRIANA J MENDEZ

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 9:00AM-4:00PM

MENDEZ, ADRIANA

Provider Gender: Female
License Number: LCS86435
NPI: 1356777361

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

ADRIANA J MENDEZ

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MEYERHOF, GRETA

Provider Gender: Female
License Number: MFC32299
NPI: 1487196333

Provider English Spoken: Y
Cultural Competency: N

GRETA R MEYERHOF

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MEYERHOF, GRETA

Provider Gender: Female
License Number: MFC32299
NPI: 1487196333

Provider English Spoken: Y
Cultural Competency: N

GRETA R MEYERHOF

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A


Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

D6. 心理健康提供者名录

Min/Max Age: 0\999

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


NEVILLE, MARGARET

Provider Gender: Female
License Number: LCS82407
NPI: 1073682407

Provider English Spoken: Y
Cultural Competency: N

MARGARET R NEVILLE

 134 GRAPEVINE RD
VISTA, CA 92083


 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y


 Site Languages(s) Spoken:
Arabic, Chinese, Lithuanian,
Farsi, Spanish, Tagalog,
Urdu, Vietnamese

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:00PM


NEVILLE, MARGARET

Provider Gender: Female
License Number: LCS82407
NPI: 1073682407

Provider English Spoken: Y
Cultural Competency: N

MARGARET R NEVILLE


 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


PATEL, MITESH

Provider Gender: Male
License Number: A181164
NPI: 1568880292

Provider English Spoken: Y
Cultural Competency: N

MITESH K PATEL


 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM

SA 9:00AM-4:00PM


PATEL, MITESH

Provider Gender: Male
License Number: A181164
NPI: 1568880292

Provider English Spoken: Y
Cultural Competency: N

MITESH K PATEL


 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

SANCHEZ, ADRIANA


Provider Gender: Female
License Number: LCS97093
NPI: 1609450451

Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: N


ADRIANA SANCHEZ

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000
Fax: (760) 414-3892

D6. 心理健康提供者名录

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

SANCHEZ, ADRIANA

Provider Gender: Female

License Number: LCS97093

NPI: 1609450451


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ADRIANA SANCHEZ


 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

SLOAN, CRISTINA

Provider Gender: Female

License Number: MFC137279


NPI: 1912456377

Provider English Spoken: Y

Cultural Competency: N

CRISTINA I SLOAN

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

SLOAN, CRISTINA

Provider Gender: Female

License Number: MFC137279


NPI: 1912456377

Provider English Spoken: Y


Cultural Competency: N

CRISTINA I SLOAN

 134 GRAPEVINE RD
VISTA, CA 92083


 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

SLOAN, CRISTINA

Provider Gender: Female

License Number: MFC137279


NPI: 1912456377

Provider English Spoken: Y

Cultural Competency: N

CRISTINA I SLOAN

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y


 Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

SMITH, SONYA

Provider Gender: Female

License Number: LCS82598

NPI: 1902070857

Provider English Spoken: Y


Provider Language(s) Spoken:
Spanish

D6. 心理健康提供者名录

Cultural Competency: N

SONYA L SMITH

 134 GRAPEVINE RD
VISTA, CA 92083


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

SMITH, SONYA

Provider Gender: Female

License Number: LCS82598

NPI: 1902070857

Provider English Spoken: Y


Provider Language(s) Spoken:


Spanish

Cultural Competency: N

SONYA L SMITH


 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

WILSON, CARLENE

Provider Gender: Female

License Number: LCS74685


NPI: 1508327081

Provider English Spoken: Y

Cultural Competency: N


CARLENE WILSON

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

WILSON, CARLENE

Provider Gender: Female

License Number: LCS74685


NPI: 1508327081

Provider English Spoken: Y


Cultural Competency: N


CARLENE WILSON

 134 GRAPEVINE RD
VISTA, CA 92083


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D7. 视力提供者名录 - 眼科和视力服务

ALPINE

AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish, Vietnamese

Cultural Competency: Y

ACUITY EYE GROUP

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

BINDER, NICHOLAS, MD

Provider Gender: Male

License Number: A124698

NPI: 1306076716

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

DEAN, MOENA, OD

Provider Gender: Female

License Number: 33955

NPI: 1265927578

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

D7. 视力提供者名录 - 眼科和视力服务

Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

KALBAKJI, NATALY, OD
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken:
Arabic
Cultural Competency: Y
ACUITY EYE GROUP
 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
 Phone: (619) 445-2687
Fax: (619) 445-0801
 After Hours Phone: (619)
445-2687

Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

KATZMAN, BARRY, MD
Provider Gender: Male
License Number: A34834
NPI: 1760473797
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
ACUITY EYE GROUP

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
 Phone: (619) 445-2687
Fax: (619) 445-0801
 After Hours Phone: (619)
445-2687
Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Provider Language(s) Spoken:
Arabic
Cultural Competency: Y
ACUITY EYE GROUP
 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
 Phone: (619) 445-2687

Fax: (619) 445-0801
 After Hours Phone: (619)
445-2687
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

KHIEU, TINA, OD
Provider Gender: Female
License Number: 34777
NPI: 1962031617
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
 Phone: (619) 445-2687
Fax: (619) 445-0801
 After Hours Phone: (619)
445-2687
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM

D7. 视力提供者名录 - 眼科和视力服务

- F 9:00AM-4:00PM*
- MARR, RYAN, OD**
Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM
- MCGRAW, JOSEPH, MD**
Provider Gender: Male
License Number: A155228
NPI: 1588624852
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
- Accepting New Patients: Yes*
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM
- MORRISON REYES, JOSHUA, MD**
Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
Provider Language(s) Spoken: Indonesian, Spanish
Cultural Competency: Y
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM
- PATEL, SARJAN, MD**
Provider Gender: Male
License Number: A114976
NPI: 1316199326
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: Y
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM
- PATEL, GITANE, MD**
Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801

D7. 视力提供者名录 - 眼科和视力服务

☎ After Hours Phone: (619) 445-2687

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

☎ Phone: (619) 445-2687

Fax: (619) 445-0801

☎ After Hours Phone: (619) 445-2687

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM

TH 8:00AM-5:00PM

F 9:00AM-4:00PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

☎ Phone: (619) 445-2687

Fax: (619) 445-0801

☎ After Hours Phone: (619) 445-2687

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

☎ Phone: (619) 445-2687

Fax: (619) 445-0801

☎ After Hours Phone: (619) 445-2687

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

ZAIDI, NOORINA, OD

Provider Gender: Female

License Number: 35615

NPI: 1023477262

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

☎ Phone: (619) 445-2687

Fax: (619) 445-0801

☎ After Hours Phone: (619) 445-2687

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM

D7. 视力提供者名录 - 眼科和视力服务

F 9:00AM-4:00PM

BONITA

CHA, DANIEL, OD

Provider Gender: Male

License Number: 14779

NPI: 1386078020

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

EYECARE OF BONITA

4502 BONITA RD
BONITA, CA 91902

Phone: (619) 479-7334

Fax: (619) 475-3456

After Hours Phone: (619)
479-7334

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 8:00AM-6:30PM
W 8:00AM-6:00PM
TH 12:30AM-6:00PM
F 8:00AM-6:00PM
SA 9:00AM-2:00PM

CARLSBAD

HO, TRAM, OD

Provider Gender: Female

License Number: 13485

NPI: 1245464460

Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

EYE STYLE OPTOMETRY

5814 VAN ALLEN WAY STE
146

CARLSBAD, CA 92008

Phone: (760) 606-2020

After Hours Phone: (760)
606-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: TU 9:00AM-5:00PM
W 10:00AM-6:00PM
TH 9:00AM-5:00PM
F 8:00AM-4:00PM
SA 9:00AM-3:00PM

CHULA VISTA

CASTILLEJOS, DAVID, MD

Provider Gender: Male

License Number: A44482

NPI: 1558446401

Provider English Spoken: Y

Provider Language(s) Spoken:
French, Portuguese, Spanish,
Tagalog

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE
MED GROUP

342 F ST

CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 271-7044

After Hours Phone: (619)
422-1471

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
French, Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 8:00AM-5:00PM
TU 7:00AM-5:00PM
W-F 8:00AM-5:00PM

CASTILLEJOS, MARIA, MD

Provider Gender: Female

License Number: A37652

NPI: 1043395098

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE
MED GROUP

342 F ST

CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 271-7044

After Hours Phone: (619)
422-1471

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
French, Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within

D7. 视力提供者名录 - 眼科和视力服务

1/2 mile from Site): 1T

🕒 Hours: M 8:00AM-5:00PM
TU 7:00AM-5:00PM
W-F 8:00AM-5:00PM

CHAN, KWOK FUNG, OD

Provider Gender: Male

License Number: 35087

NPI: 1407508385

Provider English Spoken: Y

Cultural Competency: Y

VILLA OPTOMETRY INC

📍 523 TELEGRAPH CANYON
RD
CHULA VISTA, CA 91910

📞 Phone: (619) 482-2020

Fax: (619) 482-2671

🕒 After Hours Phone: (619)
482-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU
9:00AM-6:00PM
W 11:00AM-6:00PM
TH-F 9:00AM-6:00PM

CHISHOLM, KAREN, OD

License Number: 35450

NPI: 1568155190

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: Y

OTAY RANCH EYEWORKS

OPTOMETRY

📍 1741 EASTLAKE PKWY STE
101

CHULA VISTA, CA 91915

📞 Phone: (619) 421-6600

Fax: (619) 421-6006

🕒 After Hours Phone: (619)
421-6600

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: SU 10:00AM-4:00PM
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM

HUANG, PETER, OD

Provider Gender: Male

License Number: 11659

NPI: 1639100522

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

PETER D HUANG OD INC

📍 557 H ST
CHULA VISTA, CA 91910

📞 Phone: (619) 422-0139

Fax: (619) 422-0066

🕒 After Hours Phone: (619)
422-0139

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M 9:00AM-5:00PM
TU 9:00AM-6:00PM
W 9:00AM-5:00PM
TH 9:00AM-6:00PM
F 8:00AM-4:00PM
SA 9:00AM-2:00PM

KALRA, ANKUR, OD

Provider Gender: Male

License Number: 11898

NPI: 1124195789

Provider English Spoken: Y

Provider Language(s) Spoken:
Hindi

Cultural Competency: Y

OTAY RANCH EYEWORKS
OPTOMETRY

📍 1741 EASTLAKE PKWY STE
101

CHULA VISTA, CA 91915

📞 Phone: (619) 421-6600

Fax: (619) 421-6006

🕒 After Hours Phone: (619)
421-6600

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: SU 10:00AM-4:00PM
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM

D7. 视力提供者名录 - 眼科和视力服务

KEDDINGTON, JOAN, OD

Provider Gender: Female
License Number: 6263
NPI: 1992872691
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y

OTAY RANCH EYEWORKS OPTOMETRY

1741 EASTLAKE PKWY STE
101
CHULA VISTA, CA 91915
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone: (619)
421-6600

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U

Hours: SU 10:00AM-4:00PM
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM

KING, MARY, OD

Provider Gender: Female
License Number: 13711
NPI: 1578792107
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
OTAY RANCH EYEWORKS

OPTOMETRY

1741 EASTLAKE PKWY STE
101
CHULA VISTA, CA 91915
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone: (619)
421-6600

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U

Hours: SU 10:00AM-4:00PM
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM

MASCARENO, EFRAIN, OD

Provider Gender: Male
License Number: 10906
NPI: 1457507279

Provider English Spoken: Y
Cultural Competency: Y

CLEAR VISION OPTOMETRY

DR MASCARENO
440 4TH AVE
CHULA VISTA, CA 91910
Phone: (619) 427-2020
Fax: (866) 254-5707

After Hours Phone: (619)
427-2020

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TH
9:00AM-6:00PM
F 9:00AM-5:00PM

NGUYEN, TRACY, OD

Provider Gender: Female
License Number: 10859
NPI: 1265596621
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

ESSENTIAL EYECARE

OPTOMETRY

345 F ST STE 240
CHULA VISTA, CA 91910
Phone: (858) 467-0655
Fax: (619) 425-9797

After Hours Phone: (858)
467-0655

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T

Hours: M-TH
10:00AM-3:00PM

NGUYEN, THERESA, OD

Provider Gender: Female
License Number: 35530TLG
NPI: 1609555713
Provider English Spoken: Y

D7. 视力提供者名录 - 眼科和视力服务

Cultural Competency: Y
OTAY RANCH EYEWORKS
OPTOMETRY
📍 1741 EASTLAKE PKWY STE
101
CHULA VISTA, CA 91915
☎️ *Phone: (619) 421-6600*
Fax: (619) 421-6006
🕒 *After Hours Phone: (619)*
421-6600

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):
N

♿️ *Accessibility: CONTACT*
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 *Hours: SU 10:00AM-4:00PM*
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM

PHAM, NINA, OD

Provider Gender: Female

License Number: 35360

NPI: 1598403867

Provider English Spoken: Y

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE
MED GROUP

📍 342 F ST
CHULA VISTA, CA 91910

☎️ *Phone: (619) 422-1471*

Fax: (619) 271-7044

🕒 *After Hours Phone: (619)*
422-1471

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
French, Spanish, Tagalog

American Sign Language (ASL): *Provider English Spoken: Y*
N
♿️ *Accessibility: CONTACT*
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 *Hours: M 8:00AM-5:00PM*
TU 7:00AM-5:00PM
W-F 8:00AM-5:00PM

PLUCINIK, STANLEY, OD

Provider Gender: Male

License Number: 35255

NPI: 1124751417

Provider English Spoken: Y

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE
MED GROUP

📍 342 F ST
CHULA VISTA, CA 91910

☎️ *Phone: (619) 422-1471*

Fax: (619) 271-7044

🕒 *After Hours Phone: (619)*
422-1471

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
French, Spanish, Tagalog

American Sign Language (ASL):
N

♿️ *Accessibility: CONTACT*
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 *Hours: M 8:00AM-5:00PM*
TU 7:00AM-5:00PM
W-F 8:00AM-5:00PM

SCOVILL, ALEXANDRA, OD

Provider Gender: Female

License Number: 33711

NPI: 1184146094

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE
MED GROUP

📍 342 F ST
CHULA VISTA, CA 91910

☎️ *Phone: (619) 422-1471*

Fax: (619) 271-7044

🕒 *After Hours Phone: (619)*
422-1471

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
French, Spanish, Tagalog

American Sign Language (ASL):
N

♿️ *Accessibility: CONTACT*
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 *Hours: M 8:00AM-5:00PM*
TU 7:00AM-5:00PM
W-F 8:00AM-5:00PM

SOLIS, KEVIN, OD

Provider Gender: Male

License Number: 10420

NPI: 1538362116

Provider English Spoken: Y

Cultural Competency: Y

OTAY RANCH EYEWORKS
OPTOMETRY

📍 1741 EASTLAKE PKWY STE
101
CHULA VISTA, CA 91915

☎️ *Phone: (619) 421-6600*

Fax: (619) 421-6006

🕒 *After Hours Phone: (619)*
421-6600

Accepting New Patients: Yes

D7. 视力提供者名录 - 眼科和视力服务

Site English Spoken: Y
 Site Languages(s) Spoken:
 Arabic, Hindi, Spanish
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: SU 10:00AM-4:00PM
 M-F 9:00AM-7:00PM
 SA 9:00AM-5:00PM

TOUBIA, ELIAS, OD

Provider Gender: Male
 License Number: 33758
 NPI: 1740701481
 Provider English Spoken: Y
 Provider Language(s) Spoken:
 Arabic
 Cultural Competency: Y

OTAY RANCH EYEWORKS OPTOMETRY

1741 EASTLAKE PKWY STE
 101
 CHULA VISTA, CA 91915
 Phone: (619) 421-6600
 Fax: (619) 421-6006
 After Hours Phone: (619)
 421-6600

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
 Arabic, Hindi, Spanish

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U

Hours: SU 10:00AM-4:00PM
 M-F 9:00AM-7:00PM

SA 9:00AM-5:00PM

VILLA, ANGELICA, OD

Provider Gender: Female
 License Number: 10561
 NPI: 1962544965
 Provider English Spoken: Y
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: Y

VILLA OPTOMETRY INC

523 TELEGRAPH CANYON
 RD
 CHULA VISTA, CA 91910
 Phone: (619) 482-2020
 Fax: (619) 482-2671
 After Hours Phone: (619)
 482-2020

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Public transportation (within
 1/2 mile from Site): 1T

Hours: M-TU
 9:00AM-6:00PM
 W 11:00AM-6:00PM
 TH-F 9:00AM-6:00PM

CORONADO

COCKERHAM, KIMBERLY, MD

Provider Gender: Female
 License Number: G86885
 NPI: 1366493629
 Provider English Spoken: Y
 Cultural Competency: Y

ALVARADO EYE ASSOCIATES

MED CLINIC INC

801 ORANGE AVE STE 204
 CORONADO, CA 92118
 Phone: (619) 437-4406
 Fax: (619) 522-7983

After Hours Phone: (619)
 437-4406

Accepting New Patients: Yes

Site English Spoken: Y
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Public transportation (within
 1/2 mile from Site): 1U

Hours: M 9:00AM-4:30PM
 TU 9:00AM-3:00PM
 W-TH 9:00AM-4:30PM

GRAY, IGA, MD

Provider Gender: Female
 License Number: A174875
 NPI: 1033538350

Provider English Spoken: Y
 Cultural Competency: Y

ALVARADO EYE ASSOCIATES MED CLINIC INC

801 ORANGE AVE STE 204
 CORONADO, CA 92118
 Phone: (619) 437-4406
 Fax: (619) 522-7983

After Hours Phone: (619)
 437-4406

Accepting New Patients: Yes

Site English Spoken: Y
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Public transportation (within
 1/2 mile from Site): 1U

Hours: M 9:00AM-4:30PM

D7. 视力提供者名录 - 眼科和视力服务

TU 9:00AM-3:00PM
W-TH 9:00AM-4:30PM

KATZMAN, LEE, MD

Provider Gender: Male
License Number: A135673
NPI: 1912297284
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC

801 ORANGE AVE STE 204
CORONADO, CA 92118

Phone: (619) 437-4406
Fax: (619) 522-7983

After Hours Phone: (619)
437-4406

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-4:30PM
TU 9:00AM-3:00PM
W-TH 9:00AM-4:30PM

MANNEN, JOSEPH, OD

Provider Gender: Male
License Number: 33650
NPI: 1851827034
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC

801 ORANGE AVE STE 204
CORONADO, CA 92118

Phone: (619) 437-4406
Fax: (619) 522-7983

After Hours Phone: (619)
437-4406

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-4:30PM
TU 9:00AM-3:00PM
W-TH 9:00AM-4:30PM

OU, JOCELYN, OD

Provider Gender: Female
License Number: 34063
NPI: 1225518996
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC

801 ORANGE AVE STE 204
CORONADO, CA 92118

Phone: (619) 437-4406
Fax: (619) 522-7983

After Hours Phone: (619)
437-4406

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-4:30PM
TU 9:00AM-3:00PM
W-TH 9:00AM-4:30PM

YOUNG, ALLA, OD

Provider Gender: Female

License Number: 34191

NPI: 1285085142

Provider English Spoken: Y
Provider Language(s) Spoken:
Russian

Cultural Competency: Y

ALVARADO EYE ASSOCIATES
MED CLINIC INC

801 ORANGE AVE STE 204
CORONADO, CA 92118

Phone: (619) 437-4406
Fax: (619) 522-7983

After Hours Phone: (619)
437-4406

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-4:30PM
TU 9:00AM-3:00PM
W-TH 9:00AM-4:30PM

EL CAJON

AOTO, KIM, OD

Provider Gender: Female
License Number: 14524
NPI: 1780935650
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish, Vietnamese
Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400

D7. 视力提供者名录 - 眼科和视力服务

Fax: (619) 440-0239

📞 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

🗨️ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

ASIS, STEPHANIE, OD

Provider Gender: Female

License Number: 34013

NPI: 1902383540

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

📞 Phone: (619) 440-5400

Fax: (619) 440-0239

📞 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

🗨️ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

📞 Phone: (619) 440-5400

Fax: (619) 440-0239

📞 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

🗨️ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

BINDER, NICHOLAS, MD

Provider Gender: Male

License Number: A124698

NPI: 1306076716

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

📞 Phone: (619) 440-5400

Fax: (619) 440-0239

📞 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

🗨️ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

BUTLER, KIM, OD

Provider Gender: Male

License Number: 6405

NPI: 1467444844

Provider English Spoken: Y

Cultural Competency: Y

KIM J BUTLER OD

📍 1273 BROADWAY
EL CAJON, CA 92021

📞 Phone: (619) 579-2345

Fax: (619) 579-0876

📞 After Hours Phone: (619) 579-2345

Accepting New Patients: Yes

🗨️ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
9:00AM-5:00PM
SA 9:00AM-12:00AM

CHAN, KWOK FUNG, OD

Provider Gender: Male

License Number: 35087

NPI: 1407508385

Provider English Spoken: Y

Cultural Competency: Y

WERNER OPTOMETRY

📍 2650 JAMACHA RD STE 155
EL CAJON, CA 92019

📞 Phone: (619) 670-6296

Fax: (619) 670-8852

D7. 视力提供者名录 - 眼科和视力服务

☎ After Hours Phone: (619) 670-6296

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Italian, Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M 9:00AM-5:00PM
TU 10:00AM-5:00PM
W-TH 9:00AM-5:00PM
F 8:00AM-2:00PM

DEAN, MOENA, OD

Provider Gender: Female

License Number: 33955

NPI: 1265927578

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200 EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

☎ After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200 EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

☎ After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

HAMOUIE, JUDY, OD

Provider Gender: Female

License Number: 34984

NPI: 1518638287

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200 EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

☎ After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

HAN, SULKI, OD

Provider Gender: Female

License Number: 34171

NPI: 1750802195

Provider English Spoken: Y

Provider Language(s) Spoken: Korean

Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200 EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

☎ After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

HSU, CHRISTOPHER, MD

Provider Gender: Male

License Number: A65973

NPI: 1336167618

Provider English Spoken: Y

D7. 视力提供者名录 - 眼科和视力服务

Cultural Competency: Y
RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400
Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-6:00PM

KATZMAN, BARRY, MD

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400
Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-6:00PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Provider Language(s) Spoken:
Arabic

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400
Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-6:00PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200

EL CAJON, CA 92020

Phone: (619) 440-5400
Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-6:00PM

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400
Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-6:00PM

MCMURREN, BRITTANY, OD

D7. 视力提供者名录 - 眼科和视力服务

Provider Gender: Female
License Number: 14824
NPI: 1104243815
Provider English Spoken: Y
Cultural Competency: Y
WERNER OPTOMETRY
📍 2650 JAMACHA RD STE 155
EL CAJON, CA 92019
☎ *Phone: (619) 670-6296*
Fax: (619) 670-8852
🕒 *After Hours Phone: (619)*
670-6296
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Language(s) Spoken:
Italian, Spanish
American Sign Language (ASL):
N
♿ *Accessibility: CONTACT*
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 *Hours: M 9:00AM-5:00PM*
TU 10:00AM-5:00PM
W-TH 9:00AM-5:00PM
F 8:00AM-2:00PM

PANDYA, BHUMIKA, OD
Provider Gender: Female
License Number: 35025
NPI: 1063182822
Provider English Spoken: Y
Provider Language(s) Spoken:
Hindi
Cultural Competency: Y
RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP
📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020
☎ *Phone: (619) 440-5400*
Fax: (619) 440-0239
🕒 *After Hours Phone: (619)*

440-5400
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
♿ *Accessibility: CONTACT*
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 *Hours: M-F*
8:30AM-6:00PM

PATEL, SARJAN, MD
Provider Gender: Male
License Number: A114976
NPI: 1316199326
Provider English Spoken: Y
Provider Language(s) Spoken:
Gujarati, Hindi, Spanish
Cultural Competency: Y
RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP
📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020
☎ *Phone: (619) 440-5400*
Fax: (619) 440-0239
🕒 *After Hours Phone: (619)*
440-5400



Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
♿ *Accessibility: CONTACT*
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 *Hours: M-F*
8:30AM-6:00PM

PATEL, GITANE, MD
Provider Gender: Male

License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP
📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020
☎ *Phone: (619) 440-5400*
Fax: (619) 440-0239
🕒 *After Hours Phone: (619)*
440-5400
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
♿ *Accessibility: CONTACT*
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 *Hours: M-F*
8:30AM-6:00PM

SCOTT, JEFFREY, OD
Provider Gender: Male
License Number: 34978
NPI: 1568813434
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP
📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020
☎ *Phone: (619) 440-5400*
Fax: (619) 440-0239
🕒 *After Hours Phone: (619)*
440-5400
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N



D7. 视力提供者名录 - 眼科和视力服务

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F*
8:30AM-6:00PM

TON-NU, MY LINH, OD

Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y



Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200
EL CAJON, CA 92020
 *Phone: (619) 440-5400*
Fax: (619) 440-0239
 *After Hours Phone: (619) 440-5400*

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):



N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F*
8:30AM-6:00PM

TONNU, ANH, OD

Provider Gender: Female
License Number: 11318
NPI: 1679521280
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP


 300 S PIERCE ST STE 200
EL CAJON, CA 92020
 *Phone: (619) 440-5400*
Fax: (619) 440-0239
 *After Hours Phone: (619) 440-5400*

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-F*
8:30AM-6:00PM

VINH, JOHN, OD

Provider Gender: Male
License Number: 14177
NPI: 1003102724
Provider English Spoken: Y

Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP


 300 S PIERCE ST STE 200
EL CAJON, CA 92020
 *Phone: (619) 440-5400*
Fax: (619) 440-0239
 *After Hours Phone: (619) 440-5400*

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*




Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-F*
8:30AM-6:00PM

WERNER, REX, OD

Provider Gender: Male
License Number: 9378
NPI: 1891760716
Provider English Spoken: Y
Provider Language(s) Spoken: Italian, Spanish

WERNER OPTOMETRY

 2650 JAMACHA RD STE 155
EL CAJON, CA 92019
 *Phone: (619) 670-6296*
Fax: (619) 670-8852
 *After Hours Phone: (619) 670-6296*


Accepting New Patients: Yes

Site English Spoken: Y
 Site Language(s) Spoken: Italian, Spanish

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T

 *Hours: M 9:00AM-5:00PM*
TU 10:00AM-5:00PM
W-TH 9:00AM-5:00PM
F 8:00AM-2:00PM





WERNER, R AARON, OD

Provider Gender: Male
License Number: 13478
NPI: 1821259458
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y





WERNER OPTOMETRY


 2650 JAMACHA RD STE 155

D7. 视力提供者名录 - 眼科和视力服务





EL CAJON, CA 92019
 Phone: (619) 670-6296
 Fax: (619) 670-8852
 After Hours Phone: (619) 670-6296
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Italian, Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M 9:00AM-5:00PM
 TU 10:00AM-5:00PM
 W-TH 9:00AM-5:00PM
 F 8:00AM-2:00PM

ZAIDI, NOORINA, OD


Provider Gender: Female
 License Number: 35615
 NPI: 1023477262
 Provider English Spoken: Y
 Cultural Competency: Y
 RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
 300 S PIERCE ST STE 200
 EL CAJON, CA 92020
 Phone: (619) 440-5400
 Fax: (619) 440-0239
 After Hours Phone: (619) 440-5400
 Accepting New Patients: Yes
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T



 Hours: M-F
 8:30AM-6:00PM

ZHAO, TAILUN, MD

Provider Gender: Male
 License Number: C186414
 NPI: 1952659203
 Provider English Spoken: Y
 Cultural Competency: Y
 RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
 300 S PIERCE ST STE 200
 EL CAJON, CA 92020
 Phone: (619) 440-5400
 Fax: (619) 440-0239
 After Hours Phone: (619) 440-5400
 Accepting New Patients: Yes
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 8:30AM-6:00PM






ZVANUT, DONALD, OD

Provider Gender: Male
 License Number: 8642
 NPI: 1336211804
 Provider English Spoken: Y
 Cultural Competency: Y
 RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
 300 S PIERCE ST STE 200
 EL CAJON, CA 92020
 Phone: (619) 440-5400
 Fax: (619) 440-0239
 After Hours Phone: (619)

440-5400
 Accepting New Patients: Yes
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 8:30AM-6:00PM

ENCINITAS

ADAMS, MONA, OD

Provider Gender: Female
 License Number: 14457
 NPI: 1942564521
 Provider English Spoken: Y
 Cultural Competency: Y
 RADY CHILDRENS HOSPITAL ENCINITAS
 477 N EL CAMINO REAL
 STE D302
 ENCINITAS, CA 92024
 Phone: (858) 309-7702
 Fax: (858) 966-7403
 After Hours Phone: (858) 309-7702
 Accepting New Patients: Yes
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-5:00PM
AOTO, KIM, OD
 Provider Gender: Female

D7. 视力提供者名录 - 眼科和视力服务

License Number: 14524
NPI: 1780935650
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish, Vietnamese
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760)
943-7141

Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

BANSAL, PREETI, MD

Provider Gender: Female
License Number: A90890
NPI: 1871664631
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
RADY CHILDRENS HOSPITAL
ENCINITAS
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (858) 309-7702
Fax: (858) 966-7403

After Hours Phone: (858)
309-7702
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
Hours: M-F
8:00AM-5:00PM

BAUMANN, DANIELA, OD

Provider Gender: Female
License Number: 34530
NPI: 1982232146
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760)
943-7141

Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

BHATIA, SHAGUN, MD



Provider Gender: Female
License Number: A154902

NPI: 1104237353
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS HOSPITAL
ENCINITAS
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858)
309-7702
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
Hours: M-F
8:00AM-5:00PM

CHANG, TOM, MD

Provider Gender: Male
License Number: A69909
NPI: 1609848969
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760)
943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N


D7. 视力提供者名录 - 眼科和视力服务


 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F
8:00AM-5:00PM*

CHIU, STEPHAN, MD

Provider Gender: Male
License Number: A172634
NPI: 1053846956
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

 *Phone: (760) 943-7141*
Fax: (760) 943-0371

 *After Hours Phone: (760)
943-7141*

Accepting New Patients: Yes


Site English Spoken: Y

*Site Languages(s) Spoken:
Spanish*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-F
8:00AM-5:00PM*

DEAN, MOENA, OD

Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

 *Phone: (760) 943-7141*
Fax: (760) 943-0371

 *After Hours Phone: (760)
943-7141*

Accepting New Patients: Yes


Site English Spoken: Y

*Site Languages(s) Spoken:
Spanish*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-F
8:00AM-5:00PM*

DYER, SHARON, OD

Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

 *Phone: (760) 943-7141*
Fax: (760) 943-0371

 *After Hours Phone: (760)
943-7141*

Accepting New Patients: Yes


Site English Spoken: Y

*Site Languages(s) Spoken:
Spanish*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T


 *Hours: M-F
8:00AM-5:00PM*

HAMOUIE, JUDY, OD

Provider Gender: Female
License Number: 34984
NPI: 1518638287
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

 *Phone: (760) 943-7141*
Fax: (760) 943-0371

 *After Hours Phone: (760)
943-7141*

Accepting New Patients: Yes


Site English Spoken: Y

*Site Languages(s) Spoken:
Spanish*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T


 *Hours: M-F
8:00AM-5:00PM*


HUDSON, HENRY, MD

Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

 *Phone: (760) 943-7141*
Fax: (760) 943-0371

 *After Hours Phone: (760)
943-7141*

Accepting New Patients: Yes

Site English Spoken: Y

D7. 视力提供者名录 - 眼科和视力服务

- Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM
- KALBAKJI, NATALY, OD**
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
ACUITY EYE GROUP
 320 SANTA FE DR STE 104 ENCINITAS, CA 92024
 Phone: (760) 943-7141
Fax: (760) 943-0371
 After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM
- KHALIL, VADY, OD**
Provider Gender: Male
License Number: 35137
- Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM
- Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM
- KHIEU, TINA, OD**
Provider Gender: Female
License Number: 34777
NPI: 1962031617
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 320 SANTA FE DR STE 104 ENCINITAS, CA 92024
 Phone: (760) 943-7141
Fax: (760) 943-0371
 After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
- Site English Spoken: Y
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
RADY CHILDRENS HOSPITAL ENCINITAS
 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024
 Phone: (858) 309-7702
Fax: (858) 966-7403
 After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8:00AM-5:00PM
- MARR, RYAN, OD**
Provider Gender: Male
License Number: 35302
NPI: 1235857525
- Site English Spoken: Y
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
RADY CHILDRENS HOSPITAL ENCINITAS
 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024
 Phone: (858) 309-7702
Fax: (858) 966-7403
 After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8:00AM-5:00PM
- LEE, JASON, OD**
Provider Gender: Male
License Number: 14881
NPI: 1679985584
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
RADY CHILDRENS HOSPITAL ENCINITAS
 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024
 Phone: (858) 309-7702
Fax: (858) 966-7403
 After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8:00AM-5:00PM

D7. 视力提供者名录 - 眼科和视力服务

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

MOLL, ANGELA, MD

Provider Gender: Female

License Number: A105472

NPI: 1861648602

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS HOSPITAL
ENCINITAS

477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Provider Language(s) Spoken:

Indonesian, Spanish

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

O HALLORAN, HENRY, MD

Provider Gender: Male

License Number: A73282

NPI: 1235287947

Provider English Spoken: Y

Provider Language(s) Spoken:

German, Spanish

Cultural Competency: Y

RADY CHILDRENS HOSPITAL
ENCINITAS

477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT

D7. 视力提供者名录 - 眼科和视力服务

PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F
8:00AM-5:00PM

SAMUEL, MICHAEL, MD

Provider Gender: Male
License Number: A83237
NPI: 1730175670
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
☎ Phone: (760) 943-7141
Fax: (760) 943-0371
🕒 After Hours Phone: (760)
943-7141

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F
8:00AM-5:00PM

TON-NU, MY LINH, OD

Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
☎ Phone: (760) 943-7141

Fax: (760) 943-0371
 After Hours Phone: (760)
943-7141

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL): Spanish
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F
8:00AM-5:00PM

VINH, JOHN, OD

Provider Gender: Male
License Number: 14177
NPI: 1003102724

Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
☎ Phone: (760) 943-7141
Fax: (760) 943-0371

After Hours Phone: (760)
943-7141
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F
8:00AM-5:00PM

VIVIRITO, MARY, OD

Provider Gender: Female
License Number: 33798
NPI: 1477968667
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
☎ Phone: (760) 943-7141
Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F
8:00AM-5:00PM

ZHAO, TAILUN, MD

Provider Gender: Male
License Number: C186414
NPI: 1952659203

Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
☎ Phone: (760) 943-7141
Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

D7. 视力提供者名录 - 眼科和视力服务

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

ZVANUT, DONALD, OD

Provider Gender: Male
License Number: 8642
NPI: 1336211804
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
 Phone: (760) 943-7141
Fax: (760) 943-0371
 After Hours Phone: (760) 943-7141

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

ESCONDIDO

ADAMS, MONA, OD

Provider Gender: Female

License Number: 14457
NPI: 1942564521
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
 Phone: (760) 755-7600
Fax: (760) 755-7699

After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:30AM-4:30PM

ASIS, STEPHANIE, OD

Provider Gender: Female
License Number: 34013
NPI: 1902383540
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
 Phone: (760) 743-5872
Fax: (760) 743-5879
 After Hours Phone: (760) 743-5872

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

BANDAK, DIANA, OD

Provider Gender: Female
License Number: 34850
NPI: 1235805318
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
ACUITY EYE GROUP
 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
 Phone: (760) 743-5872
Fax: (760) 743-5879
 After Hours Phone: (760) 743-5872

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

BANSAL, PREETI, MD

Provider Gender: Female
License Number: A90890
NPI: 1871664631

D7. 视力提供者名录 - 眼科和视力服务

Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
RADY CHILDRENS
SPECIALISTS

2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-4:30PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL): RADY CHILDRENS
SPECIALISTS

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

BEAUDRY, AMANDA, OD

Provider Gender: Female

License Number: 33385

NPI: 1477903516

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-4:30PM

BERGMARK, JAMIE, OD

Provider Gender: Female

License Number: 33657

NPI: 1669920757

Provider English Spoken: Y

Cultural Competency: Y

2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-4:30PM

BHATIA, SHAGUN, MD

Provider Gender: Female

License Number: A154902

NPI: 1104237353

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within

D7. 视力提供者名录 - 眼科和视力服务

1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-4:30PM

BINDER, NICHOLAS, MD

Provider Gender: Male
License Number: A124698
NPI: 1306076716
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
📞 Phone: (760) 743-5872
Fax: (760) 743-5879

🕒 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

CHANG, TOM, MD

Provider Gender: Male
License Number: A69909
NPI: 1609848969
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
📞 Phone: (760) 743-5872

Fax: (760) 743-5879

🕒 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

CHAU, VIVIAN, OD

Provider Gender: Female
License Number: 35427
NPI: 1558052951
Provider English Spoken: Y
Provider Language(s) Spoken:
Chinese

Cultural Competency: Y

ACUITY EYE GROUP

📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
📞 Phone: (760) 743-5872
Fax: (760) 743-5879

🕒 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

DUONG, KIM, OD

Provider Gender: Female
License Number: 34222
NPI: 1114448651
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

📍 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
📞 Phone: (760) 755-7600
Fax: (760) 755-7699

🕒 After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-4:30PM


GOLDSTONE, ADAM, OD

Provider Gender: Male
License Number: 11051
NPI: 1316972995
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

D7. 视力提供者名录 - 眼科和视力服务

 Phone: (760) 743-5872
Fax: (760) 743-5879

 After Hours Phone: (760) 743-5872


Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

HAMOUIE, JUDY, OD

Provider Gender: Female


License Number: 34984


NPI: 1518638287

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

 Phone: (760) 743-5872
Fax: (760) 743-5879

 After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F

8:00AM-5:00PM

HSU, CHRISTOPHER, MD

Provider Gender: Male


License Number: A65973


NPI: 1336167618

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

 Phone: (760) 743-5872
Fax: (760) 743-5879

 After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

HUDSON, HENRY, MD

Provider Gender: Male


License Number: G76091


NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

 Phone: (760) 743-5872
Fax: (760) 743-5879

 After Hours Phone: (760)

743-5872


Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438


Provider English Spoken: Y


Provider Language(s) Spoken:

Arabic

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

 Phone: (760) 743-5872
Fax: (760) 743-5879

 After Hours Phone: (760) 743-5872


Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

D7. 视力提供者名录 - 眼科和视力服务

KARAPETIAN, ELENA, OD

Provider Gender: Female
License Number: 34514
NPI: 1184250417
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KHALIL, VADY, OD

Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Provider Language(s) Spoken:
Arabic
Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KHIEU, TINA, OD

Provider Gender: Female
License Number: 34777
NPI: 1962031617

Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KIM, PHILIP, OD

Provider Gender: Male
License Number: 33893
NPI: 1376929034

Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KLAREN, AMANDA, OD

Provider Gender: Female
License Number: 12617
NPI: 1396876611

Provider English Spoken: Y
Cultural Competency: Y

RADY CHILDRENS SPECIALISTS

2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

D7. 视力提供者名录 - 眼科和视力服务

Accepting New Patients: Yes


Site English Spoken: Y

American Sign Language (ASL): Provider English Spoken: Y

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:30AM-4:30PM

KWAK, ANGELA, OD

Provider Gender: Female

License Number: 13692


NPI: 1255564860


Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL): NPI: 1679985584

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

LE, TAM, OD

Provider Gender: Female

License Number: 12951


NPI: 1235268707


Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Vietnamese

Cultural Competency: Y

TAM T LE OD INC

 1711 E VALLEY PKWY STE
109
ESCONDIDO, CA 92027

 Phone: (760) 737-6064

Fax: (760) 737-6064

 After Hours Phone: (760)
737-6064

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Vietnamese

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TH
9:00AM-5:30PM
F 9:00AM-1:00PM

LEE, JASON, OD

Provider Gender: Male

License Number: 14881

NPI: 1679985584

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish


Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600


Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:30AM-4:30PM

MARR, RYAN, OD

Provider Gender: Male


License Number: 35302


NPI: 1235857525

Provider English Spoken: Y


Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

 Phone: (760) 743-5872

Fax: (760) 743-5879


 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

MCGRAW, JOSEPH, MD

D7. 视力提供者名录 - 眼科和视力服务

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

MOLL, ANGELA, MD

Provider Gender: Female

License Number: A105472

NPI: 1861648602

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-4:30PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

*Provider Language(s) Spoken:
Indonesian, Spanish*

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

MOVAGHAR, MANSOOR, MD

Provider Gender: Male

License Number: A100897

NPI: 1497792220

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-4:30PM

O HALLORAN, HENRY, MD

Provider Gender: Male

License Number: A73282

NPI: 1235287947

Provider English Spoken: Y

*Provider Language(s) Spoken:
German, Spanish*

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

D7. 视力提供者名录 - 眼科和视力服务

Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:30AM-4:30PM

PANSARA, MEGHA, MD

Provider Gender: Female
License Number: A143429
NPI: 1184983728
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati
Cultural Competency: Y

RADY CHILDRENS SPECIALISTS

2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
 Phone: (760) 755-7600
Fax: (760) 755-7699
 After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:30AM-4:30PM

PATEL, GITANE, MD

Provider Gender: Male
License Number: A108603

NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
 Phone: (760) 743-5872
Fax: (760) 743-5879
 After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

PATEL, SARJAN, MD

Provider Gender: Male
License Number: A114976
NPI: 1316199326
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: Y
ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
 Phone: (760) 743-5872
Fax: (760) 743-5879
 After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

PRABHU, SUJATA, MD

Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
 Phone: (760) 743-5872
Fax: (760) 743-5879
 After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

SAMUEL, MICHAEL, MD

Provider Gender: Male

D7. 视力提供者名录 - 眼科和视力服务

License Number: A83237
NPI: 1730175670

Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

THACH, TERILYN, OD

Provider Gender: Female

License Number: 11456

NPI: 1710030861

Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

INSIGHT VISION OPTOMETRY

2419 E VALLEY PKWY
ESCONDIDO, CA 92027

Phone: (760) 738-9931

Fax: (760) 888-2181

After Hours Phone: (760)
738-9931

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
9:30AM-5:00PM
TH 10:00AM-6:00PM
F 9:30AM-5:00PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

TRAN, ALEXANDER, OD

Provider Gender: Male

License Number: 14136

NPI: 1902414790

Provider English Spoken: Y
Cultural Competency: Y

RADY CHILDRENS
SPECIALISTS

2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-4:30PM

VERRET, ERIC, OD

Provider Gender: Male

License Number: 11401

NPI: 1194891853

Provider English Spoken: Y

Provider Language(s) Spoken:

French, Spanish

Cultural Competency: Y

ESCONDIDO EYECARE

613 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (760) 747-7979

Fax: (760) 747-7799

After Hours Phone: (760)
747-7979

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:

D7. 视力提供者名录 - 眼科和视力服务

Arabic, French, Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-TU
9:00AM-6:00PM
W-TH 9:00AM-8:00PM

VIVIRITO, MARY, OD

Provider Gender: Female
License Number: 33798
NPI: 1477968667
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760)
743-5872

Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

ZAIDI, NOORINA, OD

Provider Gender: Female

License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760)
743-5872

Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

ZHAO, TAILUN, MD

Provider Gender: Male
License Number: C186414
NPI: 1952659203
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760)
743-5872

Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:

Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

ZVANUT, DONALD, OD

Provider Gender: Male
License Number: 8642
NPI: 1336211804
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760)
743-5872

Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

FALLBROOK

ARCHIBALD, JOHN, OD

Provider Gender: Male
License Number: 11813

D7. 视力提供者名录 - 眼科和视力服务

NPI: 1902893357

Provider English Spoken: Y

Cultural Competency: Y

INLAND EYE SPECIALISTS

521 E ELDER ST STE 102
FALLBROOK, CA 92028

Phone: (760) 728-5728

Fax: (760) 728-5934

After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

COLEMAN, BROOKE, OD

Provider Gender: Female

License Number: 13551

NPI: 1700040748

Provider English Spoken: Y

Cultural Competency: Y

INLAND EYE SPECIALISTS

521 E ELDER ST STE 102
FALLBROOK, CA 92028

Phone: (760) 728-5728

Fax: (760) 728-5934

After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

CONNOR, JEFFREY, OD

Provider Gender: Male

License Number: 33683

NPI: 1063968980

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

INLAND EYE SPECIALISTS

521 E ELDER ST STE 102
FALLBROOK, CA 92028

Phone: (760) 728-5728

Fax: (760) 728-5934

After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

COOPER, MICHAEL, OD

Provider Gender: Male

License Number: 10476

NPI: 1164586244

Provider English Spoken: Y

Cultural Competency: Y

INLAND EYE SPECIALISTS

521 E ELDER ST STE 102
FALLBROOK, CA 92028

Phone: (760) 728-5728

Fax: (760) 728-5934

After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

DUONG, CHERYL, OD

Provider Gender: Female

License Number: 34070

NPI: 1366935678

Provider English Spoken: Y

Cultural Competency: Y

INLAND EYE SPECIALISTS

521 E ELDER ST STE 102
FALLBROOK, CA 92028

Phone: (760) 728-5728

Fax: (760) 728-5934

After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within

D7. 视力提供者名录 - 眼科和视力服务

1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

GEORGE, BRUCE, OD

Provider Gender: Male

License Number: 7696

NPI: 1356414551

Provider English Spoken: Y

Provider Language(s) Spoken:

Korean, Spanish

Cultural Competency: Y

BRUCE D GEORGE OD

📍 1102 S MAIN AVE
FALLBROOK, CA 92028

📞 Phone: (760) 723-8417

Fax: (760) 758-2063

🕒 After Hours Phone: (760)
723-8417

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M 1:00PM-5:00PM
TU-W 9:00AM-6:00PM
TH-F 9:00AM-5:00PM
SA 9:00AM-1:00PM

GEORGE, KENDALL, OD

Provider Gender: Male

License Number: 34270

NPI: 1619529948

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: Y

BRUCE D GEORGE OD

📍 1102 S MAIN AVE
FALLBROOK, CA 92028

📞 Phone: (760) 723-8417

Fax: (760) 758-2063

🕒 After Hours Phone: (760)
723-8417

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M 1:00PM-5:00PM
TU-W 9:00AM-6:00PM
TH-F 9:00AM-5:00PM
SA 9:00AM-1:00PM

KHINDA, SUNEHA, OD

Provider Gender: Female

License Number: 35494

NPI: 1750066726

Provider English Spoken: Y

Cultural Competency: Y

INLAND EYE SPECIALISTS

📍 521 E ELDER ST STE 102
FALLBROOK, CA 92028

📞 Phone: (760) 728-5728

Fax: (760) 728-5934

🕒 After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

TEW, JOHN, MD

Provider Gender: Male

License Number: A83206

NPI: 1174593354

Provider English Spoken: Y

Provider Language(s) Spoken:

Portuguese

Cultural Competency: Y

INLAND EYE SPECIALISTS

📍 521 E ELDER ST STE 102
FALLBROOK, CA 92028

📞 Phone: (760) 728-5728

Fax: (760) 728-5934

🕒 After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

IMPERIAL BEACH

HANONO, HELFON, OD

Provider Gender: Male

License Number: 6681

NPI: 1619942034

Provider English Spoken: Y

D7. 视力提供者名录 - 眼科和视力服务

Provider Language(s) Spoken: Spanish
 Cultural Competency: Y
 IMPERIAL BEACH
 OPTOMETRY INC APC
 894 PALM AVE STE B
 IMPERIAL BEACH, CA 91932
 Phone: (619) 424-9333
 Fax: (619) 424-3356
 After Hours Phone: (619) 424-9333

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 9:00AM-6:00PM

HANONO, ABRAHAM, OD

Provider Gender: Male
 License Number: 14900
 NPI: 1356754741
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hebrew, Spanish
 Cultural Competency: Y
 IMPERIAL BEACH
 OPTOMETRY INC APC
 894 PALM AVE STE B
 IMPERIAL BEACH, CA 91932
 Phone: (619) 424-9333
 Fax: (619) 424-3356
 After Hours Phone: (619) 424-9333
 Accepting New Patients: Yes
 Site English Spoken: Y

Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 9:00AM-6:00PM

LA JOLLA

BAUMANN, DANIELA, OD

Provider Gender: Female
 License Number: 34530
 NPI: 1982232146
 Provider English Spoken: Y
 Cultural Competency: Y
 ACUITY EYE GROUP
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037
 Phone: (858) 457-3010
 Fax: (858) 457-0028
 After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-4:30PM

CHIU, STEPHAN, MD

Provider Gender: Male

License Number: A172634
 NPI: 1053846956
 Provider English Spoken: Y
 Cultural Competency: Y
 ACUITY EYE GROUP
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037
 Phone: (858) 457-3010
 Fax: (858) 457-0028
 After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-4:30PM



CODEN, DANIEL, MD

Provider Gender: Male
 License Number: G57587
 NPI: 1942317508
 Provider English Spoken: Y
 Cultural Competency: Y
 ACUITY EYE GROUP
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037
 Phone: (858) 457-3010
 Fax: (858) 457-0028
 After Hours Phone: (858) 457-3010

Accepting New Patients: Yes






Site English Spoken: Y
 Site Languages(s) Spoken:

D7. 视力提供者名录 - 眼科和视力服务

Spanish, Tagalog
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM

DEAN, MOENA, OD

Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
 Phone: (858) 457-3010
Fax: (858) 457-0028
 After Hours Phone: (858)
457-3010
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish, Tagalog
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM

DYER, SHARON, OD


Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y

Cultural Competency: Y
ACUITY EYE GROUP
 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
 Phone: (858) 457-3010
Fax: (858) 457-0028
 After Hours Phone: (858)
457-3010
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish, Tagalog
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM

HO, AMIEE, OD

Provider Gender: Female
License Number: 14527
NPI: 1396009478
Provider English Spoken: Y
Cultural Competency: Y


PERLMAN
OPHTHALMOLOGY-UCSD
 9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
 Phone: (858) 534-6290
Fax: (858) 732-0921
 After Hours Phone: (858)
534-6290
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Public transportation (within
1/2 mile from Site): 1T
 Hours: M-F
8:00AM-4:30PM

HO, AMIEE, OD

Provider Gender: Female
License Number: 14527
NPI: 1396009478
Provider English Spoken: Y
Cultural Competency: Y
UCSD SHILEY EYE CENTER
 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (858) 534-6290
Fax: (858) 732-0921
 After Hours Phone: (858)
534-6290
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

HOO, PAMELA, OD

Provider Gender: Female
License Number: 11033
NPI: 1275566010
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
UCSD SHILEY EYE CENTER
 9415 CAMPUS POINT DR

D7. 视力提供者名录 - 眼科和视力服务

LA JOLLA, CA 92093
☎ Phone: (858) 534-6290
Fax: (858) 732-0921

🕒 After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

🗨 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

HOO, PAMELA, OD

Provider Gender: Female

License Number: 11033

NPI: 1275566010

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

📍 9350 CAMPUS POINT DR
STE 1B

LA JOLLA, CA 92037
☎ Phone: (858) 534-6290
Fax: (858) 732-0921

🕒 After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

🗨 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-4:30PM

HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091

NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037
☎ Phone: (858) 457-3010
Fax: (858) 457-0028

🕒 After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

🗨 Site English Spoken: Y

🗨 Site Language(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

HUSTANA, LARA, OD

Provider Gender: Female

License Number: 11472

NPI: 1235161597

Provider English Spoken: Y

Provider Language(s) Spoken:
French

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

📍 9350 CAMPUS POINT DR

STE 1B

LA JOLLA, CA 92037

☎ Phone: (858) 534-6290
Fax: (858) 732-0921

🕒 After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

🗨 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-4:30PM

HUSTANA, LARA, OD

Provider Gender: Female

License Number: 11472

NPI: 1235161597

Provider English Spoken: Y

Provider Language(s) Spoken:
French

Cultural Competency: Y

UCSD SHILEY EYE CENTER

📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (858) 534-6290
Fax: (858) 732-0921

🕒 After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

🗨 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

D7. 视力提供者名录 - 眼科和视力服务

- SA 8:00AM-2:00PM
- JOMOC, CAITLIN, OD**
Provider Gender: Female
License Number: 35009
NPI: 1861164642
Provider English Spoken: Y
Cultural Competency: Y
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM
- JOMOC, CAITLIN, OD**
Provider Gender: Female
License Number: 35009
NPI: 1861164642
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN
OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
- Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-4:30PM
- KALBAKJI, NATALY, OD**
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Language(s) Spoken: Spanish, Tagalog
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-4:30PM
- KHIEU, TINA, OD**
Provider Gender: Female
License Number: 34777
NPI: 1962031617
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
- KHALIL, VADY, OD**
Provider Gender: Male

D7. 视力提供者名录 - 眼科和视力服务

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-4:30PM

KIM, PHILIP, OD

Provider Gender: Male
 License Number: 33893
 NPI: 1376929034
 Provider English Spoken: Y
 Cultural Competency: Y
 UCSD SHILEY EYE CENTER
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093
 Phone: (858) 534-6290
 Fax: (858) 732-0921
 After Hours Phone: (858) 534-6290
 Accepting New Patients: Yes
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-4:30PM
 SA 8:00AM-2:00PM

KIM, PHILIP, OD

Provider Gender: Male
 License Number: 33893
 NPI: 1376929034
 Provider English Spoken: Y

Cultural Competency: Y
 PERLMAN
 OPHTHALMOLOGY-UCSD
 9350 CAMPUS POINT DR
 STE 1B
 LA JOLLA, CA 92037
 Phone: (858) 534-6290
 Fax: (858) 732-0921
 After Hours Phone: (858) 534-6290
 Accepting New Patients: Yes
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-4:30PM

KULISCHAK, JOHN, OD

Provider Gender: Male
 License Number: 9279
 NPI: 1740205236
 Provider English Spoken: Y
 Cultural Competency: Y
 UCSD SHILEY EYE CENTER
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093
 Phone: (858) 534-6290
 Fax: (858) 732-0921
 After Hours Phone: (858) 534-6290
 Accepting New Patients: Yes
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
 8:00AM-4:30PM
 SA 8:00AM-2:00PM

KULISCHAK, JOHN, OD

Provider Gender: Male
 License Number: 9279
 NPI: 1740205236
 Provider English Spoken: Y
 Cultural Competency: Y
 PERLMAN
 OPHTHALMOLOGY-UCSD
 9350 CAMPUS POINT DR
 STE 1B
 LA JOLLA, CA 92037
 Phone: (858) 534-6290
 Fax: (858) 732-0921
 After Hours Phone: (858) 534-6290
 Accepting New Patients: Yes
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-4:30PM

LAM, ANNE, OD

Provider Gender: Female
 License Number: 12810
 NPI: 1174550768
 Provider English Spoken: Y
 Cultural Competency: Y
 UCSD SHILEY EYE CENTER
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093
 Phone: (858) 534-6290
 Fax: (858) 732-0921
 After Hours Phone: (858)

D7. 视力提供者名录 - 眼科和视力服务

534-6290
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

LAM, ANNE, OD

Provider Gender: Female
License Number: 12810
NPI: 1174550768
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
 Phone: (858) 534-6290
Fax: (858) 732-0921
 After Hours Phone: (858)
534-6290
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-4:30PM

LUSBY, FRANKLIN, MD

Provider Gender: Male
License Number: G41830

NPI: 1265526180
Provider English Spoken: Y
Cultural Competency: Y
LUSBY VISION INSTITUTE
 9850 GENESEE AVE STE
220
LA JOLLA, CA 92037
 Phone: (858) 459-6200
Fax: (858) 459-2025
 After Hours Phone: (858)
459-6200
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
9:00AM-5:00PM

MARR, RYAN, OD

Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
 Phone: (858) 457-3010
Fax: (858) 457-0028
 After Hours Phone: (858)
457-3010
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish, Tagalog
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM

MCCLEAN, ESMERALDA, OD

Provider Gender: Female
License Number: 15001
NPI: 1962817981
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
 Phone: (858) 534-6290
Fax: (858) 732-0921
 After Hours Phone: (858)
534-6290
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-4:30PM

MIZOGUCHI, LIANNE, OD

Provider Gender: Female
License Number: 10104
NPI: 1619900313
Provider English Spoken: Y
Cultural Competency: Y

D7. 视力提供者名录 - 眼科和视力服务

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

MIZOGUCHI, LIANNE, OD

Provider Gender: Female

License Number: 10104

NPI: 1619900313

Provider English Spoken: Y

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B

LA JOLLA, CA 92037

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:30PM

MOOR, TRACY, OD

Provider Gender: Female

License Number: 35085

NPI: 1184283277

Provider English Spoken: Y

Cultural Competency: Y

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

MOOR, TRACY, OD

Provider Gender: Female

License Number: 35085

NPI: 1184283277

Provider English Spoken: Y

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B

LA JOLLA, CA 92037

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)

534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:30PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Provider Language(s) Spoken:
Indonesian, Spanish

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

D7. 视力提供者名录 - 眼科和视力服务

PERRY, ARTHUR, MD

Provider Gender: Male

License Number: C37934

NPI: 1194832725

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

PRATT, STEVEN, MD

Provider Gender: Male

License Number: G32379

NPI: 1407963044

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F

8:00AM-4:30PM

TONNU, ANH, OD

Provider Gender: Female

License Number: 11318

NPI: 1679521280

Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177

NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

D7. 视力提供者名录 - 眼科和视力服务

Fax: (858) 457-0028

☎ After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

☎ Phone: (858) 457-3010

Fax: (858) 457-0028

☎ After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

VO, ANDREW MINH, OD

Provider Gender: Male

License Number: 33869

NPI: 1790291565

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

📍 9350 CAMPUS POINT DR STE 1B

LA JOLLA, CA 92037

☎ Phone: (858) 534-6290

Fax: (858) 732-0921

☎ After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-4:30PM

VO, ANDREW MINH, OD

Provider Gender: Male

License Number: 33869

NPI: 1790291565

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: Y

UCSD SHILEY EYE CENTER

📍 9415 CAMPUS POINT DR

LA JOLLA, CA 92093

☎ Phone: (858) 534-6290

Fax: (858) 732-0921

☎ After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

YU, CAROL, OD

Provider Gender: Female

License Number: 34047

NPI: 1639697451

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Chinese

Cultural Competency: Y

UCSD SHILEY EYE CENTER

📍 9415 CAMPUS POINT DR

LA JOLLA, CA 92093

☎ Phone: (858) 534-6290

Fax: (858) 732-0921

☎ After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

D7. 视力提供者名录 - 眼科和视力服务

SA 8:00AM-2:00PM

YU, CAROL, OD
Provider Gender: Female
License Number: 34047
NPI: 1639697451
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish, Chinese
Cultural Competency: Y

PERLMAN
OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037

Phone: (858) 534-6290
Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:30PM

ZAIDI, NOORINA, OD
Provider Gender: Female
License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

ZHAO, TAILUN, MD
Provider Gender: Male
License Number: C186414
NPI: 1952659203
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Phone: (858) 457-3010
Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

ZVANUT, DONALD, OD
Provider Gender: Male
License Number: 8642
NPI: 1336211804
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Phone: (858) 457-3010
Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

LA MESA

AOTO, KIM, OD
Provider Gender: Female
License Number: 14524
NPI: 1780935650
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish, Vietnamese
Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

D7. 视力提供者名录 - 眼科和视力服务

Fax: (619) 722-8465

☎ After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

ASIS, STEPHANIE, OD

Provider Gender: Female

License Number: 34013

NPI: 1902383540

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

☎ After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

AVALLONE, THOMAS, MD

Provider Gender: Male

License Number: A147199

NPI: 1679865950

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

☎ Phone: (619) 465-2020

Fax: (619) 698-1189

☎ After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

BAGHOUMIAN, MARINEH, OD

Provider Gender: Female

License Number: 14842

NPI: 1972929438

Provider English Spoken: Y

Provider Language(s) Spoken:
Armenian

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

☎ After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

☎ After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

BAUMANN, DANIELA, OD

D7. 视力提供者名录 - 眼科和视力服务

Provider Gender: Female
License Number: 34530
NPI: 1982232146
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020
Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

BINDER, NICHOLAS, MD

Provider Gender: Male
License Number: A124698
NPI: 1306076716

Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460
Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

BUI, TINA, OD

Provider Gender: Female
License Number: 33435
NPI: 1497107312

Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

BUIIQUE OPTOMETRY

5020 BALTIMORE DR STE B
LA MESA, CA 91942

Phone: (619) 464-8303
Fax: (619) 464-4971

After Hours Phone: (619)
464-8303

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-2:00PM

CAUCHI, CAROLINE GUERRERO, OD

Provider Gender: Female
License Number: 6882
NPI: 1831268903
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: Y
VISION SOLUTIONS
OPTOMETRY

8235 UNIVERSITY AVE
LA MESA, CA 91942

Phone: (619) 461-4913
Fax: (888) 509-6483

After Hours Phone: (619)
461-4913

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
9:00AM-5:30PM
W 8:00AM-5:00PM
TH 9:00AM-6:00PM
F 8:00AM-1:00PM

CHANG, TOM, MD

Provider Gender: Male
License Number: A69909
NPI: 1609848969

Provider English Spoken: Y
Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

D7. 视力提供者名录 - 眼科和视力服务

☎ Phone: (619) 465-2020

Fax: (619) 698-1189

📞 After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

CHEW, WESLEY, OD

Provider Gender: Male

License Number: 14901

NPI: 1952714446

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

📞 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

CHIU, STEPHAN, MD

Provider Gender: Male

License Number: A172634

NPI: 1053846956

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN

DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT
CENTER DR # 551

LA MESA, CA 91942

☎ Phone: (619) 465-2020

Fax: (619) 698-1189

📞 After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

COCKERHAM, KIMBERLY, MD

Provider Gender: Female

License Number: G86885

NPI: 1366493629

Provider English Spoken: Y

Cultural Competency: Y

ALVARADO EYE ASSOCIATES

MED CLINIC INC

📍 7877 PARKWAY DR STE 100
LA MESA, CA 91942

☎ Phone: (619) 460-3711

Fax: (619) 460-2184

📞 After Hours Phone: (619)
460-3711

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:30AM-4:30PM

CONRAD, RANDALL, OD

Provider Gender: Male

License Number: 6423

NPI: 1962617464

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

ALVARADO EYE ASSOCIATES
MED CLINIC INC

📍 7877 PARKWAY DR STE 100
LA MESA, CA 91942

☎ Phone: (619) 460-3711

Fax: (619) 460-2184

📞 After Hours Phone: (619)
460-3711

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:30AM-4:30PM

DEAN, MOENA, OD

Provider Gender: Female

D7. 视力提供者名录 - 眼科和视力服务

License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942
☎ Phone: (619) 465-2020
Fax: (619) 698-1189
🕒 After Hours Phone: (619)
465-2020

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F
8:00AM-5:00PM

DEAN, MOENA, OD

Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942
☎ Phone: (619) 722-8460
Fax: (619) 722-8465
🕒 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:

Spanish
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F
8:00AM-5:00PM

DYER, SHARON, OD

Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942
☎ Phone: (619) 722-8460
Fax: (619) 722-8465
🕒 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F
8:00AM-5:00PM

DYER, SHARON, OD

Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP
📍 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942
☎ Phone: (619) 465-2020
Fax: (619) 698-1189
🕒 After Hours Phone: (619)
465-2020

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F
8:00AM-5:00PM


GOLLOGLY, HEIDRUN, MD

Provider Gender: Female
License Number: A134761
NPI: 1477879823
Provider English Spoken: Y
Provider Language(s) Spoken:
German, French, Spanish
Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP
📍 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942
☎ Phone: (619) 465-2020
Fax: (619) 698-1189

🕒 After Hours Phone: (619)
465-2020
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:

D7. 视力提供者名录 - 眼科和视力服务

Spanish
American Sign Language (ASL):
 N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M-F 8:00AM-5:00PM*



GOLLOGLY, HEIDRUN, MD

Provider Gender: Female
License Number: A134761
NPI: 1477879823
Provider English Spoken: Y
Provider Language(s) Spoken: German, French, Spanish
Cultural Competency: Y
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942
 *Phone: (619) 722-8460*
Fax: (619) 722-8465
 *After Hours Phone: (619) 722-8460*
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Language(s) Spoken: Spanish
American Sign Language (ASL):
 N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F 8:00AM-5:00PM*

GRAY, IGA, MD

Provider Gender: Female
License Number: A174875
NPI: 1033538350



Provider English Spoken: Y
Cultural Competency: Y
 ALVARADO EYE ASSOCIATES
 MED CLINIC INC
 7877 PARKWAY DR STE 100
 LA MESA, CA 91942
 *Phone: (619) 460-3711*
Fax: (619) 460-2184
 *After Hours Phone: (619) 460-3711*

Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
 N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M-F 8:30AM-4:30PM*

HAIGHT, BRUCE, MD

Provider Gender: Male
License Number: G41117
NPI: 1427029628
Provider English Spoken: Y
Cultural Competency: Y
 EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
 5565 GROSSMONT
 CENTER DR # 551
 LA MESA, CA 91942
 *Phone: (619) 465-2020*
Fax: (619) 698-1189
 *After Hours Phone: (619) 465-2020*


Accepting New Patients: Yes
 Site English Spoken: Y
 Site Language(s) Spoken: Spanish
American Sign Language (ASL):
 N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M-F 8:00AM-5:00PM*

HAIGHT, BRUCE, MD

Provider Gender: Male
License Number: G41117
NPI: 1427029628
Provider English Spoken: Y
Cultural Competency: Y
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942
 *Phone: (619) 722-8460*
Fax: (619) 722-8465
 *After Hours Phone: (619) 722-8460*
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Language(s) Spoken: Spanish
American Sign Language (ASL):
 N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F 8:00AM-5:00PM*

HAMOUIE, JUDY, OD

Provider Gender: Female
License Number: 34984
NPI: 1518638287
Provider English Spoken: Y
Cultural Competency: Y
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942

D7. 视力提供者名录 - 眼科和视力服务

☎ Phone: (619) 722-8460
Fax: (619) 722-8465

📞 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

HAN, SULKI, OD

Provider Gender: Female

License Number: 34171

NPI: 1750802195

Provider English Spoken: Y

Provider Language(s) Spoken:
Korean

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

📞 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

HIXSON, THOMAS, OD

Provider Gender: Male

License Number: 7490

NPI: 1528072683

Provider English Spoken: Y

Cultural Competency: Y

LA MESA VISION CARE

📍 8007 LA MESA BLVD
LA MESA, CA 91942

☎ Phone: (619) 466-5665

Fax: (619) 466-5688

📞 After Hours Phone: (619)
466-5665

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 8:00AM-4:00PM

TU 9:00AM-6:00PM

W 8:00AM-4:00PM

TH 9:00AM-6:00PM

F 9:00AM-5:00PM

SA 8:00AM-1:00PM

HSU, CHRISTOPHER, MD

Provider Gender: Male

License Number: A65973

NPI: 1336167618

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

📞 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091

NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

📞 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

HUDSON, HENRY, MD

D7. 视力提供者名录 - 眼科和视力服务

Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020
Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

HUNG, JANICE, OD

Provider Gender: Female
License Number: 34296
NPI: 1750917936
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460
Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female
License Number: 34943
NPI: 1700556438

Provider English Spoken: Y

Provider Language(s) Spoken:
Arabic

Cultural Competency: Y
ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460
Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female
License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Provider Language(s) Spoken:
Arabic

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020
Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

KATZMAN, LEE, MD

Provider Gender: Male
License Number: A135673
NPI: 1912297284

Provider English Spoken: Y
Cultural Competency: Y

ALVARADO EYE ASSOCIATES
MED CLINIC INC

7877 PARKWAY DR STE 100
LA MESA, CA 91942

Phone: (619) 460-3711
Fax: (619) 460-2184

After Hours Phone: (619)
460-3711

Accepting New Patients: Yes

D7. 视力提供者名录 - 眼科和视力服务

Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:30AM-4:30PM

KATZMAN, BARRY, MD

Provider Gender: Male
License Number: A34834
NPI: 1760473797
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942
 Phone: (619) 722-8460
Fax: (619) 722-8465
 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

KHALIL, VADY, OD

Provider Gender: Male
License Number: 35137
NPI: 1275263584

Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
LA MESA, CA 91942
 Phone: (619) 722-8460
Fax: (619) 722-8465
 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

KHALIL, VADY, OD

Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942
 Phone: (619) 465-2020
Fax: (619) 698-1189

After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-5:00PM

KHIEU, TINA, OD

Provider Gender: Female
License Number: 34777
NPI: 1962031617
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942
 Phone: (619) 465-2020
Fax: (619) 698-1189

After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-5:00PM

KHIEU, TINA, OD

Provider Gender: Female

D7. 视力提供者名录 - 眼科和视力服务

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

LEE, SALLY, DO

Provider Gender: Female

License Number: 20A8088

NPI: 1457468514

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish, Chinese

Cultural Competency: Y

SAN DIEGO EYE

PROFESSIONALS

8291 LA MESA BLVD
LA MESA, CA 91942

Phone: (619) 583-4295

Fax: (619) 393-1133

After Hours Phone: (619)
583-4295

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
German, Spanish, Chinese
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: TU-F
9:00AM-5:00PM
SA 9:00AM-5:00PM

LEVY, PHILLIP, OD

Provider Gender: Male

License Number: 4884

NPI: 1528189115

Provider English Spoken: Y

Cultural Competency: Y

BUIRIQUE OPTOMETRY

5020 BALTIMORE DR STE B
LA MESA, CA 91942

Phone: (619) 464-8303

Fax: (619) 464-4971

After Hours Phone: (619)
464-8303

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-2:00PM

MANNEN, JOSEPH, OD

Provider Gender: Male

License Number: 33650

NPI: 1851827034

Provider English Spoken: Y

Cultural Competency: Y

ALVARADO EYE ASSOCIATES
MED CLINIC INC

7877 PARKWAY DR STE 100
LA MESA, CA 91942

Phone: (619) 460-3711

Fax: (619) 460-2184

After Hours Phone: (619)
460-3711

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:30AM-4:30PM

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551

LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)
465-2020



Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

D7. 视力提供者名录 - 眼科和视力服务


N
 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1U
 **Hours: M-F 8:00AM-5:00PM**

MARR, RYAN, OD

Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N


 **Accessibility: CONTACT PROVIDER**


Public transportation (within 1/2 mile from Site): 1T

 **Hours: M-F 8:00AM-5:00PM**

MCGRAW, JOSEPH, MD

Provider Gender: Male
License Number: A155228
NPI: 1588624852
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1T

 **Hours: M-F 8:00AM-5:00PM**

MCGRAW, JOSEPH, MD


Provider Gender: Male
License Number: A155228
NPI: 1588624852
Provider English Spoken: Y
Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1U

 **Hours: M-F 8:00AM-5:00PM**

MERALI, MURTAZA, OD

Provider Gender: Female
License Number: 14558
NPI: 1972944189


Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460


Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1T

 **Hours: M-F 8:00AM-5:00PM**

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License Number: A125435
NPI: 1235366782

Provider English Spoken: Y

Provider Language(s) Spoken: Indonesian, Spanish

D7. 视力提供者名录 - 眼科和视力服务

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Provider Language(s) Spoken:
Indonesian, Spanish

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:

Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

NGUYEN, THY, OD

Provider Gender: Female

License Number: 12746

NPI: 1750490413

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish, Vietnamese

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

OU, JOCELYN, OD

Provider Gender: Female

License Number: 34063

NPI: 1225518996

Provider English Spoken: Y

Cultural Competency: Y

ALVARADO EYE ASSOCIATES
MED CLINIC INC

7877 PARKWAY DR STE 100
LA MESA, CA 91942

Phone: (619) 460-3711

Fax: (619) 460-2184

After Hours Phone: (619)
460-3711

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:30AM-4:30PM

PANDYA, BHUMIKA, OD

Provider Gender: Female

License Number: 35025

NPI: 1063182822

Provider English Spoken: Y

Provider Language(s) Spoken:
Hindi

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460



Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

D7. 视力提供者名录 - 眼科和视力服务

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F*
8:00AM-5:00PM



PATEL, SARJAN, MD

Provider Gender: Male
License Number: A114976
NPI: 1316199326
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942
 *Phone: (619) 722-8460*
Fax: (619) 722-8465
 *After Hours Phone: (619) 722-8460*
Accepting New Patients: Yes
 *Site English Spoken: Y*
 *Site Language(s) Spoken: Spanish*

American Sign Language (ASL): Spanish
N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F*
8:00AM-5:00PM



PATEL, GITANE, MD

Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942
 *Phone: (619) 722-8460*
Fax: (619) 722-8465
 *After Hours Phone: (619) 722-8460*


Accepting New Patients: Yes

 *Site English Spoken: Y*
 *Site Language(s) Spoken: Spanish*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*



Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-F*
8:00AM-5:00PM



PETERS, JAMIE, OD

Provider Gender: Female
License Number: 10724
NPI: 1073691077
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y

VISION SOLUTIONS OPTOMETRY

 8235 UNIVERSITY AVE
LA MESA, CA 91942
 *Phone: (619) 461-4913*
Fax: (888) 509-6483
 *After Hours Phone: (619) 461-4913*

Accepting New Patients: Yes

 *Site English Spoken: Y*
 *Site Language(s) Spoken: Spanish*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-TU*
9:00AM-5:30PM
W 8:00AM-5:00PM
TH 9:00AM-6:00PM
F 8:00AM-1:00PM



PRABHU, SUJATA, MD

Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y



EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942
 *Phone: (619) 465-2020*
Fax: (619) 698-1189
 *After Hours Phone: (619) 465-2020*

Accepting New Patients: Yes

 *Site English Spoken: Y*
 *Site Language(s) Spoken: Spanish*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M-F*
8:00AM-5:00PM

PRABHU, SUJATA, MD

Provider Gender: Female

D7. 视力提供者名录 - 眼科和视力服务

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

QUACH, PHUC, OD

Provider Gender: Male

License Number: 12891

NPI: 1770617805

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish, Vietnamese

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

SAMUEL, MICHAEL, MD

Provider Gender: Male

License Number: A83237

NPI: 1730175670

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

SCOTT, JEFFREY, OD

Provider Gender: Male

License Number: 34978

NPI: 1568813434

Provider English Spoken: Y

Cultural Competency: Y
ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

TILLMAN, SYLVIA, OD

Provider Gender: Female

License Number: 9726

NPI: 1174730824

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460
























Accepting New Patients: Yes

Site English Spoken: Y


Site Language(s) Spoken:
Spanish

American Sign Language (ASL):

D7. 视力提供者名录 - 眼科和视力服务

- N**
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F 8:00AM-5:00PM*
- TON-NU, MY LINH, OD**
Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
- ACUITY EYE GROUP**
 7339 EL CAJON BLVD STE J LA MESA, CA 91942
 *Phone: (619) 722-8460*
Fax: (619) 722-8465
 *After Hours Phone: (619) 722-8460*
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F 8:00AM-5:00PM*
- TON-NU, MY LINH, OD**
Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
- EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP**
 5565 GROSSMONT CENTER DR # 551 LA MESA, CA 91942
 *Phone: (619) 465-2020*
Fax: (619) 698-1189
 *After Hours Phone: (619) 465-2020*
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M-F 8:00AM-5:00PM*
- TONNU, ANH, OD**
Provider Gender: Female
License Number: 11318
NPI: 1679521280
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
- ACUITY EYE GROUP**
 7339 EL CAJON BLVD STE J LA MESA, CA 91942
 *Phone: (619) 722-8460*
Fax: (619) 722-8465
 *After Hours Phone: (619) 722-8460*
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
-  *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F 8:00AM-5:00PM*
- TRAN, HENRY, OD**
Provider Gender: Male
License Number: 15159
NPI: 1467846709
Provider English Spoken: Y
Cultural Competency: Y
- ACUITY EYE GROUP**
 7339 EL CAJON BLVD STE J LA MESA, CA 91942
 *Phone: (619) 722-8460*
Fax: (619) 722-8465
 *After Hours Phone: (619) 722-8460*
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F 8:00AM-5:00PM*
- TSUI, NANCY, OD**
Provider Gender: Female
License Number: 33944
NPI: 1841785037
Provider English Spoken: Y
Cultural Competency: Y
- ACUITY EYE GROUP**
 7339 EL CAJON BLVD STE J LA MESA, CA 91942

D7. 视力提供者名录 - 眼科和视力服务

 Phone: (619) 722-8460
Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460


Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

TU, BEVERLY, OD

Provider Gender: Female

License Number: 34108


NPI: 1053892794


Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Vietnamese

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460
Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460


Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

VINH, JOHN, OD

Provider Gender: Male


License Number: 14177


NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460
Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177


NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

 Phone: (619) 465-2020
Fax: (619) 698-1189

 After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F
8:00AM-5:00PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798


NPI: 1477968667


Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

 Phone: (619) 465-2020
Fax: (619) 698-1189

 After Hours Phone: (619) 465-2020


Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

D7. 视力提供者名录 - 眼科和视力服务

🕒 Hours: M-F
8:00AM-5:00PM

VIVIRITO, MARY, OD

Provider Gender: Female
License Number: 33798
NPI: 1477968667
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942
☎ Phone: (619) 722-8460
Fax: (619) 722-8465

🕒 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y
 Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

WONG, SHARON, OD

Provider Gender: Female
License Number: 15137
NPI: 1497159552
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

☎ Phone: (619) 722-8460
Fax: (619) 722-8465

🕒 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y
 Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

YOUNG, ALLA, OD

Provider Gender: Female
License Number: 34191
NPI: 1285085142
Provider English Spoken: Y
Provider Language(s) Spoken:
Russian
Cultural Competency: Y

ALVARADO EYE ASSOCIATES
MED CLINIC INC

📍 7877 PARKWAY DR STE 100
LA MESA, CA 91942

☎ Phone: (619) 460-3711
Fax: (619) 460-2184

🕒 After Hours Phone: (619)
460-3711

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:30AM-4:30PM

ZAIDI, NOORINA, OD

Provider Gender: Female
License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

☎ Phone: (619) 465-2020
Fax: (619) 698-1189

🕒 After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y
 Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

ZAIDI, NOORINA, OD

Provider Gender: Female
License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460
Fax: (619) 722-8465

D7. 视力提供者名录 - 眼科和视力服务

☎ After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

ZVANUT, DONALD, OD

Provider Gender: Male

License Number: 8642

NPI: 1336211804

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

☎ After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

ZVANUT, DONALD, OD

Provider Gender: Male

License Number: 8642

NPI: 1336211804

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942

☎ Phone: (619) 465-2020

Fax: (619) 698-1189

☎ After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

LAKESIDE

FLEMING, JOHN, OD

Provider Gender: Male

License Number: 8461

NPI: 1033192133

Provider English Spoken: Y

Cultural Competency: Y

JOHN C FLEMING OD

📍 9710 WINTER GARDENS BLVD STE A
LAKESIDE, CA 92040

☎ Phone: (619) 443-1075

Fax: (619) 443-9382

☎ After Hours Phone: (619)

443-1075

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM

HOANG, KENNY, OD

Provider Gender: Male

License Number: 35207

NPI: 1740868603

Provider English Spoken: Y

Cultural Competency: Y

JOHN C FLEMING OD

📍 9710 WINTER GARDENS BLVD STE A
LAKESIDE, CA 92040

☎ Phone: (619) 443-1075

Fax: (619) 443-9382

☎ After Hours Phone: (619) 443-1075

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM

JOHNSON, CHRISTOPHER, OD

Provider Gender: Male

License Number: 15100

D7. 视力提供者名录 - 眼科和视力服务

NPI: 1568861425

Provider English Spoken: Y

Cultural Competency: Y

JOHN C FLEMING OD

9710 WINTER GARDENS
BLVD STE A

LAKESIDE, CA 92040

Phone: (619) 443-1075

Fax: (619) 443-9382

After Hours Phone: (619)
443-1075

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM

NATIONAL CITY

AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish, Vietnamese

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302

NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

BINDER, NICHOLAS, MD

Provider Gender: Male

License Number: A124698

NPI: 1306076716

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

D7. 视力提供者名录 - 眼科和视力服务

🕒 Hours: M-F
8:00AM-4:30PM

DEAN, MOENA, OD

Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700

Fax: (619) 267-8221

📞 After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

🗣 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

DEAN, MOENA, OD

Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

☎ Phone: (619) 472-1010

Fax: (619) 479-5233

📞 After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

🗣 Site English Spoken: Y

🗣 Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

DYER, SHARON, OD

Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

☎ Phone: (619) 472-1010

Fax: (619) 479-5233

📞 After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

🗣 Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

DYER, SHARON, OD

Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700

Fax: (619) 267-8221

📞 After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

🗣 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

GOLLOGLY, HEIDRUN, MD

Provider Gender: Female
License Number: A134761
NPI: 1477879823
Provider English Spoken: Y
Provider Language(s) Spoken:
German, French, Spanish
Cultural Competency: Y
ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

☎ Phone: (619) 472-1010

Fax: (619) 479-5233

📞 After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

🗣 Site English Spoken: Y

D7. 视力提供者名录 - 眼科和视力服务

- Site Languages(s) Spoken:* **HUDSON, HENRY, MD**
Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM
- HAIGHT, BRUCE, MD**
Provider Gender: Male
License Number: G41117
NPI: 1427029628
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 Phone: (619) 472-1010
Fax: (619) 479-5233
 After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM
- HUDSON, HENRY, MD**
Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 Phone: (619) 472-1010
Fax: (619) 479-5233
 After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-4:30PM
- KALBAKJI, NATALY, OD**
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
WEST COAST EYE CARE
 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
 Phone: (619) 470-2700
Fax: (619) 267-8221
 After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM
- HAIGHT, BRUCE, MD**
Provider Gender: Male
License Number: G41117
NPI: 1427029628
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 Phone: (619) 472-1010
Fax: (619) 479-5233
 After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM
- HUDSON, HENRY, MD**
Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 Phone: (619) 472-1010
Fax: (619) 479-5233
 After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM
- KALBAKJI, NATALY, OD**
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
WEST COAST EYE CARE
 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
 Phone: (619) 470-2700
Fax: (619) 267-8221
 After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM
- HAIGHT, BRUCE, MD**
Provider Gender: Male
License Number: G41117
NPI: 1427029628
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 Phone: (619) 472-1010
Fax: (619) 479-5233
 After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM
- HUDSON, HENRY, MD**
Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 Phone: (619) 472-1010
Fax: (619) 479-5233
 After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM
- KALBAKJI, NATALY, OD**
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
WEST COAST EYE CARE
 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
 Phone: (619) 470-2700
Fax: (619) 267-8221
 After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM

D7. 视力提供者名录 - 眼科和视力服务

Provider English Spoken: Y
Provider Language(s) Spoken:
Arabic
Cultural Competency: Y
ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

☎ Phone: (619) 472-1010

Fax: (619) 479-5233

🕒 After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

KALRA, ANKUR, OD

Provider Gender: Male

License Number: 11898

NPI: 1124195789

Provider English Spoken: Y

Provider Language(s) Spoken:
Hindi

Cultural Competency: Y

LUSTRO EYEWORKS

OPTOMETRY

📍 1481 E PLAZA BLVD
NATIONAL CITY, CA 91950

☎ Phone: (619) 477-2159

Fax: (619) 477-2128

🕒 After Hours Phone: (619)

477-2159

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: SU 10:00AM-4:00PM
M-F 9:00AM-6:00PM
SA 9:00AM-5:00PM

KATZMAN, BARRY, MD

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700

Fax: (619) 267-8221

🕒 After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

KEDDINGTON, JOAN, OD

Provider Gender: Female

License Number: 6263

NPI: 1992872691

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

LUSTRO EYEWORKS

OPTOMETRY

📍 1481 E PLAZA BLVD
NATIONAL CITY, CA 91950

☎ Phone: (619) 477-2159

Fax: (619) 477-2128

🕒 After Hours Phone: (619)
477-2159

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: SU 10:00AM-4:00PM
M-F 9:00AM-6:00PM
SA 9:00AM-5:00PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Provider Language(s) Spoken:
Arabic

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700

D7. 视力提供者名录 - 眼科和视力服务

Fax: (619) 267-8221

☎ After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Provider Language(s) Spoken:
Arabic

Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

☎ Phone: (619) 472-1010

Fax: (619) 479-5233

☎ After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM

TH 8:00AM-6:00PM

F 8:00AM-5:00PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

☎ Phone: (619) 472-1010

Fax: (619) 479-5233

☎ After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700

Fax: (619) 267-8221

☎ After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

KING, MARY, OD

Provider Gender: Female

License Number: 13711

NPI: 1578792107

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

LUSTRO EYEWORKS

OPTOMETRY

📍 1481 E PLAZA BLVD
NATIONAL CITY, CA 91950

☎ Phone: (619) 477-2159

Fax: (619) 477-2128

☎ After Hours Phone: (619)
477-2159

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: SU 10:00AM-4:00PM
M-F 9:00AM-6:00PM


D7. 视力提供者名录 - 眼科和视力服务

- SA 9:00AM-5:00PM
- LEE, AUSTIN, OD**
Provider Gender: Male
License Number: 14519
NPI: 1922356914
Provider English Spoken: Y
Cultural Competency: Y
VIVE OPTOMETRY
1033 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 477-2771
Fax: (619) 477-1680
After Hours Phone: (619) 477-2771
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: TU 10:00AM-5:00PM
W-F 9:30AM-5:00PM
- LEE, SALLY, DO**
Provider Gender: Female
License Number: 20A8088
NPI: 1457468514
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Chinese
Cultural Competency: Y
SAN DIEGO EYE PROFESSIONALS
2345 E 8TH ST STE 111
NATIONAL CITY, CA 91950
Phone: (619) 583-4295
- Fax: (619) 825-7300
After Hours Phone: (619) 583-4295
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: TH-F 9:00AM-5:00PM
- MARLAY, GREG, OD**
Provider Gender: Male
License Number: 6998
NPI: 1306903083
Provider English Spoken: Y
Cultural Competency: Y
MARLAY ENTERPRISES
1132 E PLAZA BLVD STE 201
NATIONAL CITY, CA 91950
Phone: (619) 477-4166
After Hours Phone: (619) 477-4166
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 10:00AM-6:00PM
W 10:00AM-6:00PM
F 10:00AM-6:00PM
SA 10:00AM-2:00PM
- MARR, RYAN, OD**
Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-4:30PM
- MARR, RYAN, OD**
Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish

D7. 视力提供者名录 - 眼科和视力服务

American Sign Language (ASL): Provider Gender: Male

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228


NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950


 Phone: (619) 472-1010

Fax: (619) 479-5233

 After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

MCGRAW, JOSEPH, MD

License Number: A155228


NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

 After Hours Phone: (619)
470-2700

Accepting New Patients: Yes


 Site English Spoken: Y

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F
8:00AM-4:30PM

MENDOZA, RAYMUNDO, OD

Provider Gender: Male

License Number: 8150

NPI: 1306837760

Provider English Spoken: Y


Provider Language(s) Spoken:

Spanish

Cultural Competency: Y

NATIONAL CITY EYECARE

 2403 E PLAZA BLVD
NATIONAL CITY, CA 91950


 Phone: (619) 475-2184

Fax: (619) 475-3917

 After Hours Phone: (619)
475-2184

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-TU
10:00AM-5:00PM
TH-F 10:00AM-5:00PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y


Provider Language(s) Spoken:

Indonesian, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

 After Hours Phone: (619)
470-2700

Accepting New Patients: Yes


 Site English Spoken: Y

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F
8:00AM-4:30PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

D7. 视力提供者名录 - 眼科和视力服务

NPI: 1235366782

Provider English Spoken: Y

Provider Language(s) Spoken:

Indonesian, Spanish

Cultural Competency: Y

ACUITY EYE GROUP

2240 E PLAZA BLVD STE 302
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

NGUYEN, THERESA, OD

Provider Gender: Female

License Number: 35530TLG

NPI: 1609555713

Provider English Spoken: Y

Cultural Competency: Y

LUSTRO EYEWORKS

OPTOMETRY

1481 E PLAZA BLVD
NATIONAL CITY, CA 91950

Phone: (619) 477-2159

Fax: (619) 477-2128

After Hours Phone: (619)
477-2159

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: SU 10:00AM-4:00PM
M-F 9:00AM-6:00PM
SA 9:00AM-5:00PM

PATEL, SARJAN, MD

Provider Gender: Male

License Number: A114976

NPI: 1316199326

Provider English Spoken: Y

Provider Language(s) Spoken:
Gujarati, Hindi, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

PATEL, GITANE, MD

Provider Gender: Male

License Number: A108603

NPI: 1710171434

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700



Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

D7. 视力提供者名录 - 眼科和视力服务


 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM

SCOTT, JEFFREY, OD

Provider Gender: Male
License Number: 34978
NPI: 1568813434
Provider English Spoken: Y

Cultural Competency: Y
WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

 Phone: (619) 470-2700
Fax: (619) 267-8221


 After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U


 Hours: M-F
8:00AM-4:30PM

TON-NU, MY LINH, OD

Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

 Phone: (619) 470-2700
Fax: (619) 267-8221


 After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F
8:00AM-4:30PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990


NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

 Phone: (619) 472-1010
Fax: (619) 479-5233

 After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

TOUBIA, ELIAS, OD

Provider Gender: Male

License Number: 33758

NPI: 1740701481

Provider English Spoken: Y


Provider Language(s) Spoken:
Arabic

Cultural Competency: Y

LUSTRO EYEWORKS

OPTOMETRY

 1481 E PLAZA BLVD
NATIONAL CITY, CA 91950

 Phone: (619) 477-2159

Fax: (619) 477-2128

 After Hours Phone: (619)
477-2159


Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: SU 10:00AM-4:00PM
M-F 9:00AM-6:00PM
SA 9:00AM-5:00PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177


NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

D7. 视力提供者名录 - 眼科和视力服务

☎ After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177

NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

☎ Phone: (619) 472-1010

Fax: (619) 479-5233

☎ After Hours Phone: (619) 472-1010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

☎ Phone: (619) 472-1010

Fax: (619) 479-5233

☎ After Hours Phone: (619) 472-1010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG

NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700

Fax: (619) 267-8221

☎ After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

☐ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

WU, EVA, OD

Provider Gender: Female

License Number: 14743

NPI: 1073954442

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish, Chinese

Cultural Competency: Y

VIVE OPTOMETRY

📍 1033 HIGHLAND AVE
NATIONAL CITY, CA 91950

☎ Phone: (619) 477-2771

Fax: (619) 477-1680

☎ After Hours Phone: (619) 477-2771

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: TU 10:00AM-5:00PM

D7. 视力提供者名录 - 眼科和视力服务

W-F 9:30AM-5:00PM

ZAIDI, NOORINA, OD

Provider Gender: Female
License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

ZAIDI, NOORINA, OD

Provider Gender: Female
License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:

Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

ZVANUT, DONALD, OD

Provider Gender: Male

License Number: 8642

NPI: 1336211804

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

OCEANSIDE

KASAI, SARAH, OD

Provider Gender: Female

License Number: 34226

NPI: 1023406238

Provider English Spoken: Y

Cultural Competency: Y

NORTH COAST OPTOMETRY

3915 MISSION AVE STE 2
OCEANSIDE, CA 92058

Phone: (760) 757-8771

After Hours Phone: (760)
757-8771

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
9:00AM-6:00PM
W 10:00AM-7:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM

NISKANEN, RACHEL, OD

Provider Gender: Female

License Number: 34663

NPI: 1467065797

Provider English Spoken: Y

Cultural Competency: Y

NORTH COAST OPTOMETRY

3915 MISSION AVE STE 2
OCEANSIDE, CA 92058

Phone: (760) 757-8771

After Hours Phone: (760)
757-8771

D7. 视力提供者名录 - 眼科和视力服务

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
9:00AM-6:00PM
W 10:00AM-7:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM

ROSA, ADAM, OD

Provider Gender: Male

License Number: 34093

NPI: 1295250264

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

NORTH COAST OPTOMETRY

3915 MISSION AVE STE 2
OCEANSIDE, CA 92058

Phone: (760) 757-8771

After Hours Phone: (760)
757-8771

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
9:00AM-6:00PM

W 10:00AM-7:00PM

TH 9:00AM-6:00PM

F 9:00AM-5:00PM

RAMONA

HOMESLEY, SUSAN, OD

Provider Gender: Female

License Number: 6693

NPI: 1720068984

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

SUSAN D HOMESLEY OD

1516 MAIN ST STE 102
RAMONA, CA 92065

Phone: (760) 789-0950

Fax: (760) 789-6057

After Hours Phone: (760)
789-0950

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-11:00AM

SAN DIEGO

ACKROYD, ARCHIE, OD

Provider Gender: Male

License Number: 4774

NPI: 1629107172

Provider English Spoken: Y

Cultural Competency: Y

VAN HOOSE OPTOMETRIC

CORPORATION

7246 CLAIREMONT MESA
BLVD

SAN DIEGO, CA 92111

Phone: (858) 292-7193

Fax: (858) 292-8247

After Hours Phone: (858)
292-7193

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 8:00AM-5:00PM
TU-TH 9:00AM-6:00PM
F 8:00AM-5:00PM

ADAMS, MONA, OD

Provider Gender: Female

License Number: 14457

NPI: 1942564521

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

D7. 视力提供者名录 - 眼科和视力服务

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
7:00AM-5:00PM

AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish, Vietnamese

Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

📞 Phone: (619) 697-4600
Fax: (619) 697-2410

🕒 After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

🗨️ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish, Vietnamese

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

📞 Phone: (858) 565-8822

Fax: (858) 565-2449

🕒 After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

🗨️ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

ARCHIBALD, JOHN, OD

Provider Gender: Male

License Number: 11813

NPI: 1902893357

Provider English Spoken: Y

Cultural Competency: Y

EYELUX OPTOMETRY

📍 16615 DOVE CANYON RD
STE 105
SAN DIEGO, CA 92127

📞 Phone: (858) 487-7900
Fax: (858) 487-1896

🕒 After Hours Phone: (858)
487-7900

Accepting New Patients: Yes

🗨️ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM
SA 8:30AM-2:00PM

BANSAL, PREETI, MD

Provider Gender: Female

License Number: A90890

NPI: 1871664631

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123

📞 Phone: (858) 309-7702
Fax: (858) 966-8901

🕒 After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

🗨️ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
7:00AM-5:00PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD

D7. 视力提供者名录 - 眼科和视力服务

SAN DIEGO, CA 92115
☎ Phone: (619) 697-4600
Fax: (619) 697-2410
🕒 After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
🗒 Site English Spoken: Y
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

BAUMANN, DANIELA, OD

Provider Gender: Female
License Number: 34530
NPI: 1982232146
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
☎ Phone: (858) 565-8822
Fax: (858) 565-2449
🕒 After Hours Phone: (858) 565-8822
Accepting New Patients: Yes
🗒 Site English Spoken: Y
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM

W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

BEAUDRY, AMANDA, OD

Provider Gender: Female
License Number: 33385
NPI: 1477903516
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS
SPECIALISTS

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123
☎ Phone: (858) 309-7702
Fax: (858) 966-8901
🕒 After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
🗒 Site English Spoken: Y
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M-F
7:00AM-5:00PM

BERGMARK, JAMIE, OD

Provider Gender: Female
License Number: 33657
NPI: 1669920757
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS
SPECIALISTS

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123
☎ Phone: (858) 309-7702
Fax: (858) 966-8901

🕒 After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
🗒 Site English Spoken: Y
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M-F
7:00AM-5:00PM

BHATIA, SHAGUN, MD

Provider Gender: Female
License Number: A154902
NPI: 1104237353
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS
SPECIALISTS
📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123
☎ Phone: (858) 309-7702
Fax: (858) 966-8901
🕒 After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
🗒 Site English Spoken: Y
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M-F
7:00AM-5:00PM

BINDER, NICHOLAS, MD

Provider Gender: Male
License Number: A124698
NPI: 1306076716

D7. 视力提供者名录 - 眼科和视力服务

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

BINDER, NICHOLAS, MD

Provider Gender: Male

License Number: A124698

NPI: 1306076716

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

BOECK, CARL, OD

Provider Gender: Male

License Number: 6620

NPI: 1588656151

Provider English Spoken: Y

Provider Language(s) Spoken:
German, Spanish

Cultural Competency: Y

VAN HOOSE OPTOMETRIC
CORPORATION

7246 CLAIREMONT MESA
BLVD

SAN DIEGO, CA 92111

Phone: (858) 292-7193

Fax: (858) 292-8247

After Hours Phone: (858)
292-7193

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 8:00AM-5:00PM
TU-TH 9:00AM-6:00PM
F 8:00AM-5:00PM

CAO, STEPHANIE, OD

Provider Gender: Female

License Number: 35158

NPI: 1215660436

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

5638 MISSION CENTER RD
STE 103

SAN DIEGO, CA 92108

Phone: (619) 295-2900

Fax: (888) 210-5799

After Hours Phone: (619)
295-2900

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

CAO, STEPHANIE, OD

Provider Gender: Female

License Number: 35158

NPI: 1215660436

Provider English Spoken: Y

Cultural Competency: Y

FASHION VALLEY EYE CARE
OPTOMETR

7007 FRIARS RD STE 351
SAN DIEGO, CA 92108

Phone: (619) 291-2020

Fax: (888) 210-5799

After Hours Phone: (619)
291-2020

Accepting New Patients: Yes

Site English Spoken: Y

D7. 视力提供者名录 - 眼科和视力服务

Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
10:00AM-7:00PM
SA 10:00AM-7:00PM

CAO, STEPHANIE, OD

Provider Gender: Female
License Number: 35158
NPI: 1215660436
Provider English Spoken: Y
Cultural Competency: Y
OPTOM-EYES VISION CARE
OPTOMETRY
 1555 PALM AVE STE A2
SAN DIEGO, CA 92154
 Phone: (619) 297-2020
Fax: (888) 210-5799
 After Hours Phone: (619)
297-2020

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
9:30AM-6:00PM
SA 9:00AM-3:00PM

CHAIN, PEI CHI, OD

Provider Gender: Female
License Number: 34439
NPI: 1730676727

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Chinese
Cultural Competency: Y
SPOTLIGHT OPTOMETRY
 7835 HIGHLANDS VLG PL D
106
SAN DIEGO, CA 92129
 Phone: (858) 250-0052
Fax: (858) 788-0287
 After Hours Phone: (858)
250-0052

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TU
9:00AM-5:00PM
W 10:00AM-6:00PM
F 9:00AM-5:00PM
SA 9:00AM-1:00PM

CHEN, LESLIE, OD

Provider Gender: Female
License Number: 12792
NPI: 1508953332
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: Y
EYE STUDIO OPTOMETRY
 4475 UNIVERSITY AVE
SAN DIEGO, CA 92105
 Phone: (619) 521-2020
Fax: (619) 521-2025
 After Hours Phone: (619)

521-2020
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-W
9:00AM-5:00PM
TH 9:00AM-1:30PM
F 9:00AM-5:00PM
SA 9:00AM-1:00PM

COLEMAN, BROOKE, OD

Provider Gender: Female
License Number: 13551
NPI: 1700040748
Provider English Spoken: Y
Cultural Competency: Y
EYELUX OPTOMETRY
 16615 DOVE CANYON RD
STE 105
SAN DIEGO, CA 92127
 Phone: (858) 487-7900
Fax: (858) 487-1896
 After Hours Phone: (858)
487-7900
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-5:00PM
SA 8:30AM-2:00PM

D7. 视力提供者名录 - 眼科和视力服务

COOPER, MICHAEL, OD

Provider Gender: Male

License Number: 10476

NPI: 1164586244

Provider English Spoken: Y

Cultural Competency: Y

EYELUX OPTOMETRY

16615 DOVE CANYON RD
STE 105
SAN DIEGO, CA 92127

Phone: (858) 487-7900

Fax: (858) 487-1896

After Hours Phone: (858)
487-7900

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM
SA 8:30AM-2:00PM

DAVIS, JADE, OD

Provider Gender: Female

License Number: 11765

NPI: 1457303398

Provider English Spoken: Y

Cultural Competency: Y

FASHION VALLEY EYE CARE
OPTOMETR

7007 FRIARS RD STE 351
SAN DIEGO, CA 92108

Phone: (619) 291-2020

Fax: (888) 210-5799

After Hours Phone: (619)
291-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
10:00AM-7:00PM
SA 10:00AM-7:00PM

DAVIS, JADE, OD

Provider Gender: Female

License Number: 11765

NPI: 1457303398

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

5638 MISSION CENTER RD
STE 103
SAN DIEGO, CA 92108

Phone: (619) 295-2900

Fax: (888) 210-5799

After Hours Phone: (619)
295-2900

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

DEAN, MOENA, OD

Provider Gender: Female

License Number: 33955

NPI: 1265927578

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

DUONG, KIM, OD

Provider Gender: Female

License Number: 34222

NPI: 1114448651

Provider English Spoken: Y

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

D7. 视力提供者名录 - 眼科和视力服务

☎ After Hours Phone: (858) 309-7702

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 7:00AM-5:00PM

DUONG, CHERYL, OD

Provider Gender: Female

License Number: 34070

NPI: 1366935678

Provider English Spoken: Y

Cultural Competency: Y

EYELUX OPTOMETRY

📍 16615 DOVE CANYON RD STE 105

SAN DIEGO, CA 92127

☎ Phone: (858) 487-7900

Fax: (858) 487-1896

☎ After Hours Phone: (858) 487-7900

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8:00AM-5:00PM SA 8:30AM-2:00PM

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD SAN DIEGO, CA 92115

☎ Phone: (619) 697-4600

Fax: (619) 697-2410

☎ After Hours Phone: (619) 697-4600

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM TU 8:00AM-5:00PM W 8:30AM-5:00PM TH 8:00AM-6:00PM F 8:00AM-4:00PM

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2 SAN DIEGO, CA 92111

☎ Phone: (858) 565-8822

Fax: (858) 565-2449

☎ After Hours Phone: (858) 565-8822

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT

PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM TU 8:30AM-5:00PM W 7:30AM-4:00PM TH 9:30AM-5:00PM F 8:00AM-4:00PM

GIANG, STEVEN, OD

Provider Gender: Male

License Number: 34489

NPI: 1730710104

Provider English Spoken: Y

Cultural Competency: Y

JASMINE P NGUYEN OD INC

📍 4029 43RD ST STE 300 SAN DIEGO, CA 92105

☎ Phone: (619) 284-3937

Fax: (619) 284-3938

☎ After Hours Phone: (619) 284-3937

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Vietnamese

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 9:00AM-5:00PM SA 9:00AM-1:00PM

HO, AMIEE, OD

Provider Gender: Female

License Number: 14527

NPI: 1396009478

Provider English Spoken: Y

Cultural Competency: Y

D7. 视力提供者名录 - 眼科和视力服务

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:00PM

HO, AMIEE, OD

Provider Gender: Female

License Number: 14527

NPI: 1396009478

Provider English Spoken: Y

Cultural Competency: Y

UC SAN DIEGO HEALTH

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

HO, HOANG, OD

Provider Gender: Male

License Number: 12582

NPI: 1275684847

Provider English Spoken: Y

Cultural Competency: Y

HEALTHY I CARE OPTOMETRY

10737 CAMINO RUIZ STE
220

SAN DIEGO, CA 92126

Phone: (619) 590-1994

After Hours Phone: (619)
590-1994

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: TH-F
9:00AM-5:00PM

HOANG, KEVIN, OD

Provider Gender: Male

License Number: 34401

NPI: 1790339216

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300
SAN DIEGO, CA 92105

Phone: (619) 284-3937

Fax: (619) 284-3938

After Hours Phone: (619)
284-3937

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

HOFFMAN, STEVEN, OD

Provider Gender: Male

License Number: 34561

NPI: 1033736079

Provider English Spoken: Y

Cultural Competency: Y

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300
SAN DIEGO, CA 92105

Phone: (619) 284-3937

Fax: (619) 284-3938

After Hours Phone: (619)
284-3937

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

HOM, GREGORY, OD

Provider Gender: Male

D7. 视力提供者名录 - 眼科和视力服务

License Number: 9694
NPI: 1154473916
Provider English Spoken: Y
Cultural Competency: Y
GREGORY G HOM OD
📍 11230 SORRENTO VLY RD
STE 145
SAN DIEGO, CA 92121
☎ Phone: (858) 535-9835
Fax: (858) 535-1266
🕒 After Hours Phone: (858)
535-9835
Accepting New Patients: Yes
📄 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM

HOO, PAMELA, OD
Provider Gender: Female
License Number: 11033
NPI: 1275566010
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
HILLCREST EYE
CENTER-UCSD
📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
☎ Phone: (619) 543-6244
Fax: (619) 295-5034
🕒 After Hours Phone: (619)
543-6244
Accepting New Patients: Yes
📄 Site English Spoken: Y

American Sign Language (ASL): French
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F
8:00AM-4:00PM

HUDSON, HENRY, MD
Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
☎ Phone: (619) 697-4600
Fax: (619) 697-2410



🕒 After Hours Phone: (619)
697-4600
Accepting New Patients: Yes
📄 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

HUSTANA, LARA, OD
Provider Gender: Female
License Number: 11472
NPI: 1235161597
Provider English Spoken: Y
Provider Language(s) Spoken:

Cultural Competency: Y
HILLCREST EYE
CENTER-UCSD
📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
☎ Phone: (619) 543-6244
Fax: (619) 295-5034
🕒 After Hours Phone: (619)
543-6244
Accepting New Patients: Yes
📄 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F
8:00AM-4:00PM




HUYNH, PAUL, MD
Provider Gender: Male
License Number: A79141
NPI: 1871577056
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: Y
ADVANCED EYE AND LASER
CTR OF CA INC
📍 4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
☎ Phone: (619) 283-1303
Fax: (619) 283-1666
🕒 After Hours Phone: (619)
283-1303
Accepting New Patients: Yes
📄 Site English Spoken: Y
American Sign Language (ASL):
N

D7. 视力提供者名录 - 眼科和视力服务

 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

HUYNH, PAUL, MD



Provider Gender: Male
License Number: A79141
NPI: 1871577056
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
ADVANCED EYE AND LASER CTR OF CA INC

 10737 CAMINO RUIZ STE 100
SAN DIEGO, CA 92126
 Phone: (858) 549-3200
Fax: (858) 549-3207
 After Hours Phone: (858) 549-3200

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog, Vietnamese



American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

HUYNH, CHI, OD

Provider Gender: Female
License Number: 12901
NPI: 1922187426


Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
CRYSTAL EYESITE OPTOMETRY


 9225 MIRA MESA BLVD STE 108
SAN DIEGO, CA 92126
 Phone: (858) 547-3988
Fax: (844) 367-5161

 After Hours Phone: (858) 547-3988

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U

 Hours: M 9:30AM-6:00PM
W 9:30AM-6:00PM
TH-F 10:00AM-6:00PM
SA 9:00AM-3:00PM

HUYNH, LOAN, OD

Provider Gender: Female
License Number: 34472
NPI: 1003454604

Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y

NORTH COUNTY OPTOMETRY

 11835 CARMEL MTN RD STE 1313
SAN DIEGO, CA 92128
 Phone: (858) 674-1276
Fax: (858) 674-5863

 After Hours Phone: (858) 674-1276



Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Tagalog
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M 9:00AM-4:00PM
TU 7:00AM-1:00PM
W-TH 10:00AM-6:00PM
F 10:00AM-3:00PM
SA 9:00AM-2:00PM

JOMOC, CAITLIN, OD

Provider Gender: Female
License Number: 35009
NPI: 1861164642



Provider English Spoken: Y
Cultural Competency: Y
UC SAN DIEGO HEALTH

 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (858) 534-6290
Fax: (858) 732-0921

 After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

JOMOC, CAITLIN, OD

Provider Gender: Female

D7. 视力提供者名录 - 眼科和视力服务

License Number: 35009

NPI: 1861164642

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Provider Language(s) Spoken:

Arabic

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Provider Language(s) Spoken:

Arabic

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

KATZMAN, BARRY, MD

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

KATZMAN, BARRY, MD

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

D7. 视力提供者名录 - 眼科和视力服务

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL): Provider Gender: Male

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

KHALIGHI, PAYMAN, OD

Provider Gender: Male

License Number: 13014

NPI: 1396897880

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300
SAN DIEGO, CA 92105

Phone: (619) 284-3937

Fax: (619) 284-3938

After Hours Phone: (619) 284-3937

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Vietnamese

American Sign Language (ASL): NPI: 1275263584

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619) 697-4600

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858) 565-8822

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

KHAN, FAHAD, MD

Provider Gender: Male

License Number: A163142

NPI: 1548605843

Provider English Spoken: Y

Provider Language(s) Spoken: Hindi

Cultural Competency: Y
VISION SPECIALISTS OF CALIFORNIA

233 LEWIS ST
SAN DIEGO, CA 92103

Phone: (619) 501-9050

Fax: (619) 501-9054

After Hours Phone: (619) 501-9050

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Bengali, Hindi, Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

D7. 视力提供者名录 - 眼科和视力服务

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TH
8:00AM-5:00PM
F 8:00AM-4:00PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

📞 Phone: (858) 565-8822

Fax: (858) 565-2449

🕒 After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

🗨️ Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

📞 Phone: (619) 697-4600

Fax: (619) 697-2410

🕒 After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

🗨️ Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

KHINDA, SUNEHA, OD

Provider Gender: Female

License Number: 35494

NPI: 1750066726

Provider English Spoken: Y

Cultural Competency: Y

EYELUX OPTOMETRY

📍 16615 DOVE CANYON RD
STE 105

SAN DIEGO, CA 92127

📞 Phone: (858) 487-7900

Fax: (858) 487-1896

🕒 After Hours Phone: (858)
487-7900

Accepting New Patients: Yes

🗨️ Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

SA 8:30AM-2:00PM

KIM, PHILIP, OD

Provider Gender: Male

License Number: 33893

NPI: 1376929034

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

📞 Phone: (619) 543-6244

Fax: (619) 295-5034

🕒 After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

🗨️ Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-4:00PM

KLAREN, AMANDA, OD

Provider Gender: Female

License Number: 12617

NPI: 1396876611

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123

📞 Phone: (858) 309-7702

Fax: (858) 966-8901

🕒 After Hours Phone: (858)
309-7702

D7. 视力提供者名录 - 眼科和视力服务

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
7:00AM-5:00PM

KULISCHAK, JOHN, OD

Provider Gender: Male

License Number: 9279

NPI: 1740205236

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:00PM

LAM, ANNE, OD

Provider Gender: Female

License Number: 12810

NPI: 1174550768

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:00PM

LARSEN, STEVEN, OD

Provider Gender: Male

License Number: 7687

NPI: 1629194782

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

UPTOWN OPTOMETRY

4096 PARK BLVD
SAN DIEGO, CA 92103

Phone: (619) 291-5505

Fax: (619) 291-4404

After Hours Phone: (619)
291-5505

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: TU-F
9:00AM-3:00PM
SA 10:00AM-2:00PM

LAU, KUEN CHINE, OD

Provider Gender: Male

License Number: 11166

NPI: 1821001645

Provider English Spoken: Y

Cultural Competency: Y

FASHION VALLEY EYE CARE
OPTOMETR

7007 FRIARS RD STE 351
SAN DIEGO, CA 92108

Phone: (619) 291-2020

Fax: (888) 210-5799

After Hours Phone: (619)
291-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F
10:00AM-7:00PM
SA 10:00AM-7:00PM

LAU, KUEN CHINE, OD

Provider Gender: Male

License Number: 11166

NPI: 1821001645

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE

D7. 视力提供者名录 - 眼科和视力服务

OPTOMETRY

5638 MISSION CENTER RD
STE 103

SAN DIEGO, CA 92108

Phone: (619) 295-2900

Fax: (888) 210-5799

After Hours Phone: (619)
295-2900

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

LAU, JANICE, OD

Provider Gender: Female

License Number: 13037

NPI: 1952453300

Provider English Spoken: Y

Cultural Competency: Y

SABRE SPRINGS OPTOMETRY

12650 SABRE SPGS PKWY
STE 203

SAN DIEGO, CA 92128

Phone: (858) 748-1265

Fax: (844) 269-9527

After Hours Phone: (858)
748-1265

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-TU
9:00AM-5:00PM
W 10:00AM-6:00PM
TH 9:00AM-5:00PM
F 10:00AM-6:00PM

LAU, KUEN CHINE, OD

Provider Gender: Male

License Number: 11166

NPI: 1821001645

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE OPTOMETRY

1555 PALM AVE STE A2
SAN DIEGO, CA 92154

Phone: (619) 297-2020

Fax: (888) 210-5799

After Hours Phone: (619)
297-2020

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:30AM-6:00PM
SA 9:00AM-3:00PM

LEE, JASON, OD

Provider Gender: Male

License Number: 14881

NPI: 1679985584

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: Y

RADY CHILDRENS SPECIALISTS

7910 FROST ST STE 200

SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
7:00AM-5:00PM

LIN, HENRY, OD

Provider Gender: Male

License Number: 11368

NPI: 1861405664

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish, Chinese

Cultural Competency: Y

OPTOM-EYES VISION CARE OPTOMETRY

5638 MISSION CENTER RD
STE 103

SAN DIEGO, CA 92108

Phone: (619) 295-2900

Fax: (888) 210-5799

After Hours Phone: (619)
295-2900

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish


D7. 视力提供者名录 - 眼科和视力服务

American Sign Language (ASL): License Number: 11368

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

LIN, HENRY, OD

Provider Gender: Male

License Number: 11368

NPI: 1861405664


Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Chinese

Cultural Competency: Y

FASHION VALLEY EYE CARE OPTOMETR

 7007 FRIARS RD STE 351
SAN DIEGO, CA 92108

 Phone: (619) 291-2020

Fax: (888) 210-5799

 After Hours Phone: (619) 291-2020

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
10:00AM-7:00PM
SA 10:00AM-7:00PM

LIN, HENRY, OD

Provider Gender: Male

NPI: 1861405664


Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Chinese


Cultural Competency: Y

OPTOM-EYES VISION CARE OPTOMETRY

 1555 PALM AVE STE A2
SAN DIEGO, CA 92154

 Phone: (619) 297-2020

Fax: (888) 210-5799

 After Hours Phone: (619) 297-2020


Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
9:30AM-6:00PM
SA 9:00AM-3:00PM

LLANES, BENJAMIN, OD

Provider Gender: Male

License Number: 8782

NPI: 1053309005

Provider English Spoken: Y


Provider Language(s) Spoken: Spanish, Tagalog

Cultural Competency: Y

SEE KLEER EYECARE CENTER

 9580 BLACK MOUNTAIN
RD STE J

SAN DIEGO, CA 92126

 Phone: (858) 536-8952

Fax: (858) 536-8951

 After Hours Phone: (858)

536-8952

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish, Tagalog

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TH
11:00AM-6:00PM
F 1:00PM-5:00PM
SA 9:00AM-1:00PM

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302


NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

 Phone: (858) 565-8822

Fax: (858) 565-2449


 After Hours Phone: (858) 565-8822

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

D7. 视力提供者名录 - 眼科和视力服务

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

MCCLEAN, ESMERALDA, OD

Provider Gender: Female

License Number: 15001

NPI: 1962817981

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:00PM

MCCLEAN, ESMERALDA, OD

Provider Gender: Female

License Number: 15001

NPI: 1962817981

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: Y

UC SAN DIEGO HEALTH

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600



Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N



D7. 视力提供者名录 - 眼科和视力服务

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM*

MIZOGUCHI, LIANNE, OD

Provider Gender: Female
License Number: 10104
NPI: 1619900313
Provider English Spoken: Y
Cultural Competency: Y
HILLCREST EYE
CENTER-UCSD

 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
 *Phone: (619) 543-6244*
Fax: (619) 295-5034
 *After Hours Phone: (619) 543-6244*
Accepting New Patients: Yes
 *Site English Spoken: Y*
American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F
8:00AM-4:00PM*

MOLL, ANGELA, MD

Provider Gender: Female
License Number: A105472
NPI: 1861648602
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS

SPECIALISTS



 7910 FROST ST STE 200
SAN DIEGO, CA 92123
 *Phone: (858) 309-7702*
Fax: (858) 966-8901
 *After Hours Phone: (858) 309-7702*
Accepting New Patients: Yes
 *Site English Spoken: Y*
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M-F
7:00AM-5:00PM*

MOOR, TRACY, OD



Provider Gender: Female
License Number: 35085
NPI: 1184283277
Provider English Spoken: Y
Cultural Competency: Y
HILLCREST EYE
CENTER-UCSD

 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
 *Phone: (619) 543-6244*
Fax: (619) 295-5034
 *After Hours Phone: (619) 543-6244*
Accepting New Patients: Yes
 *Site English Spoken: Y*
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F
8:00AM-4:00PM*

MOOR, TRACY, OD

Provider Gender: Female
License Number: 35085
NPI: 1184283277
Provider English Spoken: Y
Cultural Competency: Y
UC SAN DIEGO HEALTH
 16950 VIA TAZON
SAN DIEGO, CA 92127
 *Phone: (858) 534-6290*
Fax: (858) 732-0921
 *After Hours Phone: (858) 534-6290*
Accepting New Patients: Yes
 *Site English Spoken: Y*
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F
8:00AM-5:00PM*

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
Provider Language(s) Spoken: Indonesian, Spanish
Cultural Competency: Y
WEST COAST EYE CARE
 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
 *Phone: (619) 697-4600*
Fax: (619) 697-2410
 *After Hours Phone: (619) 697-4600*

D7. 视力提供者名录 - 眼科和视力服务

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM

TU 8:00AM-5:00PM

W 8:30AM-5:00PM

TH 8:00AM-6:00PM

F 8:00AM-4:00PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Provider Language(s) Spoken:

Indonesian, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

☎ Phone: (858) 565-8822

Fax: (858) 565-2449

🕒 After Hours Phone: (858) 565-8822

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM

TU 8:30AM-5:00PM

W 7:30AM-4:00PM

TH 9:30AM-5:00PM

F 8:00AM-4:00PM

NGUYEN, BRUCE, OD

Provider Gender: Male

License Number: 14156

NPI: 1376839019

Provider English Spoken: Y

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: Y

CLAIREMONT OPTOMETRY

📍 10715 TIERRASANTA BLVD
STE F

SAN DIEGO, CA 92124

☎ Phone: (858) 279-6500

Fax: (858) 225-7174

🕒 After Hours Phone: (858) 279-6500

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:

Spanish, Vietnamese

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-W

9:00AM-6:00PM

TH-F 9:00AM-5:00PM

SA 8:00AM-3:00PM

NGUYEN, KELVIN, OD

Provider Gender: Male

License Number: 11085

NPI: 1518923572

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: Y

SD VISION CARE OPTOMETRY

📍 3807 FAIRMOUNT AVE STE
200

SAN DIEGO, CA 92105

☎ Phone: (619) 508-5678

Fax: (619) 501-0686

🕒 After Hours Phone: (619) 508-5678

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

NGUYEN, BRUCE, OD

Provider Gender: Male

License Number: 14156

NPI: 1376839019

Provider English Spoken: Y

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: Y

SD VISION CARE OPTOMETRY

📍 3807 FAIRMOUNT AVE STE
200

SAN DIEGO, CA 92105

☎ Phone: (619) 508-5678

Fax: (619) 501-0686

🕒 After Hours Phone: (619) 508-5678

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

D7. 视力提供者名录 - 眼科和视力服务

NGUYEN, JASMINE, OD

Provider Gender: Female
License Number: 11189
NPI: 1497896922
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: Y

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300
SAN DIEGO, CA 92105
Phone: (619) 284-3937
Fax: (619) 284-3938
After Hours Phone: (619)
284-3937

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

NGUYEN, THANH, OD

Provider Gender: Female
License Number: 13126
NPI: 1992813323
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: Y

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300
SAN DIEGO, CA 92105
Phone: (619) 284-3937

Fax: (619) 284-3938

After Hours Phone: (619)
284-3937

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

NGUYEN, THANH, OD

Provider Gender: Female
License Number: 13126
NPI: 1992813323
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: Y

SABRE SPRINGS OPTOMETRY

12650 SABRE SPGS PKWY
STE 203
SAN DIEGO, CA 92128
Phone: (858) 748-1265
Fax: (844) 269-9527

After Hours Phone: (858)
748-1265

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1U

Hours: M-TU
9:00AM-5:00PM
W 10:00AM-6:00PM
TH 9:00AM-5:00PM
F 10:00AM-6:00PM

O HALLORAN, HENRY, MD

Provider Gender: Male
License Number: A73282
NPI: 1235287947
Provider English Spoken: Y
Provider Language(s) Spoken:
German, Spanish
Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
Fax: (858) 966-8901

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
7:00AM-5:00PM

PATEL, SARJAN, MD

Provider Gender: Male
License Number: A114976
NPI: 1316199326
Provider English Spoken: Y
Provider Language(s) Spoken:
Gujarati, Hindi, Spanish

D7. 视力提供者名录 - 眼科和视力服务

Cultural Competency: Y
WEST COAST EYE CARE
📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
☎ Phone: (858) 565-8822
☎ Fax: (858) 565-2449
🕒 After Hours Phone: (858)
565-8822
Accepting New Patients: Yes
📄 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

PATEL, GITANE, MD

Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
☎ Phone: (858) 565-8822
☎ Fax: (858) 565-2449
🕒 After Hours Phone: (858)
565-8822
Accepting New Patients: Yes
📄 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within

1/2 mile from Site): 1U
🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

PATEL, SARJAN, MD

Provider Gender: Male
License Number: A114976
NPI: 1316199326
Provider English Spoken: Y
Provider Language(s) Spoken:
Gujarati, Hindi, Spanish
Cultural Competency: Y

WEST COAST EYE CARE
📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
☎ Phone: (619) 697-4600
☎ Fax: (619) 697-2410
🕒 After Hours Phone: (619)
697-4600

Accepting New Patients: Yes
📄 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

PATEL, GITANE, MD

Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE
📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
☎ Phone: (619) 697-4600
☎ Fax: (619) 697-2410
🕒 After Hours Phone: (619)
697-4600
Accepting New Patients: Yes
📄 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM























PHAM, TONY, OD

Provider Gender: Male
License Number: 12348
NPI: 1841271434
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish, Vietnamese
Cultural Competency: Y

MIRA MESA EYECARE
📍 6755 MIRA MESA BLVD STE
141
SAN DIEGO, CA 92121
☎ Phone: (858) 535-8282
☎ Fax: (858) 535-0537
🕒 After Hours Phone: (858)
535-8282

Accepting New Patients: Yes
📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish, Vietnamese
American Sign Language (ASL):

D7. 视力提供者名录 - 眼科和视力服务

- N**
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-TU 9:30AM-6:00PM TH-F 9:30AM-6:00PM*
- PHUNG, RICHARD N V, OD**
Provider Gender: Male
License Number: 9547
NPI: 1689661571
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese, Chinese
Cultural Competency: Y
SCRIPPS RANCH OPTOMETRI
CTR
 9880 HIBERT ST STE E1
SAN DIEGO, CA 92131
 *Phone: (858) 693-9044*
Fax: (858) 693-0704
 *After Hours Phone: (858) 693-9044*
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Vietnamese
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M 10:00AM-6:00PM TU 10:00AM-2:00PM W-TH 10:00AM-6:00PM F 9:00AM-2:00PM SA 9:00AM-2:00PM*
- POUSTI, SHEIVA, OD**
Provider Gender: Female
License Number: 10403
NPI: 1730240052
Provider English Spoken: Y
Cultural Competency: Y
SAN DIEGO EYE CLINIC
OPTOMETRY
 3560 FAIRMOUNT AVE STE
A
SAN DIEGO, CA 92105
 *Phone: (619) 431-2020*
Fax: (619) 376-2100
 *After Hours Phone: (619) 431-2020*
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: SU-SA 9:00AM-6:00PM*
- PRABHU, SUJATA, MD**
Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
WEST COAST EYE CARE
 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
 *Phone: (619) 697-4600*
Fax: (619) 697-2410
 *After Hours Phone: (619) 697-4600*
- Accepting New Patients: Yes*
 Site English Spoken: Y
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M 7:30AM-4:30PM TU 8:00AM-5:00PM W 8:30AM-5:00PM TH 8:00AM-6:00PM F 8:00AM-4:00PM*
- PRABHU, SUJATA, MD**
Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
WEST COAST EYE CARE
 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
 *Phone: (858) 565-8822*
Fax: (858) 565-2449
 *After Hours Phone: (858) 565-8822*
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M 10:00AM-6:00PM TU 8:30AM-5:00PM W 7:30AM-4:00PM TH 9:30AM-5:00PM F 8:00AM-4:00PM*

D7. 视力提供者名录 - 眼科和视力服务

SANDOC, EMILY, OD

Provider Gender: Female

License Number: 13535

NPI: 1992969794

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE

OPTOMETRY

5638 MISSION CENTER RD
STE 103

SAN DIEGO, CA 92108

Phone: (619) 295-2900

Fax: (888) 210-5799

After Hours Phone: (619)
295-2900

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

SHULKIN, MITCHELL, OD

Provider Gender: Male

License Number: 8153

NPI: 1770531865

Provider English Spoken: Y

Cultural Competency: Y

NORTH COUNTY OPTOMETRY

11835 CARMEL MTN RD STE
1313

SAN DIEGO, CA 92128

Phone: (858) 674-1276

Fax: (858) 674-5863

After Hours Phone: (858)
674-1276

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Tagalog

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 9:00AM-4:00PM
TU 7:00AM-1:00PM
W-TH 10:00AM-6:00PM
F 10:00AM-3:00PM
SA 9:00AM-2:00PM

TA, TRANG, OD

Provider Gender: Female

License Number: 12100

NPI: 1518381045

Provider English Spoken: Y

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: Y

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300
SAN DIEGO, CA 92105

Phone: (619) 284-3937

Fax: (619) 284-3938

After Hours Phone: (619)
284-3937

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

TAM, MAY, OD

Provider Gender: Female

License Number: 11960

NPI: 1548255896

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

FASHION VALLEY EYE CARE
OPTOMETR

7007 FRIARS RD STE 351
SAN DIEGO, CA 92108

Phone: (619) 291-2020

Fax: (888) 210-5799

After Hours Phone: (619)
291-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
10:00AM-7:00PM
SA 10:00AM-7:00PM

TAM, MAY, OD

Provider Gender: Female

License Number: 11960

NPI: 1548255896

Provider English Spoken: Y

Provider Language(s) Spoken:

D7. 视力提供者名录 - 眼科和视力服务

Spanish

Cultural Competency: Y

OPTOM-EYES VISION CARE

OPTOMETRY

5638 MISSION CENTER RD
STE 103

SAN DIEGO, CA 92108

Phone: (619) 295-2900

Fax: (888) 210-5799

After Hours Phone: (619)
295-2900

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

TAM, MAY, OD

Provider Gender: Female

License Number: 11960

NPI: 1548255896

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

OPTOM-EYES VISION CARE

OPTOMETRY

1555 PALM AVE STE A2
SAN DIEGO, CA 92154

Phone: (619) 297-2020

Fax: (888) 210-5799

After Hours Phone: (619)
297-2020

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:30AM-6:00PM
SA 9:00AM-3:00PM

TILLMAN, SYLVIA, OD

Provider Gender: Female

License Number: 9726

NPI: 1174730824

Provider English Spoken: Y

Cultural Competency: Y

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300
SAN DIEGO, CA 92105

Phone: (619) 284-3937

Fax: (619) 284-3938

After Hours Phone: (619)
284-3937

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

D7. 视力提供者名录 - 眼科和视力服务

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

TONNU, ANH, OD

Provider Gender: Female

License Number: 11318

NPI: 1679521280

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

📞 Phone: (619) 697-4600

Fax: (619) 697-2410

🕒 After Hours Phone: (619) 697-4600

Accepting New Patients: Yes

🗒 Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

TONNU, ANH, OD

Provider Gender: Female

License Number: 11318

NPI: 1679521280

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

📞 Phone: (858) 565-8822

Fax: (858) 565-2449

🕒 After Hours Phone: (858) 565-8822

Accepting New Patients: Yes

🗒 Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

TRAN, ALEXANDER, OD

Provider Gender: Male

License Number: 14136

NPI: 1902414790

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123

📞 Phone: (858) 309-7702

Fax: (858) 966-8901

🕒 After Hours Phone: (858) 309-7702

Accepting New Patients: Yes

🗒 Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
7:00AM-5:00PM

TRANG, CHAU, OD

Provider Gender: Female

License Number: 9556

NPI: 1073671087

Provider English Spoken: Y

Provider Language(s) Spoken: French, Spanish, Vietnamese, Chinese

Cultural Competency: Y

CHAU H TRANG OD

📍 6947 LINDA VISTA RD STE A

SAN DIEGO, CA 92111

📞 Phone: (858) 495-0592

Fax: (858) 495-0560

🕒 After Hours Phone: (858) 495-0592

Accepting New Patients: Yes

🗒 Site English Spoken: Y

🗒 Site Languages(s) Spoken: French, Spanish, Vietnamese

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M 10:00AM-3:00PM
W 10:00AM-3:00PM
F 10:00AM-5:00PM
SA 9:00AM-1:00PM

VAN HOOSE, MARC, OD

Provider Gender: Male

D7. 视力提供者名录 - 眼科和视力服务

License Number: 12667
NPI: 1932280054
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
VAN HOOSE OPTOMETRIC
CORPORATION
7246 CLAIREMONT MESA
BLVD
SAN DIEGO, CA 92111
Phone: (858) 292-7193
Fax: (858) 292-8247
After Hours Phone: (858)
292-7193

Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M 8:00AM-5:00PM
TU-TH 9:00AM-6:00PM
F 8:00AM-5:00PM

VIVIRITO, MARY, OD

Provider Gender: Female
License Number: 33798
NPI: 1477968667
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
WEST COAST EYE CARE
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Phone: (858) 565-8822
Fax: (858) 565-2449

After Hours Phone: (858)
565-8822
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

VO, ANDREW MINH, OD

Provider Gender: Male
License Number: 33869
NPI: 1790291565
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: Y
HILLCREST EYE
CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Phone: (619) 543-6244
Fax: (619) 295-5034
After Hours Phone: (619)
543-6244
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F
8:00AM-4:00PM

WONG, GORDON, OD

Provider Gender: Male
License Number: 9832
NPI: 1447338447
Provider English Spoken: Y
Cultural Competency: Y
UPTOWN OPTOMETRY
4096 PARK BLVD
SAN DIEGO, CA 92103
Phone: (619) 291-5505
Fax: (619) 291-4404
After Hours Phone: (619)
291-5505
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
Hours: TU-F
9:00AM-3:00PM
SA 10:00AM-2:00PM

YU, CAROL, OD

Provider Gender: Female
License Number: 34047
NPI: 1639697451
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish, Chinese
Cultural Competency: Y
HILLCREST EYE
CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Phone: (619) 543-6244

D7. 视力提供者名录 - 眼科和视力服务

Fax: (619) 295-5034

☎ After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

☐ Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-4:00PM

ZAI, NOORINA, OD

Provider Gender: Female

License Number: 35615

NPI: 1023477262

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

☎ Phone: (619) 697-4600

Fax: (619) 697-2410

☎ After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

☐ Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

ZAI, NOORINA, OD

Provider Gender: Female

License Number: 35615

NPI: 1023477262

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

☎ Phone: (858) 565-8822

Fax: (858) 565-2449

☎ After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

☐ Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

ZHAO, TAILUN, MD

Provider Gender: Male

License Number: C186414

NPI: 1952659203

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

☎ Phone: (858) 565-8822

Fax: (858) 565-2449

☎ After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

☐ Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

SAN MARCOS

GARFF, KEVIN, MD

Provider Gender: Male

License Number: A160988

NPI: 1609258920

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

RSF OPHTHALMOLOGY

📍 100 N RANCHO SANTA FE
RD STE 12

SAN MARCOS, CA 92069

☎ Phone: (760) 598-0400

Fax: (760) 249-7394

☎ After Hours Phone: (760)
598-0400

Accepting New Patients: Yes

☐ Site English Spoken: Y
☐ Site Language(s) Spoken:
Spanish, Thai

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

D7. 视力提供者名录 - 眼科和视力服务

GUAN, HOWARD, MD

Provider Gender: Male

License Number: A119766

NPI: 1134427636

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish, Chinese

Cultural Competency: Y

RSF OPHTHALMOLOGY

100 N RANCHO SANTA FE RD STE 12

SAN MARCOS, CA 92069

Phone: (760) 598-0400

Fax: (760) 249-7394

After Hours Phone: (760) 598-0400

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Thai

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F

8:00AM-5:00PM

PRESTERA, TORY, MD

Provider Gender: Male

License Number: A62321

NPI: 1346224557

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

RSF OPHTHALMOLOGY

100 N RANCHO SANTA FE RD STE 12

SAN MARCOS, CA 92069

Phone: (760) 598-0400

Fax: (760) 249-7394

After Hours Phone: (760) 598-0400

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Thai

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F

8:00AM-5:00PM

SKAY, RICHARD, OD

Provider Gender: Male

License Number: 7649

NPI: 1639251945

Provider English Spoken: Y

Cultural Competency: Y

RICHARD M SKAY OD

1903 W SAN MARCOS

BLVD STE 130

SAN MARCOS, CA 92078

Phone: (760) 727-2211

Fax: (760) 727-2533

After Hours Phone: (760) 727-2211

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F

9:00AM-3:00PM

TA, MINI, OD

Provider Gender: Female

License Number: 15170

NPI: 1578955605

Provider English Spoken: Y

Cultural Competency: Y

NEW OPTIX OPTOMETRY

640 GRAND AVE STE 101

SAN MARCOS, CA 92078

Phone: (760) 736-0020

Fax: (760) 736-0019

After Hours Phone: (760) 736-0020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Vietnamese

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 9:00AM-5:00PM

TU 9:00AM-6:00PM

W 9:00AM-5:00PM

TH 9:00AM-6:00PM

F 9:00AM-5:00PM

THAI, AMANDA, OD

Provider Gender: Female

License Number: 34861

NPI: 1457928558

Provider English Spoken: Y

Cultural Competency: Y

NEW OPTIX OPTOMETRY

640 GRAND AVE STE 101

SAN MARCOS, CA 92078

Phone: (760) 736-0020

Fax: (760) 736-0019

After Hours Phone: (760) 736-0020

D7. 视力提供者名录 - 眼科和视力服务


Accepting New Patients: Yes

Site English Spoken: Y


Site Language(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M 9:00AM-5:00PM
TU 9:00AM-6:00PM
W 9:00AM-5:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM

TRAN, MICHAEL, OD

Provider Gender: Male

License Number: 14530

NPI: 1649524216


Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese


Cultural Competency: Y

NEW OPTIX OPTOMETRY

 640 GRAND AVE STE 101
SAN MARCOS, CA 92078

 Phone: (760) 736-0020

Fax: (760) 736-0019

 After Hours Phone: (760)
736-0020

Accepting New Patients: Yes

Site English Spoken: Y


Site Language(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M 9:00AM-5:00PM

TU 9:00AM-6:00PM

W 9:00AM-5:00PM

TH 9:00AM-6:00PM

F 9:00AM-5:00PM

SPRING VALLEY

FLEMING, JOHN, OD

Provider Gender: Male

License Number: 8461


NPI: 1033192133

Provider English Spoken: Y

Cultural Competency: Y

JOHN C FLEMING OD

 9628 CAMPO RD STE C
SPRING VALLEY, CA 91977

 Phone: (619) 463-9318

Fax: (619) 463-9640

 After Hours Phone: (619)
463-9318


Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M 9:00AM-5:00PM
TU 9:00AM-5:30PM
W-TH 9:00AM-5:00PM
F 9:00AM-4:00PM

HOANG, KENNY, OD

Provider Gender: Male

License Number: 35207


NPI: 1740868603

Provider English Spoken: Y

Cultural Competency: Y

JOHN C FLEMING OD

 9628 CAMPO RD STE C
SPRING VALLEY, CA 91977

 Phone: (619) 463-9318

Fax: (619) 463-9640

 After Hours Phone: (619)
463-9318


Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M 9:00AM-5:00PM
TU 9:00AM-5:30PM
W-TH 9:00AM-5:00PM
F 9:00AM-4:00PM

JOHNSON, CHRISTOPHER, OD

Provider Gender: Male

License Number: 15100


NPI: 1568861425

Provider English Spoken: Y

Cultural Competency: Y

JOHN C FLEMING OD

 9628 CAMPO RD STE C
SPRING VALLEY, CA 91977

 Phone: (619) 463-9318


Fax: (619) 463-9640

 After Hours Phone: (619)
463-9318


Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M 9:00AM-5:00PM
TU 9:00AM-5:30PM
W-TH 9:00AM-5:00PM
F 9:00AM-4:00PM

D7. 视力提供者名录 - 眼科和视力服务

KALRA, ANKUR, OD

Provider Gender: Male

License Number: 11898

NPI: 1124195789

Provider English Spoken: Y

Provider Language(s) Spoken:


Hindi

Cultural Competency: Y

EYE CARE OPTOMETRY

ASSOCIATES

 687 SWEETWATER RD
SPRING VALLEY, CA 91977

 Phone: (619) 466-9444

Fax: (619) 466-9314

 After Hours Phone: (619)
466-9444

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

KEDDINGTON, JOAN, OD

Provider Gender: Female

License Number: 6263

NPI: 1992872691

Provider English Spoken: Y


Provider Language(s) Spoken:
Spanish

Cultural Competency: Y


EYE CARE OPTOMETRY

ASSOCIATES

 687 SWEETWATER RD
SPRING VALLEY, CA 91977

 Phone: (619) 466-9444

Fax: (619) 466-9314

 After Hours Phone: (619)
466-9444

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

KING, MARY, OD

Provider Gender: Female

License Number: 13711

NPI: 1578792107

Provider English Spoken: Y


Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

EYE CARE OPTOMETRY

ASSOCIATES

 687 SWEETWATER RD
SPRING VALLEY, CA 91977

 Phone: (619) 466-9444

Fax: (619) 466-9314

 After Hours Phone: (619)
466-9444

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

NGUYEN, THERESA, OD

Provider Gender: Female

License Number: 35530TLG

NPI: 1609555713


Provider English Spoken: Y

Cultural Competency: Y

EYE CARE OPTOMETRY

ASSOCIATES

 687 SWEETWATER RD
SPRING VALLEY, CA 91977

 Phone: (619) 466-9444

Fax: (619) 466-9314

 After Hours Phone: (619)
466-9444

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

SOLIS, KEVIN, OD

Provider Gender: Male

License Number: 10420

NPI: 1538362116

Provider English Spoken: Y

Cultural Competency: Y

D7. 视力提供者名录 - 眼科和视力服务

EYE CARE OPTOMETRY ASSOCIATES

687 SWEETWATER RD
SPRING VALLEY, CA 91977

Phone: (619) 466-9444

Fax: (619) 466-9314

After Hours Phone: (619)
466-9444

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

TOUBIA, ELIAS, OD

Provider Gender: Male

License Number: 33758

NPI: 1740701481

Provider English Spoken: Y

Provider Language(s) Spoken:

Arabic

Cultural Competency: Y

EYE CARE OPTOMETRY ASSOCIATES

687 SWEETWATER RD
SPRING VALLEY, CA 91977

Phone: (619) 466-9444

Fax: (619) 466-9314

After Hours Phone: (619)
466-9444

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL): Provider Gender: Female
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

VALLEY CENTER

JOYCE, ROBERT, OD

Provider Gender: Male

License Number: 11833

NPI: 1275585127

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

VALLEY CENTER OPTOMETRY

29115 VALLEY CENTER RD
STE E
VALLEY CENTER, CA 92082

Phone: (760) 751-8771

Fax: (760) 751-8772

After Hours Phone: (760)
751-8771

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-6:00PM
TU-F 9:00AM-5:00PM

LE, TAM, OD

License Number: 12951

NPI: 1235268707

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish, Vietnamese

Cultural Competency: Y

VALLEY CENTER OPTOMETRY

29115 VALLEY CENTER RD
STE E
VALLEY CENTER, CA 92082

Phone: (760) 751-8771

Fax: (760) 751-8772

After Hours Phone: (760)
751-8771

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-6:00PM
TU-F 9:00AM-5:00PM

VISTA

DEMLINGER, GLENN, OD

Provider Gender: Male

License Number: 8954

NPI: 1508932518

Provider English Spoken: Y







Provider Language(s) Spoken:
Spanish






Cultural Competency: Y


SHADOWRIDGE FAMILY VISION








741 SHADOWRIDGE DR

D7. 视力提供者名录 - 眼科和视力服务







VISTA, CA 92083
 Phone: (760) 727-1844
Fax: (760) 727-3044
 After Hours Phone: (760) 727-1844
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TU 9:00AM-6:00PM
W 7:00AM-5:00PM
TH 9:00AM-6:00PM

GEORGE, BRUCE, OD
Provider Gender: Male
License Number: 7696
NPI: 1356414551
Provider English Spoken: Y
Provider Language(s) Spoken: Korean, Spanish
Cultural Competency: Y
BRUCE D GEORGE OD
 931 ANZA AVE STE B
VISTA, CA 92084
 Phone: (760) 758-2340
Fax: (760) 867-2222
 After Hours Phone: (760) 758-2340
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT

PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M 9:00AM-5:00PM
TU-W 9:00AM-6:00PM
TH-F 9:00AM-5:00PM

GEORGE, KENDALL, OD
Provider Gender: Male
License Number: 34270
NPI: 1619529948
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
BRUCE D GEORGE OD
 931 ANZA AVE STE B
VISTA, CA 92084
 Phone: (760) 758-2340
Fax: (760) 867-2222
 After Hours Phone: (760) 758-2340
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M 9:00AM-5:00PM
TU-W 9:00AM-6:00PM
TH-F 9:00AM-5:00PM

TRAN, THAO, OD
Provider Gender: Female
License Number: 12867
NPI: 1962581421
Provider English Spoken: Y
Provider Language(s) Spoken:

Vietnamese
Cultural Competency: Y
KINDERSPECS-GOOD EYES OPTOMETRY
 110 CIVIC CENTER DR STE 204
VISTA, CA 92084
 Phone: (760) 753-3665
Fax: (408) 969-1653
 After Hours Phone: (760) 753-3665
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TH 10:00AM-5:00PM

D8. 其他服务提供者


SAN MARCOS


AMERICARE ADULT DAY HEALTH CARE CENTER†

License Number: 060000832


 340 RANCHEROS DR STE
196

SAN MARCOS, CA 92069


 *Phone: (760) 682-2424*

 *After Hours Phone: (760)
682-2424*

 *Site English Spoken: Y*

 *Hours: 24 Hours / 7
days/week*

 *Accessibility: CONTACT
PROVIDER*

 *Website: [www.americaread
hc.com](http://www.americaread
hc.com)*

Cultural Competency: N

Accepting New Patients: No

D9. Blue Shield Promise 紧急护理机构

CHULA VISTA

AFC URGENT CARE OF BONITA*

NPI: 1316225147

760 OTAY LAKES RD
CHULA VISTA, CA 91910

(619) 821-2300

(619) 821-2300

Site Languages(s) Spoken:
Spanish

SU 8:00AM-5:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

www.afcurgentcare.com/chula-vista/

Accepting New Patients: No

(858) 800-2880

(858) 800-2880

SU 8:00AM-6:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-6:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1396058137

1740 ROSECRANS ST
SAN DIEGO, CA 92106

(619) 790-7800

(619) 790-7800

SU 8:00AM-6:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-6:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1396058137

8590 RIO SAN DIEGO DR
STE 111

SAN DIEGO, CA 92108

(619) 736-4600

(619) 736-4600

SU 8:00AM-6:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-6:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1558788620

1740 ROSECRANS ST
SAN DIEGO, CA 92106

(619) 790-7800

(619) 790-7800

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1952995466

1740 ROSECRANS ST
SAN DIEGO, CA 92106

(619) 790-7800

(619) 790-7800

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1558788620

8590 RIO SAN DIEGO DR
STE 111

SAN DIEGO, CA 92108

(619) 736-4600

(619) 736-4600

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

SAN DIEGO

AFC URGENT CARE OF SAN DIEGO*

NPI: 1396058137

8260 MIRA MESA BLVD
STE A

SAN DIEGO, CA 92126

(858) 900-3550

(858) 900-3550

SU 8:00AM-6:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-6:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1396058137

5671 BALBOA AVE
SAN DIEGO, CA 92111

D9. Blue Shield Promise 紧急护理机构

AFC URGENT CARE OF SAN DIEGO*

NPI: 1952995466

8590 RIO SAN DIEGO DR
STE 111
SAN DIEGO, CA 92108

(619) 736-4600

(619) 736-4600

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1952995466

5671 BALBOA AVE
SAN DIEGO, CA 92111

(858) 800-2880

(858) 800-2880

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1952995466

8260 MIRA MESA BLVD
STE A
SAN DIEGO, CA 92126

(858) 900-3550

(858) 900-3550

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1558788620

8260 MIRA MESA BLVD
STE A
SAN DIEGO, CA 92126

(858) 900-3550

(858) 900-3550

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1558788620

5671 BALBOA AVE
SAN DIEGO, CA 92111

(858) 800-2880

(858) 800-2880

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

SANTEE

AFC URGENT CARE OF SAN DIEGO*

NPI: 1396058137

10538 MISSION GORGE RD
STE 100
SANTEE, CA 92071

(619) 456-0033

(619) 456-0033

Site Languages(s) Spoken:
Arabic, Spanish

SU 8:00AM-6:00PM
M-F 8:00AM-8:00PM

SA 8:00AM-6:00PM
Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

CHULA VISTA

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

386 E H ST STE 202
CHULA VISTA, CA 91910

(858) 966-1720

(858) 966-1720

SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

Accessibility: CONTACT PROVIDER

N/A

Accepting New Patients: No

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Accessibility: CONTACT PROVIDER

N/A

Accepting New Patients: No


RADY CHILDRENS SPECIALISTS SAN DIEGO MED


D9. Blue Shield Promise 紧急护理机构


FNDTN*

NPI: 1669617197

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D9. Blue Shield Promise 紧急护理机构

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RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*







NPI: 1669617197

 386 E H ST STE 202







D9. Blue Shield Promise 紧急护理机构

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 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

ESCONDIDO







**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***
NPI: 1669617197

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

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D9. Blue Shield Promise 紧急护理机构

 PROVIDER
 N/A
Accepting New Patients: No




RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*




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RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197


 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

 (760) 294-9270

 (760) 294-9270

 M-F 8:00AM-5:00PM

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No


LA MESA


RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*


NPI: 1669617197

 5565 GROSSMONT
CENTER DR STE 2

LA MESA, CA 91942

 (619) 713-5375

 (619) 713-5375

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No





RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197


 5565 GROSSMONT
CENTER DR STE 2

LA MESA, CA 91942




D9. Blue Shield Promise 紧急护理机构

 (619) 713-5375
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 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No



RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*




NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
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 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
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OCEANSIDE

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*






NPI: 1669617197
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 (760) 547-1020
 (760) 547-1020
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*






NPI: 1669617197
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 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 (760) 547-1020

 (760) 547-1020

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED

FNDTN*

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D9. Blue Shield Promise 紧急护理机构

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PROVIDER

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Accepting New Patients: No


SAN DIEGO

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 (858) 966-8800

 (858) 966-8800

 *Accessibility:* CONTACT
PROVIDER


 N/A


Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 (858) 966-8800

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 *Accessibility:* CONTACT
PROVIDER

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Accepting New Patients: No


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PROVIDER


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NPI: 1669617197

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 (858) 966-8800

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 *Accessibility:* CONTACT
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NPI: 1669617197

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SAN DIEGO, CA 92123

 (858) 966-8800

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 *Accessibility:* CONTACT
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 N/A


Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*



NPI: 1669617197

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123






 (858) 966-8800

 (858) 966-8800






D9. Blue Shield Promise 紧急护理机构

 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No






RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No






RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No




RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
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 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No






RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
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 *Accessibility:* CONTACT PROVIDER
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Accepting New Patients: No

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NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS

D9. Blue Shield Promise 紧急护理机构


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 (619) 280-2905

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 *Accessibility:* CONTACT
PROVIDER

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Accepting New Patients: No

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FNDTN*

NPI: 1669617197

D9. Blue Shield Promise 紧急护理机构

 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
 (619) 280-2905
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RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*





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D9. Blue Shield Promise 紧急护理机构

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Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*






NPI: 1669617197
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT

PROVIDER
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Accepting New Patients: No






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D9. Blue Shield Promise 紧急护理机构

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SAN DIEGO, CA 92123

 (858) 966-8800

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 N/A


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 *Accessibility:* CONTACT






D9. Blue Shield Promise 紧急护理机构

 PROVIDER
 N/A
Accepting New Patients: No




**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDDTN***

NPI: 1669617197
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**RADY CHILDRENS
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FNDDTN***

NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

RCH MID CITY URGENT CARE*

NPI: 1710065933
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

**SOUTHBAY URGENT CARE
INC***

NPI: 1558746750
 1628 PALM AVE
SAN DIEGO, CA 92154
 (619) 591-9999
 (619) 591-9999
 Site Languages(s) Spoken:
Spanish, Vietnamese
 SU 10:00AM-6:00PM
M-F 9:00AM-8:00PM
SA 10:00AM-6:00PM
 *Accessibility:* CONTACT
PROVIDER
 [https://www.southbayurgen
tcare.com/](https://www.southbayurgentcare.com/)
Accepting New Patients: No

Hills, Mary

Female

License #: AC17253

NPI#: 1427596998

2271 Alpine Blvd Ste E

Alpine, CA 91901

(619)517 7478

SU -

M -

TU -

W 9:00-6:00

TH 9:00-6:00

F 9:00-5:00

SA 9:00-3:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Laffen, Julie

Female

License #: AC12657

NPI#: 1629255021

4392 Bonita Rd

Bonita, CA 91902

(619)663 9417

SU 10:00-5:00

M -

TU -

W -

TH -

F -

SA 10:00-5:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Piao, Zhouyong

Male

License #: AC17774

NPI#: 1528562923

5030 Bonita Rd Ste B

Bonita, CA 91902

(619)479 7473

SU -

M 8:00-1:00

TU 8:00-1:00

W 8:00-3:00

TH 8:00-1:00

F 8:00-1:00

SA 8:00-1:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Kim, Min Joong

Male

License #: AC19242

NPI#: 1972273555

4514 Bonita Rd

Bonita, CA 91902

(619)470 4714

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA 9:00-4:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Lopez, Arianna

Female

License #: AC19453

NPI#: 1588385264

4514 Bonita Rd

Bonita, CA 91902

(619)470 4714

SU -

M 8:00-8:00

TU 8:00-8:00

W 8:00-8:00

TH 8:00-8:00

F 8:00-8:00

SA 9:00-2:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Vallarta, Barbara

Female

License #: AC16535

NPI#: 1942689278

4514 Bonita Rd

Bonita, CA 91902

(619)470 4714

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA 10:00-4:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Zhao, Chutima

Female

License #: 18190*NPI#:* 1730853193

4514 Bonita Rd
Bonita, CA 91902
(619)470 4714
SU -
M 8:00-5:00
TU 8:00-5:00
W 8:00-5:00
TH 8:00-5:00
F 8:00-5:00
SA 8:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Han, Sang-Kyou**

Male

License #: AC17562*NPI#:* 1043749401

756 Grand Ave Ste B
Carlsbad, CA 92008
(760)421 1321
SU -
M -
TU 8:30-6:00
W -
TH 8:30-6:00
F -
SA 10:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Kawano, Toshiya**

Male

License #: AC18363*NPI#:* 1972096717

5650 El Camino Real Ste 285
Carlsbad, CA 92008
(760)683 5858
SU -
M -
TU 9:00-3:30
W 9:00-3:30
TH 9:00-3:30
F 9:00-3:30
SA 9:00-11:30

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Cobb, Ayanna**

Female

License #: AC16958*NPI#:* 1922304674

2890 Pio Pico Dr Ste 104
Carlsbad, CA 92008
(760)331 4271
SU -
M 10:00-5:30
TU -
W 10:00-5:30
TH 10:00-5:30
F 1:00-5:30
SA 12:00-3:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Han, Claire**

Female

License #: AC9105*NPI#:* 1801967518

1902 Wright Pl Ste 200
Carlsbad, CA 92008
(760)855 6504
SU -
M 9:00-4:00
TU 9:00-4:00
W 9:00-4:00
TH 9:00-4:00
F 9:00-4:00
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Lyons, Jennifer**

Female

License #: AC13159*NPI#:* 1114252962

1207 Carlsbad Village Dr Ste T
Carlsbad, CA 92008
(760)415 7590
SU -
M 2:00-5:00
TU 10:00-1:00
W -
TH 2:00-5:00
F 10:00-1:00
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: No*

Scarlett, Yvonne

Female

License #: AC16118*NPI#:* 1083026223

2890 Pio Pico Dr Ste 104

Carlsbad, CA 92008

(760)637 5069

SU -

M -

TU -

W -

TH 11:30-4:30

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Anton, Cecilia**

Female

License #: AC19907*NPI#:* 1831964105

821 Kuhn Dr Ste 101

Chula Vista, CA 91914

(619)432 2477

SU -

M -

TU 9:00-7:00

W -

TH 9:00-7:00

F 12:00-7:00

SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Hwang, Soo Chun**

Male

License #: AC17544*NPI#:* 1588192439

910 Hale Pl Ste 214

Chula Vista, CA 91914

(619)922 2902

SU -

M -

TU 9:00-4:00

W 5:00-9:00

TH 9:00-4:00

F 5:00-9:00

SA 5:00-9:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Tom, Jennifer**

Female

License #: AC16199*NPI#:* 1639576754

1207 Carlsbad Village Dr Ste T

Carlsbad, CA 92008

(760)487 8857

SU -

M 8:00-1:00

TU 2:00-7:00

W -

TH 8:00-1:00

F 2:00-7:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Dinsmore, Richard**

Male

License #: AC2704*NPI#:* 1780754911

1214 3rd Ave

Chula Vista, CA 91911

(619)946 7035

SU -

M 9:00-4:00

TU -

W 9:00-4:00

TH -

F 9:00-4:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Hwang, Ing-Jun**

Female

License #: AC19719*NPI#:* 1942983556

821 Kuhn Dr Ste 101

Chula Vista, CA 91914

(619)432 2477

SU 10:00-5:00

M -

TU 2:00-7:00

W -

TH -

F 10:00-7:00

SA 10:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Kanomata, Atsushi

Male

*License #: AC9802**NPI#: 1285947457*

821 Kuhn Dr Ste 101
Chula Vista, CA 91914
(619)432 2477
SU -
M -
TU 2:00-7:00
W -
TH 2:00-7:00
F -
SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Mendez, Michael**

Male

*License #: AC18795**NPI#: 1194357327*

265 E St Ste A
Chula Vista, CA 91910
(858)294 3865
SU -
M 9:00-5:00
TU 9:00-5:00
W 9:00-5:00
TH 9:00-5:00
F 9:00-5:00
SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Tran, Carol**

Female

*License #: AC18018**NPI#: 1598259491*

1229 3rd Ave Ste C
Chula Vista, CA 91911
(619)271 2772
SU -
M -
TU 11:00-6:00
W 11:00-6:00
TH 11:00-6:00
F -
SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Lee, Il Ju**

Male

*License #: AC16829**NPI#: 1952898298*

296 H St Ste 203
Chula Vista, CA 91910
(800)385 1130
SU -
M -
TU -
W -
TH -
F 9:00-6:00
SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Son, Jae Jin**

Female

*License #: AC8587**NPI#: 1649619412*

296 H St Ste 203
Chula Vista, CA 91910
(760)650 6660
SU -
M -
TU -
W -
TH -
F -
SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Wells, Emily**

Female

*License #: AC19023**NPI#: 1861075046*

955 Lane Ave Ste 101
Chula Vista, CA 91914
(619)500 4615
SU -
M 8:00-5:00
TU -
W 8:00-5:00
TH -
F 7:00-4:00
SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Beck, Andrea

Female

*License #: AC16443**NPI#: 1487032975*

1011 Camino del Mar Ste 212

Del Mar, CA 92014

(619)813 9575

SU -

M -

TU -

W -

TH -

F -

SA 11:00-5:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Bonito, Amber**

Female

*License #: AC14115**NPI#: 1962796581*

564 Broadway

El Cajon, CA 92021

(619)467 0634

SU -

M 9:00-2:00

TU 9:00-7:00

W 9:00-7:00

TH 9:00-7:00

F -

SA 9:00-2:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Culp, Casey**

Female

*License #: AC18905**NPI#: 1528321510*

1149 N 2nd St

El Cajon, CA 92021

(619)440 2440

SU -

M 9:00-7:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-7:00

F 9:00-7:00

SA 9:00-5:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Anton, Cecilia**

Female

*License #: AC19907**NPI#: 1831964105*

1149 N 2nd St

El Cajon, CA 92021

(619)440 2440

SU 8:00-6:00

M 8:00-6:00

TU 8:00-6:00

W 8:00-6:00

TH 8:00-6:00

F 8:00-6:00

SA 8:00-6:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Candelaria, Ida**

Female

*License #: AC5540**NPI#: 1568539179*

983 E Washington Ave

El Cajon, CA 92020

(619)602 3366

SU -

M 9:00-4:00

TU -

W 9:00-4:00

TH -

F 1:00-4:00

SA 9:00-1:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Custodio, Lesley**

Female

*License #: AC13581**NPI#: 1710297817*

314 S Magnolia Ave

El Cajon, CA 92020

(619)438 0228

SU -

M 9:00-2:00

TU -

W -

TH 1:00-6:00

F 9:00-2:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Flores, Yesenia

Female

License #: AC19135*NPI#:* 1972276236

1149 N 2nd St
 El Cajon, CA 92021
 (619)444 2440
 SU -
 M 8:00-3:00
 TU 7:00-1:00
 W -
 TH -
 F -
 SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Kim, Min Joo**

Male

License #: AC13813*NPI#:* 1689941791

855 E Madison Ave
 El Cajon, CA 92020
 (833)867 4642
 SU -
 M -
 TU -
 W -
 TH -
 F -
 SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Knapp, Rhiannon**

Female

License #: AC19667*NPI#:* 1063127728

1149 N 2nd St
 El Cajon, CA 92021
 (619)440 2440
 SU 9:00-5:00
 M 8:00-8:00
 TU 8:00-8:00
 W 8:00-8:00
 TH 8:00-8:00
 F 8:00-8:00
 SA 8:00-6:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Goldman, Roni**

Female

License #: AC19718*NPI#:* 1285328690

1149 N 2nd St
 El Cajon, CA 92021
 (619)440 2440
 SU -
 M -
 TU -
 W -
 TH -
 F -
 SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Kim, Min Joo**

Male

License #: AC13813*NPI#:* 1689941791

470 N Mollison Ave
 El Cajon, CA 92021
 (833)867 4642
 SU -
 M -
 TU -
 W -
 TH -
 F -
 SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Larowe, Alexiss**

Female

License #: AC18576*NPI#:* 1255991683

2295 Fletcher Pkwy Ste 101
 El Cajon, CA 92020
 (760)803 5995
 SU 9:00-5:00
 M -
 TU 9:00-5:00
 W 9:00-5:00
 TH -
 F 9:00-5:00
 SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes*

Lee, Yoon

Female

*License #: AC18937**NPI#: 1497360820*

1149 N 2nd St
 El Cajon, CA 92021
 (619)440 2440
 SU 9:00-5:00
 M -
 TU -
 W -
 TH 9:00-5:00
 F 9:00-5:00
 SA 9:00-5:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Poty, Lisa Jeanne**

Female

*License #: AC7703**NPI#: 1235299611*

251 E Main St
 El Cajon, CA 92020
 (619)440 4333
 SU -
 M -
 TU 9:30-5:00
 W 9:00-1:30
 TH 9:30-5:00
 F 9:30-4:30
 SA 9:00-1:30

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Arellano, Jacqueline**

Female

*License #: AC18532**NPI#: 1104129485*

1200 Garden View Rd Ste 200
 Encinitas, CA 92024
 (800)926 8273
 SU -
 M 9:00-5:00
 TU 9:00-5:00
 W 9:00-5:00
 TH 9:00-5:00
 F 9:00-5:00
 SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Onan, Teresa**

Female

*License #: AC15303**NPI#: 1144598988*

1149 N 2nd St
 El Cajon, CA 92021
 (619)440 2440
 SU -
 M 8:00-6:00
 TU -
 W -
 TH 7:00-7:00
 F -
 SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Zinner, Travis**

Male

*License #: 19038**NPI#: 1073180394*

1149 N 2nd St
 El Cajon, CA 92021
 (619)440 2440
 SU -
 M 8:00-6:00
 TU 8:00-6:00
 W -
 TH -
 F -
 SA 8:00-6:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Blair, Sherine**

Female

*License #: AC13201**NPI#: 1902130396*

543 Encinitas Blvd Ste 107
 Encinitas, CA 92024
 (858)480 6890
 SU -
 M 8:30-5:00
 TU 8:30-5:00
 W 8:30-5:00
 TH 8:30-5:00
 F 8:30-12:00
 SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Burr, Douglas

Male

License #: AC9381*NPI#:* 1821257825

1200 Garden View Rd Ste 200

Encinitas, CA 92024

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Gonzalez, Andres**

Male

License #: AC15708*NPI#:* 1841857729

1130 2nd St

Encinitas, CA 92024

(760)736 6767

SU -

M -

TU 8:00-5:00

W -

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Julian, Fides**

Female

License #: AC18652*NPI#:* 1407401128

1200 Garden View Rd Ste 200

Encinitas, CA 92024

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Goforth, Greta**

Female

License #: AC11921*NPI#:* 1679750095

187 Calle Magdalena Ste 214

Encinitas, CA 92024

(760)815 6265

SU -

M 10:00-6:30

TU 10:00-6:30

W 10:00-6:30

TH 10:00-6:30

F 10:00-6:30

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Ji, Dong**

Male

License #: AC13205*NPI#:* 1912293671

1200 Garden View Rd Ste 200

Encinitas, CA 92024

(800)926 8273

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Murray, Steven**

Male

License #: 18288*NPI#:* 1104456078

1200 Garden View Rd Ste 200

Encinitas, CA 92024

(800)926 8273

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No

Reyes, Estela

Female

License #: AC18494*NPI#:* 1376106377

1200 Garden View Rd Ste 200

Encinitas, CA 92024

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Tang-Ritchie, Leng**

Female

License #: AC14241*NPI#:* 1497044580

1200 Garden View Rd Ste 200

Encinitas, CA 92024

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Akhavan, Farahnaz**

Female

License #: AC9396*NPI#:* 1881795250

1733 S Escondido Blvd

Escondido, CA 92025

(760)233 5886

SU 9:00-12:00

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 10:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Robles, Ma Regina Blanca**

Female

License #: 19279*NPI#:* 1184386419

317 N El Camino Real Ste 306

Encinitas, CA 92024

(858)673 4400

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA 8:00-12:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Tsoucalas, Katerina**

Female

License #: 17974*NPI#:* 1811487226

191 Calle Magdalena Ste 295

Encinitas, CA 92024

(858)461 8826

SU -

M 9:00-6:00

TU 9:00-8:00

W 9:00-8:00

TH 9:00-8:00

F 9:00-6:00

SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Chang, Xuan**

Female

License #: AC6357*NPI#:* 1942226626

100 Holland Gln

Escondido, CA 92026

(619)871 6068

SU -

M -

TU 1:00-6:00

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Kim, Min Joo

Male

License #: AC13813*NPI#:* 1689941791460 N Elm St
Escondido, CA 92025

(760)520 8100

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Kwak, Hyoshin**

Male

License #: AC16939*NPI#:* 1477033272106 S Grape St Ste 10
Escondido, CA 92025

(213)568 5470

SU -

M 10:00-6:00

TU 10:00-6:00

W 10:00-6:00

TH 10:00-6:00

F 10:00-6:00

SA 9:00-2:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**McIntyre, Michele**

Female

License #: AC17772*NPI#:* 11548312468975 Lawrence Welk Dr Spc 323
Escondido, CA 92026

(619)307 2631

SU -

M 8:30-4:30

TU 8:30-6:00

W 8:30-6:00

TH 8:30-5:30

F 8:30-4:30

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Kim, Min Joo**

Male

License #: AC13813*NPI#:* 1689941791425 N Date St
Escondido, CA 92025

(760)520 8300

SU -

M 8:00-5:00

TU -

W 8:00-5:00

TH -

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**McAdams, Donna**

Female

License #: AC8311*NPI#:* 1669421905325 W 3rd Ave Ste 102
Escondido, CA 92025

(760)796 4519

SU -

M -

TU 8:00-5:00

W 8:00-5:00

TH -

F 8:00-5:00

SA 8:00-2:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Pole, Carolyn**

Female

License #: AC4587*NPI#:* 1831143379337 S Kalmia St
Escondido, CA 92025

(760)445 7595

SU -

M -

TU 10:00-6:00

W 10:00-6:00

TH -

F 10:00-6:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Stubblefield, Michael

Male

License #: AC13558

NPI#: 1194009951

333 S Juniper St Ste111

Escondido, CA 92025

(760)815 3881

SU -

M 9:00-5:30

TU 9:00-5:30

W 9:00-5:30

TH 9:00-5:30

F 9:00-5:30

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Kim, Min Joo

Male

License #: AC13813

NPI#: 1689941791

1309 S Mission Rd

Fallbrook, CA 92028

(833)864 4642

SU -

M -

TU 8:00-5:00

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Arellano, Jacqueline

Female

License #: AC18532

NPI#: 1104129485

9400 Campus Point Dr

La Jolla, CA 92093

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Tran, Kiet

Male

License #: AC15464

NPI#: 1336432426

260 W Crest St Ste B

Escondido, CA 92025

(760)650 2247

SU 9:00-5:00

M 6:00-9:00

TU 8:00-9:00

W 6:00-9:00

TH 6:00-9:00

F 6:00-9:00

SA 9:00-5:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Stephens, Lori

Female

License #: AC15042

NPI#: 1477904027

587 E Elder St Ste B

Fallbrook, CA 92028

(714)330 9244

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F -

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Arellano, Jacqueline

Female

License #: AC18532

NPI#: 1104129485

9300 Campus Point Dr

La Jolla, CA 92037

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Arellano, Jacqueline

Female

License #: AC18532

NPI#: 1104129485

8910 Villa La Jolla Dr Ste 200

La Jolla, CA 92037

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-8:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Bousquin, Diane**

Female

License #: AC10132

NPI#: 1861610891

7634 Girard Ave Ste T

La Jolla, CA 92037

(619)808 1099

SU -

M 9:00-7:00

TU -

W 9:00-6:00

TH -

F 9:00-4:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Burr, Douglas**

Male

License #: AC9381

NPI#: 1821257825

8910 Villa La Jolla Dr Ste 200

La Jolla, CA 92037

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Booth, Beata**

Female

License #: AC7235

NPI#: 1396844825

6529 La Jolla Blvd

La Jolla, CA 92037

(858)454 2025

SU -

M 10:00-6:00

TU -

W -

TH 10:00-7:00

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Burr, Douglas**

Male

License #: AC9381

NPI#: 1821257825

9300 Campus Point Dr

La Jolla, CA 92037

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Burr, Douglas**

Male

License #: AC9381

NPI#: 1821257825

9400 Campus Point Dr

La Jolla, CA 92093

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No

Gallet, Mariel

Female

*License #: AC17357**NPI#: 1801347547*

8950 Villa La Jolla Dr Ste B212

La Jolla, CA 92037

(858)263 6088

SU -

M -

TU 9:00-7:00

W -

TH 9:00-7:00

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Ji, Dong**

Male

*License #: AC13205**NPI#: 1912293671*

9400 Campus Point Dr

La Jolla, CA 92093

(844)747 0474

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Julian, Fides**

Female

*License #: AC18652**NPI#: 1407401128*

8910 Villa La Jolla Dr Ste 200

La Jolla, CA 92037

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Ji, Dong**

Male

*License #: AC13205**NPI#: 1912293671*

8910 Villa La Jolla Dr Ste 200

La Jolla, CA 92037

(844)747 0474

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Ji, Dong**

Male

*License #: AC13205**NPI#: 1912293671*

9300 Campus Point Dr

La Jolla, CA 92037

(800)926 8273

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Julian, Fides**

Female

*License #: AC18652**NPI#: 1407401128*

9300 Campus Point Dr

La Jolla, CA 92037

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No*

Julian, Fides

Female

License #: AC18652*NPI#:* 1407401128

9400 Campus Point Dr

La Jolla, CA 92093

(844)747 0474

SU -

M 5:00-8:00

TU 5:00-8:00

W 5:00-8:00

TH 5:00-8:00

F 5:00-8:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Murray, Steven**

Male

License #: 18288*NPI#:* 1104456078

9400 Campus Point Dr

La Jolla, CA 92093

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Reyes, Estela**

Female

License #: AC18494*NPI#:* 1376106377

9300 Campus Point Dr

La Jolla, CA 92037

(844)747 0474

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Murray, Steven**

Male

License #: 18288*NPI#:* 1104456078

9300 Campus Point Dr

La Jolla, CA 92037

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Murray, Steven**

Male

License #: 18288*NPI#:* 1104456078

8910 Villa La Jolla Dr Ste 200

La Jolla, CA 92037

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Reyes, Estela**

Female

License #: AC18494*NPI#:* 1376106377

8910 Villa La Jolla Dr Ste 200

La Jolla, CA 92037

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No

Reyes, Estela

Female

License #: AC18494*NPI#:* 1376106377

9400 Campus Point Dr

La Jolla, CA 92093

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Tang-Ritchie, Leng**

Female

License #: AC14241*NPI#:* 1497044580

8910 Villa La Jolla Dr Ste 200

La Jolla, CA 92037

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**El Khoury, Ghassan**

Male

License #: AC10036*NPI#:* 1265985824

5360 Jackson Dr Ste 110

La Mesa, CA 91942

(619)465 8800

SU -

M 10:00-5:00

TU 10:00-5:00

W 10:00-5:00

TH 10:00-5:00

F 10:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Tang-Ritchie, Leng**

Female

License #: AC14241*NPI#:* 1497044580

9400 Campus Point Dr

La Jolla, CA 92093

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Tang-Ritchie, Leng**

Female

License #: AC14241*NPI#:* 1497044580

9300 Campus Point Dr

La Jolla, CA 92037

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Goldman, Roni**

Female

License #: AC19718*NPI#:* 1285328690

8875 La Mesa Blvd Ste E

La Mesa, CA 91942

(619)278 9020

SU -

M 9:00-5:00

TU 9:00-7:00

W 9:00-5:00

TH 9:00-7:00

F 9:00-3:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Jackson, Patricia

Female

License #: AC7976*NPI#:* 1760656904

4754 Palm Ave
La Mesa, CA 91942
(619)990 2878
SU -
M -
TU 9:00-5:00
W -
TH 9:00-5:00
F 9:00-5:00
SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Mergens, Jane**

Female

License #: AC10129*NPI#:* 1982658993

9019 Park Plaza Dr Ste D
La Mesa, CA 91942
(619)606 6464
SU -
M -
TU 10:30-5:00
W -
TH 10:30-5:00
F -
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Paulo, Pier**

Female

License #: AC9020*NPI#:* 1063746477

8875 La Mesa Blvd Ste E
La Mesa, CA 91942
(619)278 9020
SU -
M 9:00-5:00
TU 9:00-3:00
W 9:00-5:00
TH 9:00-3:00
F 9:00-3:00
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Lala, Steven**

Male

License #: AC18021*NPI#:* 1548741911

7373 University Ave Ste 211
La Mesa, CA 91942
(619)881 0428
SU -
M 9:00-6:00
TU 9:00-6:00
W 9:00-6:00
TH 9:00-6:00
F 9:00-6:00
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Miller, Christine**

Female

License #: AC9627*NPI#:* 1871663948

4754 Palm Ave
La Mesa, CA 91942
(619)302 1129
SU -
M 9:00-3:00
TU 9:00-3:00
W 9:00-3:00
TH 9:00-1:00
F 9:00-1:00
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Kim, Min Joo**

Male

License #: AC13813*NPI#:* 1689941791

10039 Vine St
Lakeside, CA 92040
(833)867 4642
SU -
M -
TU -
W -
TH -
F -
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Allen, Jennifer

Female

License #: AC17744*NPI#:* 1568889863

2424 Vista Way Ste 125

Oceanside, CA 92054

(442)226 8208

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Choi, Mijoung**

Female

License #: AC17396*NPI#:* 1649721416

3861 Mission Ave Ste B27

Oceanside, CA 92058

(760)970 0244

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Gonzalez, Andres**

Male

License #: AC15708*NPI#:* 1841857729

619 Crouch St Ste 100

Oceanside, CA 92054

(760)736 6767

SU -

M 8:00-5:00

TU -

W 8:00-5:00

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Anderson, Tisa**

Female

License #: AC16093*NPI#:* 1497986624

804 Pier View Way Ste 200

Oceanside, CA 92054

(760)590 9274

SU -

M 8:00-6:00

TU 8:00-6:00

W 8:00-6:00

TH 8:00-6:00

F 8:00-6:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Choo, Kwangmyung**

Male

License #: AC10231*NPI#:* 1407986268

1906 Oceanside Blvd Ste S

Oceanside, CA 92054

(760)754 2007

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA 9:00-12:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Gonzalez, Andres**

Male

License #: AC15708*NPI#:* 1841857729

3998 Vista Way Ste G

Oceanside, CA 92056

(760)736 6767

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes*

Haun, Daniel

Male

*License #: AC6774**NPI#: 1568548618*

701 Seagaze Dr Ste B

Oceanside, CA 92054

(760)803 6725

SU -

M 9:00-5:00

TU -

W 8:00-12:00

TH -

F 9:00-5:30

SA 8:30-2:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Stampbach, Alex**

Male

*License #: AC17496**NPI#: 1568998524*

2124 S El Camino Real Ste 202

Oceanside, CA 92054

(760)453 0332

SU 9:00-7:00

M 9:00-7:00

TU 9:00-7:00

W 9:00-7:00

TH 9:00-7:00

F 9:00-7:00

SA 9:00-7:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Arnold, Michele**

Female

*License #: AC6958**NPI#: 1326107442*

15644 Pomerado Rd Ste 102

Poway, CA 92064

(858)613 0792

SU -

M 8:30-4:30

TU 8:30-4:30

W 8:30-4:30

TH 8:30-4:30

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Lipton, Gregory**

Male

*License #: AC8207**NPI#: 1841367117*

701 Seagaze Dr Ste B

Oceanside, CA 92054

(760)721 4323

SU -

M 10:00-5:30

TU 11:00-6:00

W 10:00-6:00

TH 11:00-6:00

F 9:00-2:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Stevenson, Nancy**

Female

*License #: AC4332**NPI#: 1306009956*

310 S Coast Hwy

Oceanside, CA 92054

(858)344 0889

SU -

M -

TU 9:00-6:00

W -

TH 9:00-6:00

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Lu, Pin**

Female

*License #: AC17371**NPI#: 1558805283*

12243 Poway Rd

Poway, CA 92064

(858)261 8038

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-12:00

F 9:00-5:00

SA 9:00-12:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Robles, Ma Regina Blanca

Female

License #: 19279

NPI#: 1184386419

15725 Pomerado Rd Ste 210

Poway, CA 92064

(858)673 4400

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Wang, Yuan

Female

License #: AC8852

NPI#: 1073736880

15525 Pomerado Rd Ste E4

Poway, CA 92064

(858)829 9485

SU -

M 8:30-12:00

TU -

W 8:30-6:30

TH -

F -

SA 9:00-1:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Abdullah, Shaheed

Male

License #: AC8822

NPI#: 1790013514

5222 Balboa Ave Ste 43

San Diego, CA 92117

(858)467 9893

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-3:00

TH 9:00-6:00

F 9:00-12:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Shinagawa, Jocelyn

Female

License #: AC14190

NPI#: 1780964478

15525 Pomerado Rd Ste E4

Poway, CA 92064

(858)883 3867

SU -

M -

TU 10:00-6:00

W -

TH 10:00-6:00

F 10:00-6:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Whitney, Tracey

Female

License #: AC18066

NPI#: 1831424704

13525 Midland Rd Ste I

Poway, CA 92064

(858)692 5221

SU -

M 10:00-6:00

TU 8:00-4:00

W 8:00-6:00

TH 10:00-4:00

F 9:00-1:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Aikebaier, Aierken

Male

License #: AC19000

NPI#: 1457024853

6106 Village Way

San Diego, CA 92130

(858)588 7858

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Akhavan, Farahnaz

Female

License #: AC9396

NPI#: 1881795250

2883 Meade Ave Ste B

San Diego, CA 92116

(619)298 2342

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Arellano, Jacqueline

Female

License #: AC18532

NPI#: 1104129485

200 W Arbor Dr

San Diego, CA 92103

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Arellano, Jacqueline

Female

License #: AC18532

NPI#: 1104129485

330 Lewis St Ste 400

San Diego, CA 92103

(844)747 0474

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Altman, Ryan

Male

License #: AC10736

NPI#: 1104191394

3239 Adams Ave

San Diego, CA 92116

(619)546 4806

SU -

M 10:00-6:30

TU 10:00-6:30

W 10:00-6:30

TH 10:00-6:30

F 10:00-6:30

SA 11:00-4:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Arellano, Jacqueline

Female

License #: AC18532

NPI#: 1104129485

9333 Genesee Ave Ste 200

San Diego, CA 92121

(844)747 0474

SU -

M 9:00-8:00

TU 9:00-8:00

W 9:00-5:00

TH 9:00-8:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Arellano, Jacqueline

Female

License #: AC18532

NPI#: 1104129485

9909 Mira Mesa Blvd Ste 200

San Diego, CA 92131

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Arellano, Jacqueline

Female

License #: AC18532*NPI#:* 1104129485

4910 Directors Pl Ste 250

San Diego, CA 92121

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Beck, Andrea**

Female

License #: AC16443*NPI#:* 1487032975

5440 Morehouse Dr Ste 1700

San Diego, CA 92121

(858)455 7654

SU -

M 2:00-7:00

TU -

W 2:00-7:00

TH 10:00-2:00

F 2:00-7:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Burr, Douglas**

Male

License #: AC9381*NPI#:* 1821257825

200 W Arbor Dr

San Diego, CA 92103

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Bean, Adrian**

Male

License #: AC5546*NPI#:* 1073852455

9150 Chesapeake Dr Ste 120

San Diego, CA 92123

(619)542 0884

SU -

M 8:30-5:30

TU 8:30-5:30

W 8:30-5:30

TH 8:30-5:30

F 8:30-5:30

SA 8:30-5:30

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Burr, Douglas**

Male

License #: AC9381*NPI#:* 1821257825

330 Lewis St Ste 400

San Diego, CA 92103

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Burr, Douglas**

Male

License #: AC9381*NPI#:* 1821257825

4910 Directors Pl Ste 250

San Diego, CA 92121

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No

Burr, Douglas

Male

License #: AC9381

NPI#: 1821257825

9909 Mira Mesa Blvd Ste 200

San Diego, CA 92131

(844)747 0747

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Caliri, Rebecca**

Female

License #: AC14311

NPI#: 1689051708

1913 Euclid Ave Ste 107

San Diego, CA 92105

(619)719 1777

SU -

M 10:00-5:00

TU -

W 10:00-5:00

TH -

F 10:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Chang, Xuan**

Female

License #: AC6357

NPI#: 1942226626

10455 Sorrento Valley Rd Ste 208

San Diego, CA 92121

(619)871 6068

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Burr, Douglas**

Male

License #: AC9381

NPI#: 1821257825

9333 Genesee Ave Ste 200

San Diego, CA 92121

(844)747 0474

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Chang, Xuan**

Female

License #: AC6357

NPI#: 1942226626

10951 Sorrento Valley Rd Ste I-G

San Diego, CA 92121

(619)871 6068

SU 1:00-6:00

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Chang, Sophia**

Female

License #: AC17722

NPI#: 1427577576

4638 Park Blvd

San Diego, CA 92116

(619)220 0878

SU -

M 9:00-4:00

TU 1:00-4:00

W -

TH 9:00-4:00

F 9:00-4:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Chang, Xuan

Female

*License #: AC6357**NPI#: 1942226626*

16935 W Bernardo Dr Ste 104

San Diego, CA 92127

(619)871 6068

SU -

M -

TU 5:00-7:00

W -

TH -

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Cho, Kyu Ok**

Female

*License #: AC15015**NPI#: 1528302387*

8303 Clairemont Mesa Blvd Ste 104

San Diego, CA 92111

(858)866 6081

SU -

M 9:00-6:00

TU 9:00-6:00

W -

TH 9:00-6:00

F 9:00-6:00

SA 2:00-5:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Choi, Yoonhee**

Female

*License #: AC15915**NPI#: 1811259187*

8303 Clairemont Mesa Blvd Ste 104

San Diego, CA 92111

(858)707 5808

SU -

M -

TU -

W -

TH -

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Cheon, Seong**

Male

*License #: AC7216**NPI#: 1043527492*

7825 Engineer Rd Ste 209

San Diego, CA 92111

(858)576 2511

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA 9:00-4:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Choe, Helena**

Female

*License #: AC11298**NPI#: 1720420029*

1916 30th St

San Diego, CA 92102

(619)808 3198

SU -

M 8:00-8:00

TU -

W 8:00-8:00

TH -

F 8:00-8:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Choi, Yoonhee**

Female

*License #: AC15915**NPI#: 1811259187*

10717 Camino Ruiz Ste 119

San Diego, CA 92126

(858)707 5808

SU -

M -

TU -

W 9:00-2:00

TH -

F 9:00-2:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Coltart, Michelle

Female

License #: AC13330*NPI#:* 1972807774

3239 Adams Ave
 San Diego, CA 92116
 (619)546 4806
 SU -
 M 10:00-7:00
 TU 10:00-7:00
 W 10:00-7:00
 TH 10:00-7:00
 F 10:00-7:00
 SA 11:00-4:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Dang, Sheri**

Female

License #: AC17713*NPI#:* 1225567001

2727 Camino del Rio S Ste 104
 San Diego, CA 92108
 (619)738 5374
 SU -
 M -
 TU -
 W -
 TH -
 F -
 SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***DiVanterra, Darcy**

Female

License #: AC8921*NPI#:* 1073666186

3033 5th Ave Ste 230
 San Diego, CA 92103
 (619)887 0610
 SU -
 M 12:00-5:00
 TU -
 W 12:00-5:00
 TH -
 F 10:00-5:00
 SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Culp, Casey**

Female

License #: AC18905*NPI#:* 1528321510

11665 Avena Pl Ste 205
 San Diego, CA 92128
 (858)733 0832
 SU -
 M 8:00-6:00
 TU 8:00-6:00
 W 8:00-6:00
 TH 8:00-6:00
 F 8:00-6:00
 SA 8:00-6:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***De Rose, Leda**

Female

License #: AC17646*NPI#:* 1871020560

3239 Adams Ave
 San Diego, CA 92116
 (619)546 4806
 SU -
 M 10:00-7:00
 TU 10:00-7:00
 W 10:00-7:00
 TH 10:00-7:00
 F 10:00-7:00
 SA 11:00-4:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Eusebio, Rachel**

Female

License #: AC19932*NPI#:* 1588438089

6051 Business Center Ct Ste A3
 San Diego, CA 92154
 (619)288 3189
 SU -
 M 9:00-6:00
 TU 9:00-6:00
 W 9:00-6:00
 TH 9:00-6:00
 F 9:00-6:00
 SA 10:00-4:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes*

Flores, Yesenia

Female

License #: AC19135*NPI#:* 1972276236

3675 Ruffin Rd Ste 315

San Diego, CA 92123

(619)897 5558

SU -

M -

TU -

W -

TH -

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Friend, Yunhee**

Female

License #: AC17436*NPI#:* 1013147040

12264 El Camino Real Ste 108

San Diego, CA 92130

(858)229 1502

SU -

M 9:00-5:00

TU 2:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Godes, Marianna**

Female

License #: AC12945*NPI#:* 1043445844

319 Laurel St

San Diego, CA 92101

(858)337 9559

SU -

M 9:00-0:30

TU 3:00-7:00

W -

TH 9:00-7:00

F 9:00-0:30

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Foley, Susan**

Female

License #: AC2551*NPI#:* 1821205212

3650 Clairemont Dr Ste 12

San Diego, CA 92117

(858)270 4242

SU -

M -

TU 11:00-5:00

W -

TH 11:00-5:00

F 11:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Garcia, Ronald**

Male

License #: AC19848*NPI#:* 1225810419

1011 Camino del Rio S Ste 100

San Diego, CA 92108

(619)915 6007

SU -

M 10:00-7:00

TU 10:00-6:00

W 10:00-5:30

TH 10:00-7:00

F 10:00-6:00

SA 10:00-3:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Goldman, Roni**

Female

License #: AC19718*NPI#:* 1285328690

11665 Avena Pl Ste 205

San Diego, CA 92128

(858)733 0832

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes*

Guo, Naijia

Female

License #: AC17317*NPI#:* 1831640606

7297 Ronson Rd Ste C

San Diego, CA 92111

(858)568 5628

SU -

M 10:00-3:00

TU 1:00-4:00

W -

TH 10:00-3:00

F 10:00-3:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Hayes, Jewel**

Female

License #: AC13496*NPI#:* 1003115106

2525 Camino del Rio S Ste 245

San Diego, CA 92108

(914)649 9583

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Hong, HeeJoo**

Female

License #: AC12772*NPI#:* 1750666723

1011 Camino del Rio S Ste 100

San Diego, CA 92108

(619)915 6007

SU -

M 10:00-7:00

TU 10:00-6:00

W 10:00-5:30

TH 10:00-7:00

F 10:00-6:00

SA 10:00-3:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Halsey, Holly**

Female

License #: AC6531*NPI#:* 1225167034

9150 Chesapeake Dr Ste 120

San Diego, CA 92123

(619)542 0884

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Helgeson, Maile**

Female

License #: AC14651*NPI#:* 1104179266

3239 Adams Ave

San Diego, CA 92116

(619)546 4806

SU -

M -

TU 10:00-6:30

W -

TH 2:30-6:30

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Hou, Yahui**

Female

License #: AC19881*NPI#:* 1245011915

3080 N Park Way

San Diego, CA 92104

(760)449 8293

SU -

M 9:30-4:30

TU 9:00-5:30

W 9:30-5:30

TH 9:30-1:30

F 9:00-3:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes*

Hwang, Soo Chun

Male

License #: AC17544*NPI#:* 1588192439

9474 Kearny Villa Rd Ste 113

San Diego, CA 92126

(858)578 2070

SU -

M -

TU -

W 9:00-4:30

TH -

F -

SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Hwang, Ing-Jun**

Female

License #: AC19719*NPI#:* 1942983556

4052 Clairemont Dr

San Diego, CA 92117

(619)339 7079

SU 9:00-5:00

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Ji, Dong**

Male

License #: AC13205*NPI#:* 1912293671

330 Lewis St Ste 400

San Diego, CA 92103

(844)747 0474

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Hwang, Soo Chun**

Male

License #: AC17544*NPI#:* 1588192439

9474 Kearny Villa Rd Ste 111

San Diego, CA 92126

(858)987 6267

SU -

M 12:00-5:00

TU 5:30-9:00

W 9:00-5:00

TH 5:30-9:00

F 9:00-5:00

SA 8:00-6:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Hwang, Ha**

Male

License #: AC9404*NPI#:* 1174682256

1370 Rosecrans St Ste C

San Diego, CA 92106

(619)866 1414

SU -

M 10:00-6:00

TU 10:00-6:00

W 10:00-6:00

TH 10:00-6:00

F 10:00-6:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Ji, Dong**

Male

License #: AC13205*NPI#:* 1912293671

200 W Arbor Dr

San Diego, CA 92103

(800)926 8273

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No

Ji, Dong

Male

License #: AC13205

NPI#: 1912293671

9333 Genesee Ave Ste 200

San Diego, CA 92121

(844)747 0474

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Ji, Dong**

Male

License #: AC13205

NPI#: 1912293671

9909 Mira Mesa Blvd Ste 200

San Diego, CA 92131

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Julian, Fides**

Female

License #: AC18652

NPI#: 1407401128

2525 Camino del Rio S Ste 313

San Diego, CA 92108

(619)800 0190

SU -

M -

TU 10:00-6:00

W -

TH -

F 10:00-6:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Ji, Dong**

Male

License #: AC13205

NPI#: 1912293671

4910 Directors Pl Ste 250

San Diego, CA 92121

(800)926 8273

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Julian, Fides**

Female

License #: AC18652

NPI#: 1407401128

9333 Genesee Ave Ste 200

San Diego, CA 92121

(844)747 0474

SU -

M 4:00-8:00

TU 4:00-8:00

W 4:00-8:00

TH 4:00-8:00

F 4:00-8:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Julian, Fides**

Female

License #: AC18652

NPI#: 1407401128

330 Lewis St Ste 400

San Diego, CA 92103

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No

Julian, Fides

Female

License #: AC18652*NPI#:* 1407401128

9909 Mira Mesa Blvd Ste 200

San Diego, CA 92131

(844)747 0474

SU -

M -

TU -

W 12:00-5:00

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Julian, Fides**

Female

License #: AC18652*NPI#:* 1407401128

4910 Directors Pl Ste 250

San Diego, CA 92121

(800)926 8273

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Kanomata, Atsushi**

Male

License #: AC9802*NPI#:* 1285947457

2180 Garnet Ave Ste 1-I

San Diego, CA 92109

(619)432 2477

SU -

M -

TU -

W 10:00-6:00

TH -

F -

SA 12:00-6:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Julian, Fides**

Female

License #: AC18652*NPI#:* 1407401128

200 W Arbor Dr

San Diego, CA 92103

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Julian, Fides**

Female

License #: AC18652*NPI#:* 1407401128

7204 Clairemont Mesa Blvd

San Diego, CA 92111

(619)800 0190

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Kanomata, Atsushi**

Male

License #: AC9802*NPI#:* 1285947457

6051 Business Center Ct Ste A3

San Diego, CA 92154

(619)288 3189

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Kim, Stephen

Male

*License #: AC9657**NPI#: 1508152133*

7750 Dagget St Ste 105

San Diego, CA 92111

(858)717 6120

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA 9:00-12:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Laffen, Julie**

Female

*License #: AC12657**NPI#: 1629255021*

2852 Adams Ave

San Diego, CA 92116

(619)663 9417

SU -

M -

TU 2:00-8:00

W -

TH 2:00-8:00

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Liu, Yifan**

Male

*License #: AC17537**NPI#: 1013437813*

9636 Tierra Grande St Ste 101

San Diego, CA 92126

(858)729 3580

SU -

M 8:30-5:30

TU 8:30-5:30

W -

TH 8:30-5:30

F 8:30-5:30

SA 8:30-2:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Koolen, Danae**

Female

*License #: AC9682**NPI#: 1780754572*

4732 Point Loma Ave Ste D

San Diego, CA 92107

(619)990 9553

SU -

M 10:00-1:00

TU 10:00-4:00

W 10:00-5:00

TH 12:00-5:00

F 10:00-4:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Lee, Yoon**

Female

*License #: AC18937**NPI#: 1497360820*

11665 Avena Pl Ste 205

San Diego, CA 92128

(858)733 0832

SU -

M 8:00-6:00

TU 8:00-6:00

W 8:00-6:00

TH 8:00-6:00

F 8:00-6:00

SA 8:00-6:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Lundin, Katarina**

Female

*License #: AC14873**NPI#: 1861750358*

4732 Point Loma Ave Ste D

San Diego, CA 92107

(619)917 9420

SU -

M -

TU 9:00-7:00

W 9:00-7:00

TH 9:00-7:00

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

McKinnon, Dave

Male

License #: AC12894*NPI#:* 1730314709

3914 Murphy Canyon Rd Ste A239

San Diego, CA 92123

(858)836 1080

SU -

M 2:00-7:00

TU 2:00-7:00

W 9:00-7:00

TH -

F 9:00-2:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Miyashiro, Wendi**

Female

License #: AC10383*NPI#:* 1508011891

2481 Congress St

San Diego, CA 92110

(858)740 1838

SU -

M -

TU 9:00-5:00

W -

TH 9:00-5:00

F 9:00-1:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Murray, Steven**

Male

License #: 18288*NPI#:* 1104456078

330 Lewis St Ste 400

San Diego, CA 92103

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Mendez, Michael**

Male

License #: AC18795*NPI#:* 1194357327

2515 Camino del Rio S Ste A

San Diego, CA 92108

(619)748 6931

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Murra, Fawsi**

Male

License #: AC8834*NPI#:* 1437693603

2852 Adams Ave

San Diego, CA 92116

(619)282 8068

SU -

M 9:00-6:30

TU -

W 9:00-6:30

TH -

F 9:00-6:30

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Murray, Steven**

Male

License #: 18288*NPI#:* 1104456078

200 W Arbor Dr

San Diego, CA 92103

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No

Murray, Steven

Male

License #: 18288*NPI#:* 1104456078

4910 Directors Pl Ste 250

San Diego, CA 92121

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Murray, Steven**

Male

License #: 18288*NPI#:* 1104456078

9909 Mira Mesa Blvd Ste 200

San Diego, CA 92131

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Negron, Yvonne**

Female

License #: AC4634*NPI#:* 1275758435

5830 Oberlin Dr Ste 104

San Diego, CA 92121

(619)675 2468

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA 9:00-2:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Murray, Steven**

Male

License #: 18288*NPI#:* 1104456078

9333 Genesee Ave Ste 200

San Diego, CA 92121

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Murray, Steven**

Male

License #: 18288*NPI#:* 1104456078

5602 El Cajon Blvd

San Diego, CA 92115

(619)601 4103

SU -

M 9:00-7:00

TU 9:00-7:00

W 9:00-7:00

TH 9:00-7:00

F 9:00-5:00

SA 9:00-1:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Noonan, Thomas**

Male

License #: AC17328*NPI#:* 1023551421

3505 Camino del Rio S Ste 100

San Diego, CA 92108

(619)550 5200

SU -

M -

TU 9:00-5:00

W 1:00-5:00

TH 9:00-5:00

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Oh, Young Shig

Male

License #: AC10624*NPI#:* 1871753582

16766 Bernardo Center Dr Ste 111

San Diego, CA 92128

(858)673 1733

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Oh, Young Shig**

Male

License #: AC10624*NPI#:* 1871753582

12396 World Trade Dr Ste 110

San Diego, CA 92128

(858)705 6024

SU -

M 8:00-6:00

TU 8:00-6:00

W 1:00-6:00

TH 8:00-6:00

F 8:00-6:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Ohashi, Evelyn**

Female

License #: AC18487*NPI#:* 1295390433

1545 Hotel Cir S Ste 120

San Diego, CA 92108

(619)693 8559

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Oh, Young Shig**

Male

License #: AC10624*NPI#:* 1871753582

6540 Lusk Blvd Ste C144

San Diego, CA 92121

(858)658 9980

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Oh, Young Shig**

Male

License #: AC10624*NPI#:* 1871753582

11770 Bernardo Plaza Ct Ste 351

San Diego, CA 92128

(858)705 6024

SU -

M -

TU -

W 8:00-12:00

TH -

F -

SA 8:00-12:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Onan, Teresa**

Female

License #: AC15303*NPI#:* 1144598988

11665 Avena Pl Ste 205

San Diego, CA 92128

(858)733 0832

SU -

M 8:00-6:00

TU 8:00-6:00

W 8:00-6:00

TH 8:00-6:00

F 8:00-6:00

SA 8:00-6:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Pfeiffer, Kirk

Male

*License #: AC8484**NPI#: 1467647313*

842 Washington St Ste B

San Diego, CA 92103

(619)339 9980

SU -

M 10:00-5:00

TU -

W 1:30-5:00

TH -

F 11:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Plummer, Brittany**

Female

*License #: AC16533**NPI#: 1659758795*

16769 Bernardo Center Dr Ste 21

San Diego, CA 92128

(858)675 0007

SU -

M 8:00-6:00

TU 8:00-6:00

W 8:00-6:00

TH 8:00-6:00

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Rachels, Liman**

Female

*License #: AC9962**NPI#: 1821162744*

9625 Black Mountain Rd Ste 306

San Diego, CA 92126

(858)578 8556

SU -

M -

TU -

W -

TH -

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Pham, James**

Male

*License #: AC17605**NPI#: 1265960066*

7612 Linda Vista Rd Ste 117

San Diego, CA 92111

(858)569 5956

SU -

M 9:00-1:00

TU 9:00-3:00

W 9:00-5:00

TH 9:00-1:00

F 9:00-5:00

SA 9:00-2:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Quach, Lan**

Female

*License #: AC17514**NPI#: 1477082667*

2727 Camino del Rio S Ste 104

San Diego, CA 92108

(858)334 9311

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F -

SA 9:00-5:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Ramos, Maria-Cristina**

Female

*License #: AC16498**NPI#: 1114376571*

2525 Camino del Rio S Ste 320

San Diego, CA 92108

(619)786 3321

SU -

M -

TU 9:30-5:00

W 9:30-5:00

TH -

F 9:30-3:00

SA 9:30-3:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Reyes, Estela

Female

License #: AC18494

NPI#: 1376106377

200 W Arbor Dr
San Diego, CA 92103
(844)747 0474
SU -
M 9:00-5:00
TU 9:00-5:00
W 9:00-5:00
TH 9:00-5:00
F 9:00-5:00
SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Reyes, Estela

Female

License #: AC18494

NPI#: 1376106377

9909 Mira Mesa Blvd Ste 200
San Diego, CA 92131
(844)747 0474
SU -
M -
TU -
W 12:00-4:30
TH -
F -
SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Reyes, Estela

Female

License #: AC18494

NPI#: 1376106377

4910 Directors Pl Ste 250
San Diego, CA 92121
(800)926 8273
SU -
M 9:00-5:00
TU 9:00-5:00
W 9:00-5:00
TH 9:00-5:00
F 9:00-5:00
SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Reyes, Estela

Female

License #: AC18494

NPI#: 1376106377

330 Lewis St Ste 400
San Diego, CA 92103
(844)747 0474
SU -
M 8:30-3:30
TU 8:00-0:30
W -
TH 8:30-3:30
F -
SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Reyes, Estela

Female

License #: AC18494

NPI#: 1376106377

9333 Genesee Ave Ste 200
San Diego, CA 92121
(800)926 8273
SU -
M 9:00-5:00
TU 9:00-5:00
W 9:00-5:00
TH 9:00-5:00
F 9:00-5:00
SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Robles, Ma Regina Blanca

Female

License #: 19279

NPI#: 1184386419

6719 Alvarado Rd Ste 304
San Diego, CA 92120
(858)673 4400
SU -
M -
TU 9:00-6:00
W -
TH 9:00-6:00
F -
SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Sakya, Namrata

Female

*License #: 19330**NPI#: 1558021519*

3080 N Park Way
San Diego, CA 92104
(619)294 6616
SU -
M 9:30-5:00
TU 9:00-4:00
W 9:30-11:30
TH 9:30-1:30
F 9:30-4:00
SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Schlesinger, William**

Male

*License #: 18989**NPI#: 1841881091*

3080 N Park Way
San Diego, CA 92104
(619)294 6616
SU -
M 9:00-5:00
TU 9:00-5:00
W 9:00-5:00
TH 9:00-5:00
F 9:00-5:00
SA 9:00-5:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Seitz, Gretchen**

Female

*License #: AC8597**NPI#: 1396876959*

3320 2nd Ave
San Diego, CA 92103
(619)302 6846
SU -
M 3:00-7:00
TU 3:00-7:00
W 3:00-7:00
TH 9:30-6:30
F 3:00-7:00
SA 10:00-2:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Schlesinger, William**

Male

*License #: 18989**NPI#: 1841881091*

9150 Chesapeake Dr Ste 120
San Diego, CA 92123
(619)542 0884
SU -
M 8:00-6:00
TU 8:00-6:00
W 8:00-6:00
TH 8:00-6:00
F 8:00-6:00
SA 8:00-2:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Seitz, Gretchen**

Female

*License #: AC8597**NPI#: 1396876959*

9995 Carmel Mountain Rd Ste B10-B11
San Diego, CA 92129
(844)200 2426
SU -
M -
TU -
W -
TH -
F -
SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Smyth, Carolyn**

Female

*License #: AC17515**NPI#: 1730614413*

3636 5th Ave Ste 104
San Diego, CA 92103
(619)431 0547
SU -
M 1:00-5:00
TU -
W -
TH 1:00-5:00
F 9:00-1:00
SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Sperber, Gregory

Male

*License #: AC9297**NPI#: 1629125745*

5030 Camino de la Siesta Ste 208

San Diego, CA 92108

(619)881 0029

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA 9:00-1:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Szablak, Sharron**

Female

*License #: AC18757**NPI#: 1669019485*

5602 El Cajon Blvd

San Diego, CA 92115

(619)601 4103

SU -

M 9:00-3:00

TU 5:00-8:00

W 1:30-7:00

TH 9:00-3:00

F 9:00-4:00

SA 10:00-2:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Tang-Ritchie, Leng**

Female

*License #: AC14241**NPI#: 1497044580*

200 W Arbor Dr

San Diego, CA 92103

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Suess, Jill**

Female

*License #: AC7054**NPI#: 1417027871*

4732 Point Loma Ave Ste D

San Diego, CA 92107

(858)382 3938

SU -

M -

TU 9:00-7:00

W -

TH 9:00-7:00

F 1:00-7:00

SA 10:00-4:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Tang-Ritchie, Leng**

Female

*License #: AC14241**NPI#: 1497044580*

9333 Genesee Ave Ste 200

San Diego, CA 92121

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Tang-Ritchie, Leng**

Female

*License #: AC14241**NPI#: 1497044580*

4910 Directors Pl Ste 250

San Diego, CA 92121

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No*

Tang-Ritchie, Leng

Female

*License #: AC14241**NPI#: 1497044580*

330 Lewis St Ste 400

San Diego, CA 92103

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Teixeira, M David**

Male

*License #: AC8821**NPI#: 1780606095*

6612 Mission Gorge Rd Ste B

San Diego, CA 92120

(619)283 2335

SU -

M 9:00-6:00

TU -

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Tom, Celia**

Female

*License #: AC1577**NPI#: 1932208089*

1919 Grand Ave Ste 1E

San Diego, CA 92109

(858)270 5454

SU -

M 10:00-6:00

TU -

W -

TH -

F 10:00-6:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Tang-Ritchie, Leng**

Female

*License #: AC14241**NPI#: 1497044580*

9909 Mira Mesa Blvd Ste 200

San Diego, CA 92131

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Thomas, Enid Rose**

Female

*License #: AC8407**NPI#: 1659599223*

3023 Bunker Hill St Ste 201

San Diego, CA 92109

(619)548 6733

SU 10:00-1:00

M 12:00-8:00

TU 11:00-7:00

W 9:00-5:00

TH 12:00-8:00

F 2:00-6:00

SA 9:00-5:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Tran, Quang**

Male

*License #: AC11040**NPI#: 1821162199*

9625 Black Mountain Rd Ste 306

San Diego, CA 92126

(858)761 5317

SU -

M 2:00-6:00

TU 9:00-3:00

W -

TH 9:00-6:00

F 2:00-6:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Tran, Gary

Male

License #: 19351*NPI#:* 12055954695265 University Ave
San Diego, CA 92105
(619)376 2176

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Wang, Minchen**

Male

License #: AC6456*NPI#:* 14179448933023 Bunker Hill St Ste 206
San Diego, CA 92109
(858)688 7294

SU -

M 9:00-6:00

TU -

W 9:00-6:00

TH -

F 10:00-6:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Williams, Melinda**

Female

License #: AC13221*NPI#:* 13263614034870 Santa Monica Ave Ste 2C
San Diego, CA 92107
(619)337 4333

SU 9:00-4:00

M 9:00-6:00

TU -

W 9:00-6:00

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Velez, Kara**

Female

License #: AC18131*NPI#:* 135683470916776 Bernardo Center Dr Ste 211
San Diego, CA 92128
(619)995 0966

SU -

M 3:00-6:00

TU -

W 9:00-6:00

TH -

F 9:00-2:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Wells, Emily**

Female

License #: AC19023*NPI#:* 18610750469150 Chesapeake Dr Ste 120
San Diego, CA 92123
(619)542 0884

SU -

M 8:00-6:00

TU 8:00-6:00

W 8:00-6:00

TH 8:00-6:00

F 8:00-6:00

SA 8:30-0:30

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Woodhouse, Louella**

Female

License #: AC7670*NPI#:* 19523326863320 3rd Ave Ste B
San Diego, CA 92103
(619)293 3094

SU -

M -

TU 9:00-6:00

W -

TH 9:00-6:00

F 9:00-6:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No

Wunsch, Lindsay

Female

License #: AC18621*NPI#:* 1174096283

1545 Hotel Cir S Ste 185

San Diego, CA 92108

(631)897 4772

SU -

M 8:00-7:00

TU 12:00-7:00

W 8:00-1:00

TH 1:00-7:00

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Zimmer, Barry**

Male

License #: AC9358*NPI#:* 1720102601

11650 Iberia Pl Ste 215

San Diego, CA 92128

(858)487 8246

SU -

M -

TU 9:00-5:30

W -

TH 9:00-5:30

F 9:00-5:30

SA 8:30-0:30

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Cole, Jessica**

Female

License #: AC11426*NPI#:* 1467678797

815 Grand Ave Ste 105

San Marcos, CA 92078

(760)891 8083

SU -

M -

TU 10:30-6:00

W 9:00-5:00

TH 10:30-6:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Yokomori, Sachiko**

Female

License #: AC19970*NPI#:* 1407625973

1545 Hotel Cir S Ste 120

San Diego, CA 92108

(619)693 8559

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Zinner, Travis**

Male

License #: 19038*NPI#:* 1073180394

11665 Avena Pl Ste 205

San Diego, CA 92128

(858)733 0832

SU -

M -

TU -

W 8:00-6:00

TH 8:00-6:00

F 8:00-6:00

SA 8:00-6:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Gonzalez, Andres**

Male

License #: AC15708*NPI#:* 1841857729

1595 Grand Ave Ste 100

San Marcos, CA 92078

(760)736 6767

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes*

Son, Jae Jin

Female

*License #: AC8587**NPI#: 1649619412*

277 Rancheros Dr Ste 101

San Marcos, CA 92069

(760)650 6660

SU -

M 9:00-6:00

TU -

W -

TH -

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Handy, Heidi**

Female

*License #: AC8648**NPI#: 1518024785*

9307 Carlton Hills Blvd Ste A

Santee, CA 92071

(619)280 7784

SU -

M 10:00-5:00

TU 10:00-5:00

W 10:00-5:00

TH 10:00-5:00

F 10:00-3:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Seo, Wanhee**

Female

*License #: AC18035**NPI#: 1366072126*

9225 Carlton Hills Blvd Ste 18

Santee, CA 92071

(858)282 8320

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Dang, Sheri**

Female

*License #: AC17713**NPI#: 1225567001*

9225 Carlton Hills Blvd Ste 18

Santee, CA 92071

(619)738 5374

SU -

M 9:20-6:00

TU -

W 9:20-1:30

TH 9:20-6:00

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Marcy, Melissa**

Female

*License #: AC17002**NPI#: 1730535519*

10201 Mission Gorge Rd Ste A

Santee, CA 92071

(619)354 9570

SU -

M -

TU 9:00-3:00

W -

TH 12:00-6:00

F 9:00-3:00

SA 10:00-4:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Mayberry, Charles**

Male

*License #: AC3641**NPI#: 1487685012*

765 Academy Dr

Solana Beach, CA 92075

(858)755 5215

SU -

M 10:00-6:00

TU 10:00-6:00

W 10:00-6:00

TH 10:00-6:00

F 10:00-6:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Son, Jae Jin

Female

*License #: AC8587**NPI#: 1649619412*

990 Highland Dr Ste 320

Solana Beach, CA 92075

(760)650 6660

SU -

M -

TU 8:00-8:00

W -

TH -

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Wells, Emily**

Female

*License #: AC19023**NPI#: 1861075046*

444 S Cedros Ave Ste 120

Solana Beach, CA 92075

(760)566 7848

SU -

M -

TU -

W -

TH -

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Kim, Min Joo**

Male

*License #: AC13813**NPI#: 1689941791*

115 Main St

Vista, CA 92084

(760)726 9660

SU -

M -

TU -

W -

TH 8:30-6:00

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Stevenson, Nancy**

Female

*License #: AC4332**NPI#: 1306009956*

765 Academy Dr

Solana Beach, CA 92075

(858)344 0889

SU -

M -

TU -

W 9:00-6:00

TH -

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Chen, Yuelan**

Female

*License #: AC9705**NPI#: 1265696785*

1830 Hacienda Dr Ste 3

Vista, CA 92081

(760)806 0064

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA 9:00-1:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Park, Seonghyeon**

Male

*License #: AC18102**NPI#: 1295254324*

410 S Melrose Dr Ste 200

Vista, CA 92081

(760)630 8060

SU -

M 9:00-5:30

TU 9:00-5:30

W -

TH 9:00-5:30

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Song, Carol

Female

License #: AC11388

NPI#: 1518166685

1000 Vale Terrace Dr

Vista, CA 92084

(760)631 5000

SU -

M 8:00-7:00

TU 8:00-7:00

W 8:00-7:00

TH 8:00-7:00

F 8:00-5:00

SA 9:00-4:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

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Russian Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону 1-800-452-4413. Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

Arabic إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول ليس عليك سوى الاتصال بنا على 1-800-452-4413. سيقوم شخص ما يتحدث العربية بمساعدتك. هذه خدمة مجانية على مترجم فوري،

Hindi हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं। एक दुभाषिया प्राप्त करने के लिए, बस हमें 1-800-452-4413 पर फोन करें। कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है। यह एक मुफ्त सेवा है।

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Ukrainian Ми надаємо безкоштовні послуги перекладача, щоб відповісти на будь-які запитання щодо нашого плану лікування чи надання лікарських засобів. Щоб скористатися послугами перекладача, просто зателефонуйте нам за номером 1-800-452-4413. Вам може допомогти хтось, хто розмовляє Українською. Це безкоштовна послуга.

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Punjabi ਪੰਜਾਬੀ ਸਾਡੀ ਸਿਹਤ ਜਾਂ ਡਰੱਗ ਪਲਾਨ ਬਾਰੇ ਤੁਹਾਡੇ ਕਿਸੇ ਵੀ ਸਵਾਲ ਦਾ ਜਵਾਬ ਦੇਣ ਲਈ ਸਾਡੇ ਕੋਲ ਮੁਫਤ ਦੁਬਾਸੀਏ ਸੇਵਾਵਾਂ ਉਪਲਬਧ ਹਨ। ਇੱਕ ਦੁਬਾਸੀਆ ਲੈਣ ਲਈ, ਸਾਨੂੰ 1-800-452-4413 'ਤੇ ਕਾਲ ਕਰੋ। ਪੰਜਾਬੀ ਬੋਲਣ ਵਾਲਾ ਕੋਈ ਵੀ ਵਿਅਕਤੀ ਤੁਹਾਡੀ ਮਦਦ ਕਰ ਸਕਦਾ ਹੈ। ਇਹ ਇੱਕ ਮੁਫਤ ਸੇਵਾ ਹੈ।

Khmer យើងមានសេវាអ្នកបកប្រែផ្ទាល់មាត់ដោយឥតគិតថ្លៃដើម្បីឆ្លើយសំណួរនានា ដែលអ្នកអាចមានអំពីសុខភាព ឬគម្រោងឱសថរបស់យើង។ ដើម្បីទទួលបានអ្នកបកប្រែផ្ទាល់មាត់ម្នាក់ សូមទូរស័ព្ទទមកយើងខ្ញុំតាមលេខ 1-800-452-4413។ អ្នកណាម្នាក់ដែលនិយាយភាសាខ្មែរអាចជួយអ្នកបាន។ សេវានេះមិនគិតថ្លៃនោះទេ។

Mien Yie mbuo mbenc duqv maaih tengx wang-henh nzie faan waac mienh liouh dau waac bun muangx dongh nzunc baav meih maaih waac naaic taux yie mbuo gorngv taux yie nyei heng-wangc jauv-louc a'fai ndie-daan. Liouh lorx zipv longc faan waac nor, douc waac lorx taux yie mbuo yiem njiec naaiv 1-800-452-4413. Maaih mienh gorngv benx Mienh waac haih tengx nzie duqv meih. Naaiv se benx wang-henh nzie weih jauv-louc oc.

Lao ພວກເຮົາມີນາຍພາສາໂດຍບໍ່ເສຍຄ່າເພື່ອຕອບຄໍາຖາມຕ່າງໆທີ່ທ່ານອາດຈະມີກ່ຽວກັບສຸຂະພາບ ຫຼື ແຜນການຢາຂອງພວກເຮົາ. ເພື່ອໃຫ້ໄດ້ຮັບນາຍພາສາ, ພຽງແຕ່ໂທຫາພວກເຮົາທີ່ເບີ 1-800-452-4413. ມີຜູ້ຮູ້ ພາສາລາວ ສາມາດຊ່ວຍທ່ານ. ມີແມ່ນບໍລິການໂດຍບໍ່ເສຍຄ່າ.

Armenian Մեզ մոտ հասանելի են անվճար թարգմանչական ծառայություններ՝ մեր առողջապահական կազմակերպության հետ կապված Ձեր ցանկացած հարցին պատասխանելու համար: Թարգմանիչ լինելու համար պարզապես զանգահարեք մեզ 1-800-452-4413 հեռախոսահամարով: Ձեզ կօգնի հարցերն իմացող թարգմանիչը: Ծառայությունն անվճար է:

Farsi ما خدمات مترجم شفاهی رایگان ارائه می‌دهیم تا به هر گونه سوالی که در مورد طرح سلامت یا داروی ما دارید پاسخ دهیم. برای داشتن مترجم شفاهی، کفایت با ما به شماره 1-800-452-4413 تماس بگیرید. کسی که فارسی صحبت می‌کند می‌تواند به شما کمک کند. این یک خدمت رایگان است.

Thai ภาษาไทย เรามีบริการล่ามฟรีเพื่อตอบคำถามของคุณเกี่ยวกับสุขภาพหรือแผนด้านยาของคุณ หากต้องการบริการล่าม โปรดโทรหาเราที่ 1-800-452-4413 มีคนที่สามารถพูดภาษาไทยได้เพื่อช่วยเหลือคุณ บริการนี้เป็นบริการฟรี

Multi-Language Insert
Multi-Language Interpreter Services

English We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at 1-800-776-4466. Someone who speaks English can help you. This is a free service.

Spanish Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al 1-800-776-4466. Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

Chinese Mandarin 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务，请致电 1-800-776-4466。我们的中文工作人员很乐意帮助您。这是一项免费服务。

Chinese Cantonese 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯服務。如需翻譯服務，請致電 1-800-776-4466。我們講中文的人員將樂意為您提供幫助。這是一項免費服務。

Tagalog Mayroon kaming libreng serbisyo sa pagsasaling-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggagamot. Upang makakuha ng tagasaling-wika, tawagan lamang kami sa 1-800-776-4466. Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

French Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au 1-800-776-4466. Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

Vietnamese Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi 1-800-776-4466 sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.

German Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher erreichen Sie unter 1-800-776-4466. Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

Korean 당사는 의료 보험 또는 약품 보험에 관한 질문에 대해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 1-800-776-4466 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

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Mien Yie mbuo mbenc duqv maaih tengx wang-henh nzie faan waac mienh liouh dau waac bun muangx dongh nzunc baav meih maaih waac naaic taux yie mbuo gorngv taux yie nyei heng-wangc jauv-louc a'fai ndie-daan. Liouh lorx zipv longc faan waac nor, douc waac lorx taux yie mbuo yiem njiec naaiv 1-800-776-4466. Maaih mienh gorngv benx Mienh waac haih tengx nzie duqv meih. Naaiv se benx wang-henh nzie weih jauv-louc oc.

Lao ພວກເຮົາມີນາຍພາສາໂດຍບໍ່ເສຍຄ່າເພື່ອຕອບຄໍາຖາມຕ່າງໆທີ່ທ່ານອາດຈະມີກ່ຽວກັບສຸຂະພາບ ຫຼື ແຜນການຢາຂອງພວກເຮົາ. ເພື່ອໃຫ້ໄດ້ຮັບນາຍພາສາ, ພຽງແຕ່ໂທຫາພວກເຮົາທີ່ເບີ 1-800-776-4466. ມີຜູ້ຮູ້ພາສາລາວ ສາມາດຊ່ວຍທ່ານ. ນີ້ແມ່ນບໍລິການໂດຍບໍ່ເສຍຄ່າ.

Armenian Մեզ քոտ հասանելի է և անվճար թարգմանչական ծառայություններ՝ մեր առողջապահական կազմակերպիչի հետ կապված Ձեր ցանկացած հարցի և պատասխանելու համար: Թարգմանիչ և ներկայացուցիչ համար պարզապես ցանցահարեք մեզ 1-800-776-4466 հեռախոսախոսակց: Ձեզ կօգնի հարցերն իմացող թարգմանիչը: Ծառայությունն անվճար է:

Farsi ما خدمات مترجم شفاهی رایگان ارائه می‌دهیم تا به هر گونه سوالی که در مورد طرح سلامت یا داروی ما دارید پاسخ دهیم. برای داشتن مترجم شفاهی، کافیت با ما به شماره 1-800-776-4466 تماس بگیرید. کسی که فارسی صحبت می‌کند می‌تواند به شما کمک کند. این یک خدمت رایگان است.

Thai ภาษาไทย เรามีบริการล่ามฟรีเพื่อตอบคำถามของคุณเกี่ยวกับสุขภาพหรือแผนด้านยาของคุณ หากต้องการบริการล่าม โปรดโทรหาเราที่ 1-800-776-4466 มีคนที่สามารถพูดภาษาไทยได้เพื่อช่วยเหลือคุณ บริการนี้เป็นบริการฟรี



LANGUAGE ASSISTANCE NOTICE

English ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-800-452-4413 (TTY: 711), 8:00 a.m. to 8:00 p.m., seven days a week. The call is free.

中文 Chinese 请注意：如果您说中文，可以免费获得语言协助服务。请拨打 1-800-452-4413 (听障和语障专线：711)，每周七天办公，早上 8:00 至晚上 8:00。此电话为免付费专线。

한국어 Korean 주: 귀하가 한국어를 사용하시는 경우, 무료로 언어 지원 서비스를 이용하실 수 있습니다. 1-800-452-4413 (TTY: 711) 번으로 주 7 일, 오전 8 시부터 오후 8 시까지 전화하실 수 있습니다. 이 전화는 무료입니다.

Русский Russian ОБРАТИТЕ ВНИМАНИЕ! Если Вы говорите по-русски, мы можем предложить Вам бесплатные услуги языковой поддержки. Звоните по телефону 1-800-452-4413 (TTY: 711) с 8:00 до 20:00 без выходных. Звонок бесплатный.

فارسی Farsi

توجه: اگر به زبان فارسی صحبت می کنید، خدمات امداد زبانی بدون اخذ هزینه در اختیار شما می باشد. با شماره 1-800-452-4413- 4413 (TTY: 711)، از ساعت 8:00 صبح تا 8:00 شب در هفت روز هفته تماس بگیرید. این تماس رایگان است.

भाषा Hindi ध्यान: यदि आप भाषा बोलते हैं, तो आपके लिए भाषा सहायता सेवाएं नि:शुल्क उपलब्ध हैं। फ़ोन करना 1-800-452-4413 (TTY: 711), सुबह 8:00 बजे से शाम 8:00 बजे तक, सप्ताह के सातों दिन। फ़ोन करना फ़्री है।

Lus Hmoob Hmong LUS CEEV: Yog koj hais Lus Hmoob, muaj kev pab txhais lus pub dawb rau koj. Hu rau 1-800-452-4413 (TTY: 711), 8:00 teev sawv ntxov txog 8:00 teev tsaus ntuj, xya hnuv hauv ib lub as thiv. Qhov hu xov tooj no yog hu dawb xwb.

Español Spanish ATENCIÓN: Si usted habla español, hay a su disposición servicios de asistencia de idiomas sin costo. Llame al 1-800-452-4413 (TTY: 711), de 8:00 a.m. a 8:00 p.m., los siete días de la semana. La llamada es gratuita.

Tiếng Việt Vietnamese LƯU Ý: Nếu quý vị nói tiếng Việt, chúng tôi sẽ cung cấp miễn phí dịch vụ hỗ trợ ngôn ngữ cho quý vị. Gọi số 1-800-452-4413 (TTY: 711), 8 giờ sáng đến 8 giờ tối, bảy ngày trong tuần. Cuộc gọi này miễn phí.

Tagalog PAUNAWA: Kung nagsasalita kayo ng Tagalog, may mga available na lib्रेng serbisyo ng tulong sa wika para sa inyo. Tumawag sa 1-800-452-4413 (TTY: 711), 8:00 a.m. hanggang 8:00 p.m., pitong araw sa isang linggo. Libre ang tawag.

العربية Arabic

تنبيه: إذا كنت تتحدث اللغة العربية، يتوفر لك خدمات المساعدة اللغوية المجانية. اتصل على الرقم 1-800-452-4413 (TTY: 711)، من الساعة 8:00 صباحًا إلى 8:00 مساءً طوال أيام الأسبوع. علمًا بأن هذه المكالمات مجانية.

ພາສາລາວ Laotian ສິ່ງສຳຄັນ: ຖ້າທ່ານເວົ້າພາສາລາວແມ່ນມີບໍລິການຊ່ວຍເຫຼືອທາງດ້ານພາສາບໍ່ເສຍຄ່າໃຫ້ທ່ານ. ໂທຫາເບີ 1-800-452-4413 (TTY: 711), 8:00 ໂມງເຊົ້າ ຫາ 8:00 ໂມງແລງ, ເຈັດວັນຕໍ່ອາທິດ. ການໂທແມ່ນບໍ່ເສຍຄ່າ.

日本語 Japanese 注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-800-452-4413 (TTY: 711) まで、お電話にてご連絡ください。毎日午前 8 時から午後 8 時まで受け付けています。通話は無料です。

ภาษาไทย Thai

เรียน หากคุณพูดภาษา ภาษาไทย เรามีบริการความช่วยเหลือด้านภาษาให้แก่คุณโดยไม่มีค่าใช้จ่าย โทร 1-800-452-4413 (TTY: 711) 8:00 น. ถึง 20:00 น. ได้ตลอดเจ็ดวันต่อสัปดาห์ โทรฟรี ไม่มีค่าใช้จ่าย

ਪੰਜਾਬੀ Punjabi ਸਾਵਧਾਨ : ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ, ਉਪਲਬਧ ਹਨ | ਕਾਲ ਕਰੋ 1-800-452-4413 (TTY: 711), ਸਵੇਰੇ 8:00 ਵਜੇ ਤੋਂ ਸ਼ਾਮ 8:00 ਵਜੇ ਤੱਕ, ਹਫ਼ਤੇ ਦੇ ਸੱਤ ਦਿਨ ਹਫ਼ਤੇ ਦੇ ਸੱਤ ਦਿਨ. ਕਾਲ ਫ੍ਰੀ ਹੈ |

ខ្មែរ Khmer ចាប់អារម្មណ៍: បើសិនអ្នកនិយាយភាសាខ្មែរ សេវាជំនួយភាសា គឺមានសំរាប់អ្នក ដោយឥតគិតថ្លៃ។ ហៅ 1-800-452-4413 (TTY: 711) ម៉ោង 8:00 ព្រឹក ដល់ 8:00 យប់ ប្រាំពីរថ្ងៃមួយអាទិត្យ។ គឺឥតគិតថ្លៃទេ។

Հայերեն Armenian ՈՒՇԱԴՐՈՒԹՅՈՒՆ՝ Եթե խոսում եք հայերեն, Ձեզ տրամադրվելի են անվճար լեզվաբան օգնություն ծառայություններ: Ձանգահայեր 1-800-452-4413 (TTY՝ 711) համարով, 8:00-ից 20:00, շաբաթը յոթ օր: Հեռախոսազանգն անվճար է:

Українська Ukrainian ЗВЕРНІТЬ УВАГУ! Якщо Ви розмовляєте українською, ми можемо запропонувати Вам безкоштовні послуги мовної підтримки. Телефонуйте 1-800-452-4413 (TTY: 711) з 8:00 до 20:00 без вихідних. Дзвінок безкоштовний.

Mienh Mien TOV JANGX LONGX OC: Beiv taix meih gorngv Mienh waac nor, ninh mbuo gorn zangc duqv mbenc nzoih wang-henh nzie weih faan waac bun meih muangx maiv zuqc feix liuc cuotv zinh nyaanh. Douc waac lorx taux 1-800-452-4413 (TTY: 711), 8:00 diemv ziangh hoc lungnh ndorm mingh taux 8:00 ziangh hoc lungnh muonz, yietc norm liv baaiz se koi nzoih siec hnoi. Naaiv norm douc waac gorn se wang-henh longc maiv zuqc feix liuc cuotv zinh nyaanh.

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